

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Dallas Regional Office
1301 Young Street, Suite 833
Dallas, Texas 75202



DIVISION OF MEDICAID & CHILDREN'S HEALTH - REGION VI

April 11, 2014

Ms. Julie Weinberg, Director
Medical Assistance Division
New Mexico Department of Human Services
P.O. Box 2348
Santa Fe, New Mexico 87504

Dear Ms. Weinberg:

We have reviewed the proposed amendment to your Medicaid State Plan submitted under Transmittal Number (TN) 13-24. With the approval of TN 13-24, Centers for Medicare and Medicaid Services (CMS) has reviewed and approved the State's residency regulations, and policies regarding interstate agreements and temporary absence in regards to 42 Code of Federal Regulations (CFR) 435.603, and according to the requirements of the Social Security Act 1902(e)(14) and the Affordable Care Act (ACA).

TN 13-24 is approved with an effective date of January 1, 2014, as requested. A signed and dated copy of the TN 13-24 summary is enclosed, along with the approved plan pages and their attachments.

If you have any questions, please contact Stacey Shuman at (214) 767-6479.

Sincerely,

A handwritten signature in black ink that reads "Bill Brooks". The signature is written in a cursive, slightly slanted style.

Bill Brooks
Associate Regional Administrator
Division of Medicaid & Children's Health
Operations

Enclosures

Medicaid State Plan Eligibility: Summary Page (CMS 179)

State/Territory name: New Mexico

Transmittal Number:

Please enter the Transmittal Number (TN) in the format ST-YY-0000 where ST= the state abbreviation, YY = the last two digits of the submission year, and 0000 = a four digit number with leading zeros. The dashes must also be entered.

NM-13-0024

Proposed Effective Date

01/01/2014 (mm/dd/yyyy)

Federal Statute/Regulation Citation

42 CFR 435.403 and 1902(b) of the Act

Federal Budget Impact

	Federal Fiscal Year	Amount
First Year	2014	\$ 0.00
Second Year	2015	\$ 0.00

Subject of Amendment

S88 Non-Financial Eligibility - Updates State Residency criteria used for Section 42 CFR 435.403 1902(b) of the Act

Governor's Office Review

Governor's office reported no comment

Comments of Governor's office received

Describe:

[Empty text box for describing comments]

No reply received within 45 days of submittal

Other, as specified

Describe:

Authority Delegated to the Medicaid Director

Signature of State Agency Official

Submitted By: Caitlin Kuennen Breen

Last Revision Date: Apr 8, 2014

Submit Date: Jan 13, 2014

Date Received: 1/13/14

Date Approved: 4/11/14

Signature of Regional Official:

Printed Name and Title: Bill Brooks, Associate Regional Administrator, Division of Medicaid and Children's Health

**SUPERSEDING PAGES OF
STATE PLAN MATERIAL**

TRANSMITTAL NUMBER:

STATE:

NM-13-0024

New Mexico

**PAGE NUMBER OF THE PLAN SECTION OR
ATTACHMENT:**

**PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT *(If Applicable)*:**

S88 Non-Financial Eligibility- State Residency

Section 2, Page 13, Item 2.3, TN 87-12
Attachment 2.6-A: Page 3, TN 09-08



Medicaid Eligibility

OMB Control Number 0938-1148

OMB Expiration date: 10/31/2014

Non-Financial Eligibility State Residency

S88

42 CFR 435.403

State Residency

- The state provides Medicaid to otherwise eligible residents of the state, including residents who are absent from the state under certain conditions.

Individuals are considered to be residents of the state under the following conditions:

- Non-institutionalized individuals age 21 and over, or under age 21, capable of indicating intent and who are emancipated or married, if the individual is living in the state and:
 - Intends to reside in the state, including without a fixed address, or
 - Entered the state with a job commitment or seeking employment, whether or not currently employed.
- Individuals age 21 and over, not living in an institution, who are not capable of indicating intent, are residents of the state in which they live.
- Non-institutionalized individuals under 21 not described above and non IV-E beneficiary children:
 - Residing in the state, with or without a fixed address, or
 - The state of residency of the parent or caretaker, in accordance with 42 CFR 435.403(h)(1), with whom the individual resides.
- Individuals living in institutions, as defined in 42 CFR 435.1010, including foster care homes, who became incapable of indicating intent before age 21 and individuals under age 21 who are not emancipated or married:
 - Regardless of which state the individual resides, if the parent or guardian applying for Medicaid on the individual's behalf resides in the state, or
 - Regardless of which state the individual resides, if the parent or guardian resides in the state at the time of the individual's placement, or
 - If the individual applying for Medicaid on the individual's behalf resides in the state and the parental rights of the institutionalized individual's parent(s) were terminated and no guardian has been appointed and the individual is institutionalized in the state.
- Individuals living in institutions who became incapable of indicating intent at or after age 21, if physically present in the state, unless another state made the placement.
- Individuals who have been placed in an out-of-state institution, including foster care homes, by an agency of the state.
- Any other institutionalized individual age 21 or over when living in the state with the intent to reside there, and not placed in the institution by another state.
- IV-E eligible children living in the state, or



Medicaid Eligibility

Otherwise meet the requirements of 42 CFR 435.403.



Medicaid Eligibility

Meet the criteria specified in an interstate agreement.

Yes No

The state has interstate agreements with the following selected states:

- | | | | |
|--|---|--|--|
| <input checked="" type="checkbox"/> Alabama | <input checked="" type="checkbox"/> Illinois | <input checked="" type="checkbox"/> Montana | <input checked="" type="checkbox"/> Rhode Island |
| <input checked="" type="checkbox"/> Alaska | <input checked="" type="checkbox"/> Indiana | <input checked="" type="checkbox"/> Nebraska | <input checked="" type="checkbox"/> South Carolina |
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The interstate agreement contains a procedure for providing Medicaid to individuals pending resolution of their residency status and criteria for resolving disputed residency of individuals who (select all that apply):

- Are IV-E eligible
- Are in the state only for the purpose of attending school
- Are out of the state only for the purpose of attending school
- Retain addresses in both states
- Other type of individual

The state has a policy related to individuals in the state only to attend school.

Yes No

Otherwise meet the criteria of resident, but who may be temporarily absent from the state.

The state has a definition of temporary absence, including treatment of individuals who attend school in another state.

Yes No



Medicaid Eligibility

Provide a description of the definition:

Residence is not abandoned by temporary absences. Temporary absences occur when recipients leave New Mexico for specific purposes with time-limited goals. An individual may be temporarily absent from the State if the person intends to return when the purpose of the absence has been accomplished, unless another State has determined the individual is a resident there for purposes of Medicaid.

PRA Disclosure Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.



Medicaid Eligibility

OMB Control Number 0938-1148

OMB Expiration date: 10/31/2014

Non-Financial Eligibility State Residency

S88

42 CFR 435.403

State Residency

- The state provides Medicaid to otherwise eligible residents of the state, including residents who are absent from the state under certain conditions.

Individuals are considered to be residents of the state under the following conditions:

- Non-institutionalized individuals age 21 and over, or under age 21, capable of indicating intent and who are emancipated or married, if the individual is living in the state and:
 - Intends to reside in the state, including without a fixed address, or
 - Entered the state with a job commitment or seeking employment, whether or not currently employed.
- Individuals age 21 and over, not living in an institution, who are not capable of indicating intent, are residents of the state in which they live.
- Non-institutionalized individuals under 21 not described above and non IV-E beneficiary children:
 - Residing in the state, with or without a fixed address, or
 - The state of residency of the parent or caretaker, in accordance with 42 CFR 435.403(h)(1), with whom the individual resides.
- Individuals living in institutions, as defined in 42 CFR 435.1010, including foster care homes, who became incapable of indicating intent before age 21 and individuals under age 21 who are not emancipated or married:
 - Regardless of which state the individual resides, if the parent or guardian applying for Medicaid on the individual's behalf resides in the state, or
 - Regardless of which state the individual resides, if the parent or guardian resides in the state at the time of the individual's placement, or
 - If the individual applying for Medicaid on the individual's behalf resides in the state and the parental rights of the institutionalized individual's parent(s) were terminated and no guardian has been appointed and the individual is institutionalized in the state.
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- Any other institutionalized individual age 21 or over when living in the state with the intent to reside there, and not placed in the institution by another state.
- IV-E eligible children living in the state, or



Medicaid Eligibility

Otherwise meet the requirements of 42 CFR 435.403.



Medicaid Eligibility

Meet the criteria specified in an interstate agreement.

Yes No

The state has interstate agreements with the following selected states:

- | | | | |
|--|---|--|--|
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- Are IV-E eligible
- Are in the state only for the purpose of attending school
- Are out of the state only for the purpose of attending school
- Retain addresses in both states
- Other type of individual

The state has a policy related to individuals in the state only to attend school.

Yes No

Otherwise meet the criteria of resident, but who may be temporarily absent from the state.

The state has a definition of temporary absence, including treatment of individuals who attend school in another state.

Yes No



Medicaid Eligibility

Provide a description of the definition:

Residence is not abandoned by temporary absences. Temporary absences occur when recipients leave New Mexico for specific purposes with time-limited goals. An individual may be temporarily absent from the State if the person intends to return when the purpose of the absence has been accomplished, unless another State has determined the individual is a resident there for purposes of Medicaid.

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Medicaid State Plan Eligibility: General Information

State/Territory name: New Mexico

Transmittal Number: NM-13-0024

General Information

Submission Title: New Mexico Medicaid - Residency (S88)

Description: Residency S88 - State affirms residency regulations - Addresses interstate agreements and temporary absence

Populations Covered:

Mandatory Coverage:

- Parents and Other Caretaker Relatives
- Pregnant Women
- Infants and Children under Age 19
- Adult Group
- Former Foster Care Children

Options for Coverage:

- Individuals above 133% FPL
- Optional Coverage of Parents and Other Caretaker Relatives
- Reasonable Classification of Individuals under Age 21
- Children with Non IV-E Adoption Assistance
- Optional Targeted Low Income Children
- Individuals with Tuberculosis
- Independent Foster Care Adolescents
- Individuals Eligible for Family Planning Services

Medicaid State Plan Eligibility: File Management Summary

Type of SPA	Form Code	Form Name/Description	Uploaded?	
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Type of SPA	Form Code	Form Name/Description	Uploaded?	
Residency	S88	State affirms residency regulations and addresses interstate agreements and temporary absence	yes	View

Support Documents

Please provide a short description of this support document: Superseding Page Document - S88

Uploaded Document Name: NM_S88_Superseding_Page_Document_Jan 2014.doc

Medicaid State Plan Eligibility: Tribal Input

One or more Indian Health Programs or Urban Indian Organizations furnish health care services in this State.

This State Plan Amendment is likely to have a direct effect on Indians, Indian health programs or Urban Indian Organizations.

The State has solicited advice from Indian Health Programs, Urban Indian Organizations, and/or Tribal governments prior to submission of this State Plan Amendment.

Complete the following information regarding any tribal consultation conducted with respect to this submission:

Tribal consultation was conducted in the following manner. States are not required to consult with Indian tribal governments, but if such consultation was conducted voluntarily, provide information about such consultation below:

- Indian Tribes
- Indian Health Programs
- Urban Indian Organization

The state must upload copies of documents that support the solicitation of advice in accordance with statutory requirements, including any notices sent to Indian Health Programs and/or Urban Indian Organizations, as well as attendee lists if face-to-face meetings were held. Also upload documents with comments received from Indian Health Programs or Urban Indian Organizations and the state's responses to any issues raised. Alternatively indicate the key issues and summarize any comments received below and describe how the state incorporated them into the design of its program.

Documents:

Please provide a short description of this support document: Copy of tribal consultation letter seeking advice or comments on SPAs; sent October 23, 2013

Uploaded Document Name: SPA TC Letter 10 23 13.pdf

Please provide a short description of this support document: August 29, 2013 Tribal Consultation: Agenda, Sign-In sheets (attendee lists), lists of topics (SPAs) for discussion and anticipated impact, presentation on the application, eligibility/enrollment process, expansion, etc

Uploaded Document Name: Aug 29 13 Tribal Consultation documents.pdf

Please provide a short description of this support document: Mailing lists containing the names and other contact details for the IHS and 638 facilities to which the notices were sent.

Uploaded Document Name: IHS 638FacilityList - Mailing Addresses.xls

Please provide a short description of this support document: Mailing lists containing the names and other contact details for the tribal governors to whom the notices were sent.

Uploaded Document Name: Tribal Governors Mailing Lists.docx

Medicaid State Plan Eligibility: Summary Page (CMS 179)

State/Territory name: New Mexico

Transmittal Number: NM-13-0024

Proposed Effective Date : 01/01/2014

Federal Statute/Regulation Citation : 42 CFR 435.403 and 1902(b) of the Act

Federal Budget Impact

	Federal Fiscal Year	Amount
First Year	2014	\$ 0

Second Year	2015	\$ 0
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Subject of Amendment : S88 Non-Financial Eligibility - Updates State Residency criteria used for Section 42 CFR 435.403 1902(b) of the Act

Governor's Office Review

- Governor's office reported no comment
- Comments of Governor's office received
- No reply received within 45 days of submittal
- Other, as specified : Authority Delegated to the Medicaid Director

Signature of State Agency Official



Submitted By:

Last Revision Date:

Submit Date:



Medicaid Eligibility

OMB Control Number 0938-1148

OMB Expiration date: 10/31/2014

Non-Financial Eligibility State Residency

S88

42 CFR 435.403

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Medicaid Eligibility

Otherwise meet the requirements of 42 CFR 435.403.



Medicaid Eligibility

Meet the criteria specified in an interstate agreement.

Yes No

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- Other type of individual

The state has a policy related to individuals in the state only to attend school.

Yes No

Otherwise meet the criteria of resident, but who may be temporarily absent from the state.

The state has a definition of temporary absence, including treatment of individuals who attend school in another state.

Yes No



Medicaid Eligibility

Provide a description of the definition:

- A. Extended living in the home: An individual may be physically absent from the home and be a member of the assistance unit or budget group. Extended living in the home includes:
- (1) attending college or boarding school;
 - (2) receiving treatment in a title XIX medicaid facility (including institutionalized when meeting a nursing facility (NF) level of care (LOC) and intermediate care facilities for the mentally retarded (ICF-MRs); when an individual is a member of an ACA related assistance unit, eligibility for a long-term care medicaid category must be evaluated; the individual will remain eligible for an ACA related category during the determination of eligibility for long-term care medicaid, and if found ineligible will remain in the ACA related category;
 - (3) emergency absences: an individual absent from the home due to an emergency, who is expected to return to the household, continues to be a member of the household;
 - (4) foster care placements: a child removed from the home by a child protective services agency (tribal, bureau of Indian affairs, or children, youth and families department) will be considered to be living in the home until an adjudicatory hearing takes place; if the adjudicatory hearing results in custody being granted to some other entity, the child will be removed from the assistance unit and budget group;
 - (5) a stay in a detention center:
 - (a) regardless of adjudication status the individual continues to be a member of the household but will not be medicaid eligible;
 - (b) once an adjudicated individual leaves the detention center to receive inpatient services in a medical institution, the individual may be eligible during treatment if all other criteria are met; eligibility ceases to exist when the individual returns to the detention center.

PRA Disclosure Statement

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**SUPERSEDING PAGES OF
STATE PLAN MATERIAL**

TRANSMITTAL NUMBER:

NM-13-0024

STATE:

New Mexico

**PAGE NUMBER OF THE PLAN SECTION OR
ATTACHMENT:**

S88 Non-Financial Eligibility- State Residency

**PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable):**

Section 2, Page 13, Item 2.3, TN 87-12
Attachment 2.6-A: Page 3, TN 09-08