

State of New Mexico



FY24 SNAP OUTREACH PLAN

This report highlights the SNAP Annual Plan for Outreach

Income Support Division

July 20, 2023

1. COVER PAGE/CONTACT INFORMATION/SIGNATURES

SNAP Annual Plan for Outreach

State Agency: New Mexico Human Services Department (NMHSD)

Fiscal Year: October 1, 2023 – September 30, 2024

Primary Contacts:

Name	Title	Phone	Email
Kaski Suzuki	Food Security Coordinator		Kaski.Suzuki@hsd.nm.gov
Suzanne Duran-Vigil	Bureau Chief/IEVS Coordinator, Policy and Program Development Bureau	505-795-0493	suzannep.duran-vigi@hsd.nm.gov
Melissa Sisneros	Staff Manager, Contracts and Grants Bureau	505-490-0922	Melissa.Sisneros2@hsd.nm.gov

Certified By:



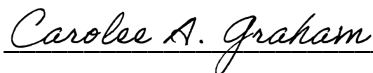
9/15/2023

Karmela Martinez, Director

Date

Income Support Division

Certified By:



9/19/2023

Carolee Graham, Director/CFO

Date

Program, Resource, Administrative, and Financial Support Section

2. STATEMENT OF NEED

New Mexico faces several socioeconomic challenges that inhibit the ability of New Mexicans to meet their nutrition needs and maintain healthy lifestyles. Several of these socioeconomic factors range from high poverty rates, high food insecurity, high and increasing employment in the volatile oil and gas industry, and low educational attainment. In addition to socioeconomic factors, there have been several identified microlevel communication-related barriers to SNAP application: information about eligibility or benefits, the time and effort required to apply and recertify, language and literacy limitations, fear of interacting with government agencies, the perceived stigma of using public benefits, and poor customer service at SNAP offices.¹ These factors, among others, may affect participation in food assistance programs like SNAP.

New Mexico also faces significant challenges in addressing hunger and food insecurity. According to the most recent 2021 data from Feeding America’s Map the Meal Gap project, 13.5% of New Mexicans experienced food insecurity in 2021, a higher rate than the national average of 10.4%.² Additionally, 19.2% of New Mexico children experienced food insecurity in 2021 compared to 12.8% of children nationally. New data attained by a statewide college/university survey administered by the University of New Mexico and the New Mexico Higher Education Department reveals that college students are experiencing significant hardship in accessing food. The first data of its kind revealed that approximately 53% of college and university students are experiencing food insecurity. This is alarming considering that a person’s ability, or lack thereof, to access affordable and nutritious food is highly associated with a vast array of chronic health conditions.^{3,4} Eating habits and the ability to access adequate and culturally appropriate foods also has alarming economic consequences when considering the effect that poor nutrition has on the resistance to diseases, maintenance of diseases, and mortality rates – all factors placing significant burden on the US healthcare system.

Food insecurity is generally understood as a state of being in which an individual/household is without reliable access to enough affordable and nutritious foods that meet their dietary and cultural needs. The United States Department of Agriculture defines low food security as the “reduced quality, variety, or desirability of diet,” where there is no clear indication that there has been a reduction in the amount of

¹ Cohen N. (2019). SNAP at the Community Scale: How Neighborhood Characteristics Affect Participation and Food Access. *American journal of public health*, 109(12), 1646–1651. <https://doi.org/10.2105/AJPH.2019.305363>

² Feeding America, Map the Meal Gap, Interactive Data, 2022. [Child \(<18 years\) Hunger & Poverty in the United States | Map the Meal Gap \(feedingamerica.org\)](https://www.feedingamerica.org/child-hunger)

³ Decker, D., & Flynn, M. (2018). Food Insecurity and Chronic Disease: Addressing Food Access as a Healthcare Issue. *Rhode Island Medical Journal* (2013), 101(4), 28–30.

⁴ Seligman, H. K., Bindman, A. B., Vittinghoff, E., Kanaya, A. M., & Kushel, M. B. (2007). Food Insecurity is Associated with Diabetes Mellitus: Results from the National Health Examination and Nutrition Examination Survey (NHANES) 1999–2002. *Journal of General Internal Medicine*, 22(7), 1018–1023. <https://doi.org/10.1007/s11606-007-0192-6>

food intake of individuals. They define very low food security as there being “multiple indications of disrupted eating patterns and reduced food intake.”⁵

SNAP plays a significant role in reducing food insecurity, supplementing income, and improving health and well-being for New Mexicans. Though participation in SNAP has increased in the State of New Mexico over the last three years thanks to federal eligibility waivers and increased SNAP allotments, with the end of the public health order, which phases out pandemic era waivers, it is anticipated that there will be an increased need to effectively communicate information regarding SNAP eligibility to ensure equitable access to benefits for eligible individuals and households. The most recent data from the USDA shows that 98% of potentially eligible SNAP participants are receiving benefits in New Mexico.⁶ However, of that percentage, only 89% of eligible “working poor” people and 53% of eligible seniors are currently receiving benefits. This data is on par with national trends and literature that show older adults, noncitizens, college students, and households with an employed member are least likely to participate in SNAP.^{7,8} With New Mexico’s SNAP Outreach Plan for FY24, NMHSD intends to begin addressing these barriers to access SNAP benefits.

⁵ Coleman-Jensen, A., Rabbit, M. P., Hales, L. H., & Gregory, C. A. (2022, October 17). *Definitions of Food Security*. Retrieved from USDA Economic Research Service: <https://www.ers.usda.gov/topics/food-nutrition-assistance/food-security-in-the-u-s/definitions-of-food-security/>

⁶ U.S. Department of Agriculture. (2018). *SNAP Participation Rates by State, All Eligible People*. Retrieved January 18, 2023, from <https://www.fns.usda.gov/usamap/2018>

⁷ Cohen N. (2019). SNAP at the Community Scale: How Neighborhood Characteristics Affect Participation and Food Access. *American journal of public health*, 109(12), 1646–1651. <https://doi.org/10.2105/AJPH.2019.305363>

⁸ United States Government Accountability Office. (2018). *Food Insecurity: Better Information Could Help Eligible College Students Access Federal Food Assistance Benefits, Report to Congressional Requesters*. United States Government Accountability Office. Retrieved January 18, 2023, from <https://www.hsdl.org/c/view?docid=819947>

3. OUTREACH PLAN SUMMARIES

Executive Summary:

NMHS D proposes to leverage the expertise and vast partner network of Roadrunner Food Bank (RRFB) to conduct strategic and person-centered community SNAP outreach and enrollment support for identified priority populations (see Target Audience below).

As the largest food bank in the state, RRFB plays a major role in distributing a variety of donated and purchased food items to people struggling to cover all their nutritional needs. In addition to providing charitable foods to community members across the state, RRFB has a robust and established SNAP outreach initiative with several existing community connections. With this new partnership, NMHS D and RRFB, if approved by FNS, intend to utilize the existing RRFB's existing partner network (360 partners throughout the state) to reach high-need and vulnerable communities who may not be aware of eligibility requirements or who may need support in applying for or recertifying for SNAP benefits.

NMHS D and RRFB plan to do this by:

1. Providing SNAP application and recertification assistance.
2. Outreach/Education Workshops
 - a. Educating community agencies and food bank affiliates (360 current partners) about SNAP outreach.
 - b. Work to connect with and train other community partners such as health clinics, college campuses, and community-based organization working with other target populations.
3. Culturally relevant/target-specific outreach
 - a. This will include the use of bilingual HELP Center representatives as well as bilingual outreach materials.

The primary goal of NMHS D's plan this first year is to develop and implement a SNAP outreach infrastructure to ensure that SNAP eligible New Mexicans are receiving accurate, culturally relevant, and developmentally appropriate information regarding SNAP as a way to ensure that those community members are being provided with application/recertification assistance. To assess impact, NMHS D and RRFB will be monitoring the SNAP Participation Rate for NM, the number of new applications submitted and approved, and the number of materials distributed.

While building its outreach infrastructure, NMHS D intends to elevate tribal partnerships and collaboration. Over the past couple of months, NMHS D's Tribal Liaison has hosted and/or joined tribal listening sessions and launched the NMHS D *In the Community Work Group* focusing on NMHS D's government to government tribal relationships regarding NMHS D's programs which include SNAP and SNAP outreach. In tandem with this work, Roadrunner Food Bank has also established 9 new TEFAP sites in 9 different tribal communities through the Reach and Resiliency Program administered by NMHS D. These new sites and relationships present exciting opportunity for NMHS D and Roadrunner Food Bank to conduct SNAP outreach work.

Given that this is New Mexico's first time submitting a formal SNAP Outreach Plan, NMHS D will submit a one-year state plan with one outreach contractor. Following this pilot/launch year, NMHS D plans to broaden the number of contractors the state agency works with to center equity and bolster the State's SNAP outreach infrastructure.

Summary of Projects:

Project Number	Title	Geographic Area	Target Audience	Contracted (list contractor) or In-House
1	State Administrative Oversight	State of New Mexico	Provide administrative oversight	In-House
2	Outreach Roadrunner Food Bank (RRFB)	State of New Mexico	Food pantry clients, immigrant communities and mixed status families, college students, older adults, veterans, Latinos, Native Americans, People living in rural and frontier communities	Contractor

4. OUTREACH PROJECT DETAILS

Project Number	1 – State Administrative Oversight		
Goal	Oversee SNAP Outreach Contract(s) and take lead in reporting to FNS.		
Target Audience	Provide administrative oversight.		
Timeline	Start	October 1, 2023	End September 30, 2024, Ongoing
Description of Activity	Manage State contracts with NMHSD’s SNAP Outreach partner(s) and prepare/submit required FNS report.		
Subrecipient	N/A		
Tax ID of Subrecipient	N/A		
Role of Subrecipient	N/A		
Role of State Agency	Communication and oversight of compliance with all USDA regulations. Administration of reimbursement funds to specific partner agencies.		
State/subrecipient funding source	State General Fund		
Volunteers	No		
Evaluation	<p>Will work with Roadrunner Food Banks to monitor and analyze:</p> <ul style="list-style-type: none"> • SNAP Participation Rate for NM • Applications Submitted • Applications Approved • Materials Distributed • Evaluation of application approved is part of the overall evaluation of the NM SNAP Outreach Plan 		

Project Number	2 – Outreach Roadrunner Food Bank (RRFB)		
Goal	Ensure that SNAP eligible New Mexicans are receiving accurate, culturally relevant, and developmentally appropriate information regarding SNAP in providing application/recertification assistance for those community members.		
Target Audience	Food pantry clients, immigrant communities and mixed status families, college students, older adults, veterans, Latinos, Native Americans, People living in rural and frontier communities		
Timeline	Start	October 1, 2023	End September 30, 2024, Ongoing
Description of Activity	<p>Application and recertification assistance: Provide guidance and support to individuals seeking assistance with SNAP applications, verifications, interviews, or other steps in the application and/or recertification process. Roadrunner Food Bank will disseminate materials via its partner organizations, on-the-ground outreach, electronically, and over the phone.</p> <p>Material distribution: Distribution of accurate, culturally relevant, bilingual, and developmentally appropriate materials/information. Target-specific materials will be created and disseminated to clients and partners where potential SNAP recipients may be located. All materials developed will be reviewed and in federal compliance to CFR and USDA guidelines. When appropriate, depending on the communities and geographic areas, RRFB will also utilize materials already developed by the USDA. RRFB has been conducting SNAP Outreach independently over the last decade and have several existing outreach documents/materials. As a SNAP Outreach contractor through the State of New Mexico and in collaboration with FNS, RRFB will work over the course of the first few months of their contract year to edit existing flyers to include the USDA non-discrimination statement and/or supplement already circulating flyers with a non-discrimination print-out (for non-discrimination statement, see attachment A.).</p> <p>Application assistance is done through a designated help line and on-the-ground field outreach. This assistance includes answering questions, providing policy information/clarification, etc. RRFB will not be processing applications.</p> <p>Administer and oversee material dissemination and application and recertification assistance.</p> <p>Community Initiatives Manager – Client Services (.40 FTE); Client Services Coordinator (.70 FTE); HELP Center Representative - Bilingual (.75 FTE); New Bilingual HELP Center Representative (.75 FTE)</p> <ul style="list-style-type: none"> • Educate community agencies and food bank affiliates (360 current partners) about SNAP outreach. • Staff the Roadrunner Food Bank Food Assistance and HELP Line call center lines. • Train the trainer and distribute educational materials to community agencies and food bank affiliates for direct client assistance or distribution to their clients. 		

	<ul style="list-style-type: none"> • Provide direct client assistance that includes assistance with completing applications, explaining SNAP guidelines, verifications needed, and other general SNAP-related questions. • Conduct Outreach Workshops at mobile pantries, churches, clinics, as well as community, senior, and school events across the state. • Develop outreach materials (flyers, social media graphics, etc.).
Subrecipient	Outreach Roadrunner Food Bank (RRFB)
Tax ID of Subrecipient	85-0278525
Role of Subrecipient	Provide staffing and resources for project. Provide oversight to partner organizations. Ensure compliance with all NMHSD and USDA requirements.
Role of State Agency	Communication and oversight of compliance with all USDA regulations. Administration of reimbursement funds to specific partner agencies.
State/subrecipient funding source	Community grants, general operating funds from unrestricted donations. No federal funding is used for this program with the exception of the 50% USDA reimbursement. The RRFB have funding other than federal funding dedicated to use as the match to the federal funding.
Volunteers	Yes, volunteers will be used to distribute educational materials.
Evaluation	<p>RRFB will evaluate progress based on:</p> <ul style="list-style-type: none"> • SNAP Participation Rate for NM • Number of individuals reached via outreach work • Number of applications submitted • How many applicants asked questions • Number of materials distributed • Evaluation of application approved is part of the overall evaluation of the NM SNAP Outreach Plan <p>RRFB will be sure to track all of the above info when completing and assisting with SNAP outreach and will report progress to ISD to report to FNS.</p>

5. OUTREACH PROJECT STAFFING

Project Number	1 – State Administrative Oversight						
Staff Person Title	Description	(a) FTE Outreach	(b) Salary	(c=a x b) Outreach Salary	(d) Benefits Rate	(e=c x d) Outreach Benefits	(f=c + e) Total
Contract Manager/Federal Reporting	Oversee and monitor contracts and reporting	0.10	\$57,138	\$5,713.80	39.71%	\$2,268.95	\$7,982.75
Total			\$57,138	\$5,713.80		\$2,268.95	\$7,982.75

Project Number	2 – Outreach Roadrunner Food Bank (RRFB)						
Staff Person Title	Name of Staff Person	(a) FTE Outreach	(b) Salary	(c=a x b) Outreach Salary	(d) Benefits Rate	(e=c x d) Outreach Benefits	(f=c + e) Total
Community Initiatives Manager – Client Services	Oversee RRFB's SNAP Outreach Activities	0.40	\$50,582	\$20,233	25%	\$5,058	\$25,291
Client Services Coordinator	Assists with SNAP outreach coordination	0.70	\$36,337	\$25,436	25%	\$6,359	\$31,795
HELP Center Representative - Bilingual	Conduct phone intake	0.75	\$33,425	\$25,069	25%	\$6,267	\$31,336
HELP Center Representative - Bilingual	Conduct phone intake	0.75	\$33,425	\$25,069	25%	\$6,267	\$31,336
Total			\$153,769	\$95,806		\$23,952	\$119,758

6. OUTREACH PROJECT BUDGET DETAILS

Budget Detail Table for Project # 1 – State Administrative Oversight (FTE)						
Expenses	(a) Public Cash	(b) Public In-kind	(c) Private Cash	(d=a+b+c) Total Non- Federal	(e) Federal Funds	(f=d+e) Total Funds
(g) Personnel (Salary & Benefits)	\$3,991.38			\$3,991.38	\$3,991.38	\$7,982.75
Other Direct Costs						
(h) Copying/Printing/Materials						
(i) Internet/Telephone						
(j) Equipment and Other Capital Expenditures						
(k) Supplies and Non Capital Expenditures						
(l) Building/Space						
(m) Other						
(n=h+i+j+k+l+m) Subtotal Other Direct Costs						
Travel						
(o) Long Distance						
(p) Local						
(q=o+p) Subtotal Travel						
(r) Contractual						
(s=g+n+q+r) Total Personnel, Direct Costs, Travel, and Contractual	\$3,991.38			\$3,991.38	\$3,991.38	\$7,982.75
(t = indirect cost rate × s) Indirect Costs						
(u=s+t) TOTAL	\$3,991.38			\$3,991.38	\$3,991.38	\$7,982.75

Personnel Expenses: NMHSD is in the process of hiring an FTE to assist NMHSD’s Income Support Division manage contracts and monitor reporting requirements. For FFY 24, 10% of this FTE’s time will be designated to SNAP Outreach related work.

Budget Detail Table for Project # 2 – Outreach Roadrunner Food Bank (RRFB)						
Expenses	(a) Public Cash	(b) Public In-kind	(c) Private Cash	(d=a+b+c) Total Non- Federal	(e) Federal Funds	(f=d+e) Total Funds
(g) Personnel (Salary & Benefits)			\$59,879	\$59,879	\$59,879	\$119,758
Other Direct Costs						
(h) Copying/Printing/Materials						
(i) Internet/Telephone						
(j) Equipment and Other Capital Expenditures						
(k) Supplies and Non Capital Expenditures						
(l) Building/Space						
(m) Other						
(n=h+i+j+k+l+m) Subtotal Other Direct Costs						
Travel						
(o) Long Distance						
(p) Local						
(q=o+p) Subtotal Travel						
(r) Contractual						
(s=g+n+q+r) Total Personnel, Direct Costs, Travel, and Contractual			\$59,879	\$59,879	\$59,879	\$119,758
(t = indirect cost rate × s) Indirect Costs						
(u=s+t) TOTAL			\$59,879	\$59,879	\$59,879	\$119,758

Personnel Expenses: The SNAP Program Manager oversees the SNAP Outreach Initiative at RRFB. RRFB manages and staffs a statewide SNAP Outreach Hotline (RRFB HELP Center) which will be a primary component of the work conducted through the SNAP Outreach Plan. The Client Services Coordinator oversees the HELP Center as well as other outreach work administered by RRFB. The HELP Center will also incorporate two full-time bilingual representatives who will assist with SNAP applications, recertifications, training volunteers and network partners, and translating outreach materials.

7. TOTAL BUDGET SUMMARY

Line Item Budget Summary						
Expenses	(a) Public Cash	(b) Public In-kind	(c) Private Cash	(d=a+b+c) Total Non- Federal	(e) Federal Funds	(f=d+e) Total Funds
(g) Personnel (Salary & Benefits)	\$3,991.38		\$59,879	\$63,870.38	\$63,870.38	\$127,740.76
Other Direct Costs						
(h) Copying/Printing/Materials						
(i) Internet/Telephone						
(j) Equipment and Other Capital Expenditures						
(k) Supplies and Non Capital Expenditures						
(l) Building/Space						
(m) Other						
(n=h+i+j+k+l+m) Subtotal Other Direct Costs						
Travel						
(o) Long Distance						
(p) Local						
(q=o+p) Subtotal Travel						
(r) Contractual						
(s=g+n+q+r) Total Personnel, Direct Costs, Travel, and Contractual	\$3,991.38		\$59,879	\$63,870.38	\$63,870.38	\$127,740.76
(t = indirect cost rate × s) Indirect Costs*						
(u=s+t) TOTAL	\$3,991.38		\$59,879	\$63,870.38	\$63,870.38	\$127,740.76

* For this pilot year, there is no anticipated indirect costs projected for this project. See Attachment B for HSD's indirect cost agreement.

8. ASSURANCES

Check to Indicate You Have Read and Understand the Assurance Statement	Assurance Statement
X	The State agency is accountable for the content of the State outreach plan and will provide oversight of any subrecipients.
X	The State agency is fiscally responsible for outreach activities funded under the plan and is liable for repayment of unallowable costs.
X	Outreach activities are targeted to those potentially eligible for benefits.
X	Cash or in-kind donations from other non-Federal sources have not been claimed or used as a match or reimbursement under any other Federal program.
X	If in-kind goods and services are part of the budget, only public in-kind services are included. No private in-kind goods or services are claimed.
X	Documentation of State agency costs, payments, and donations for approved outreach activities are maintained by the State agency and available for USDA review and audit.
X	Contracts are procured through competitive bid procedures governed by State procurement regulations.
X	Program activities are conducted in compliance with all applicable Federal laws, rules, and regulations including Civil Rights and OMB regulations governing cost issues.
X	Program activities do not supplant existing outreach programs, and where operating in conjunction with existing programs, enhance and supplement them.
X	Program activities are reasonable and necessary to accomplish outreach goals and objectives.

By signature on the cover page of this document, the State agency director (or Commissioner) and financial representative certify that the above assurances are met.

9. ATTACHMENTS

- A. USDA Non-Discrimination Statement
- B. NMHSD Indirect Cost Agreement
- C. FNS 366-A
- D. FNS 366-A Narrative

ATTACHMENT A.

Your Civil Rights/ Nondiscrimination Statement

In accordance with federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, this institution is prohibited from discriminating on the basis of race, color, national origin, sex (including gender identity and sexual orientation), religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity.

Program information may be made available in languages other than English. Persons with disabilities who require alternative means of communication to obtain program information (e.g., Braille, large print, audiotape, American Sign Language), should contact the agency (state or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339.

To file a program discrimination complaint, a Complainant should complete a Form AD-3027, USDA Program Discrimination Complaint Form which can be obtained online at: <https://www.usda.gov/sites/default/files/documents/USDA-OASCR%20P-Complaint-Form-0508-0002-508-11-28-17Fax2Mail.pdf> , from any USDA office, by calling (833) 620-1071, or by writing a letter addressed to USDA. The letter must contain the complainant's name, address, telephone number, and a written description of the alleged discriminatory action in sufficient detail to inform the Assistant Secretary for Civil Rights (ASCR) about the nature and date of an alleged civil rights violation. The completed AD-3027 form or letter must be submitted to:

1. mail: Food and Nutrition Service, USDA 1320 Braddock Place, Room 334 Alexandria, VA 22314; or
2. fax: (833) 256-1665 or (202) 690-7442; or 3. email: FNSCIVILRIGHTSCOMPLAINTS@usda.gov

This institution is an equal opportunity provider.

To file a complaint through HSD of discrimination and/or rude treatment regarding a program receiving Federal or State financial assistance, a complaint form is available at the ISD office or you may write to: NM Human Services Department, ISD Civil Rights Director, P.O. Box 2348, Santa Fe, NM 87504-2348 or by fax (505) 827-7241

TABLE OF CONTENTS

TABLE OF CONTENTS	1
PART I - INTRODUCTION AND ORGANIZATION	2
PART II – PROGRAMS OPERATED BY HSD	5
PART III SECTION 1A - FUNCTIONS OF ORGANIZATIONAL UNITS	15
PART III SECTION 1B - ALLOCATION BASIS.....	21
PART III SECTION 1C – STATEWIDE COST ALLOCATION	27
PART III – SECTION 2A – PROGRAM SUPPORT	33
PART III – SECTION 2B – MEDICAL ASSISTANCE DIVISION.....	44
PART III – SECTION 2C - CHILD SUPPORT ENFORCEMENT DIVISION	60
PART III – SECTION 2D - INCOME SUPPORT DIVISION	72
PART III – SECTION 2E – BEHAVIORAL HEALTH SERVICES DIVISION	82
PART IV - COST IMPACT	92
EXHIBIT 1: ORGANIZATION CHARTS.....	94
EXHIBIT 2: ACRONYMS USED IN THIS DOCUMENT	100
EXHIBIT 7: COST IMPACT CALCULATION	105

PART I - INTRODUCTION AND ORGANIZATION
(Latest Detailed Organization Charts attached as Exhibit 1)

INTRODUCTION AND OVERALL ORGANIZATION

A. Public Assistance Cost Allocation Plan

This public assistance cost allocation plan, prepared in compliance with Office of Management and Budget Circular (OMB) A-87, describes methods and procedures used to identify, measure, and allocate costs incurred in support of all of the programs administered by the New Mexico Human Services Department.

B. Overall Organization—New Mexico Human Services Department

The New Mexico Human Services Department (HSD or “Department”) was created as a cabinet level department pursuant to Section 9-8-4, et.seq. NMSA 1978, as amended. HSD is the state agency administering the state plans for

- Medicaid (Title XIX) and Children’s Health Insurance Program (CHIP) (Title XXI)
- Temporary Assistance for Needy Families (TANF)
- Supplemental Nutrition Assistance Program (SNAP)
- SNAP - Employment and Training (E&T)
- Child Support Enforcement Division (CSED)
- Behavioral Health Services Division (BHSD)

HSD is comprised of five major program divisions and the program support offices, bureaus, and divisions:

- Medical Assistance Division (MAD)
- Child Support Enforcement Division (CSED)
- Income Support Division (ISD)
- Behavioral Health Services Division (BHSD)
- Program Support

The following offices, bureaus, and divisions comprise Program Support and provide administrative and support services: Office of the Secretary, Fair Hearings Bureau, and Office of the Inspector General, Office of the General Counsel, Human Resources Division, Information Technology Division, and the Administrative Services Division.

The cost allocation plan describes HSD’s methods of allocating or assigning all costs, both direct and indirect to state and federal programs. The primary purpose of

the process is to allocate costs to cost objectives on the basis of the relative benefits received (45 CFR 95.507(b)(4)). The cost allocation analysis process is performed on a monthly basis and the results are used to prepare the Department's quarterly, semi-annual, and annual federal claims.

C. Layout of This Public Assistance Cost Allocation Plan

This plan includes the following major sections:

1. The certification, with required wording, reference to the requirements for other State agency expenditures covered by this cost allocation plan.
2. The introduction, in which this section is located, includes a brief description of the overall organization for the state agency, the New Mexico Human Services Department (Part I).
3. A summary of the federal and State programs operated by HSD (Part II).
4. Detailed descriptions of the functions of each organizational unit and cost pool as well as the methods for assigning and/or allocating the costs associated with each organizational unit and/or cost pool (Part III).
5. The cost impact of the revised cost allocation plan is included (PART IV).

Exhibits, including detailed organization charts (Exhibit 1), Acronyms (Exhibit 2), sample Time and Effort worksheets (Exhibit 3), sample Semi-Annual Certification documents (Exhibit 4), an Account Code Manual (Exhibit 5) and a Cost Impact Calculation (Exhibit 6).

PART II – PROGRAMS OPERATED BY HSD

PROGRAMS OPERATED BY New Mexico Human Services Department (HSD)

The Department administers the following programs by Division:

Behavioral Health Services Division (BHSD):

1. Community Mental Health Services (CMHS) – CFDA # 93.958

The purpose of the CMHS Block Grant is to provide comprehensive community mental health services to individuals who are either adults with a severe mental illness (SMI) or children with a serious emotional disturbance (SED) who are not Medicaid eligible, and includes individuals who have dual diagnoses. In addition, a portion of the grant (10%) is earmarked to support evidence-based programs that address the needs of individuals with early serious mental illness, including psychotic disorders as a means for addressing symptoms early. The goal is to identify and engage these individuals in services should their symptoms develop into diagnosable serious mental illness. HSD/BHSD applies for this two-year formula block grant annually. BHSD works in collaboration with the Behavioral Health Planning Council (a requirement of the grant) to plan and monitor service delivery for priority populations.

1. Substance Abuse Prevention and Treatment (SAPT) – CFDA # 93.959

The purpose of the SAPT Block Grant is to plan, implement and evaluate activities to prevent and treat substance abuse and is the largest Federal program dedicated to improving publicly-funded substance abuse prevention and treatment systems. HSD/BHSD applies for this two-year formula block grant annually. Targeted populations include pregnant women and women with dependent children, intravenous drug users, tuberculosis services, early intervention services for HIV/AIDS and primary prevention services. BHSD works in collaboration with the Behavioral Health Planning Council to plan and monitor service delivery for priority populations. The grant provides a range of substance abuse treatment and prevention services.

2. Screening, Brief Intervention and Referral to Treatment (SBIRT) (CFDA # 93.243)

SBIRT is a comprehensive, integrated, public health approach to the delivery of early intervention and treatment services for persons with substance use disorders, as well as those who are at risk of developing these disorders. Primary care centers, hospital emergency rooms, trauma centers, and other community settings provide opportunities for early intervention with at-risk substance users before more severe consequences occur. The SBIRT grant is designed to expand and enhance the state and tribal continuum of care for substance misuse

services and reduce alcohol and drug consumption and its negative health impact; increase abstinence; reduce costly health care utilization; and promote sustainability of SBIRT services through the use of health information technology (HIT). NMSBIRT is designed to expand and enhance the state's continuum of care to include universal adult SBIRT services in primary care and community health settings and support clinically appropriate services for adults 18 or over at risk for, or diagnosed with, an SUD. It also seeks to identify and sustain systems and policy changes to increase access to treatment in generalist and specialist settings, including greatly increasing the number of individuals accessing services through technological expansion.

3. NM Suicide Prevention; Zero Suicide through Effective Identification and Treatment - CFDA #93.764

This grant is for the purpose of preventing suicide among working aged adults 25-64 years of age and reducing the overall suicide rate in NM. This is a three-year grant. The goals of this initiative are to: (1) promote suicide prevention as a core component of health care; (2) implement effective practices for assessing and treating those at risk for suicide; (3) ensure meaningful collaboration with people who have lived experience of suicide; and (4) implement strategies to address behavioral health disparities for those with limited access to care (e.g., people in rural and frontier areas, culturally diverse populations, and veterans). This initiative will work at the local level to pilot the model and at the state level to impact policy and sustain and spread the model statewide.

4. Housing Supports, Health and Recovery for Homeless Individuals (HHRHI)-CFDA 93.243

The HHRHI grant is a three year grant. It's purpose is to enhance the infrastructure of New Mexico's (NM) behavioral health service system to increase capacity and provide accessible, effective, comprehensive, coordinated and sustainable services to 450 individuals (150 per year) who experience chronic homelessness and have substance use disorders (SUDs) and/or serious mental illnesses (SMIs), to three counties in NM, including Bernalillo, Doña Ana and Santa Fe.

The program has 5 goals: 1) enhance our existing statewide supportive housing plan to ensure sustained partnerships across public health and housing systems that will result in short- and long-term strategies to support efforts to reduce homelessness; 2) increase access to behavioral health, housing support, peer and other recovery oriented services for individuals who experience SMIs and/or SUDs who are chronically homeless; 3) increase access to Medicaid and other mainstream benefits; 4) ensure outreach to traditionally underserved

communities such as Native Americans (NA), Hispanics, rural New Mexicans and veterans; and 5) utilize a Continuous Quality Improvement framework to provide feedback on the implementation of evidence-based practices (EBPs).

5. Projects for Assistance in Transition from Homelessness (PATH) - CFDA #93.150

The PATH Grant is an annual formula grant for the purpose of serving people with serious mental illnesses and those with co-occurring substance use disorders who are experiencing homelessness or who are at risk of becoming homeless. Path funds are used to conduct outreach to contact and engage people who are disconnected from mainstream resources. PATH-funded providers also offer mental health, substance abuse, case management, other support services, and a limited set of housing services. HSD/BHSD receives \$300,000 and funds 4 programs in Albuquerque, Santa Fe and Las Cruces.

6. PFS 2015 Partnerships for Success (PFS) 2015 - New Mexico Communities Grant – CFDA #93.243

This grant is a five year grant for the purpose of addressing two of the nation's top substance abuse prevention priorities: 1) underage drinking among persons aged 12 to 20; and 2) prescription drug misuse and abuse among persons aged 12 to 25. BHSD, Office of Substance Abuse Prevention (OSAP) intends to subcontract with four counties and six universities and colleges. The SPF model is composed of forming and/or strengthening a countywide coalition, assessing community needs and collecting community data, and then developing a capacity building plan, strategic plan, and an evaluation plan

7. Prescription Drug/Opioid Overdose (PDO) – CFDA #93.243

The Purpose of this program is to reduce the number of prescription drug/opioid overdose-related deaths and adverse events among individuals 18 years of age and older by training first responders and other key community sectors on the prevention of prescription drug/opioid overdose-related deaths and implementing secondary prevention strategies, including the purchase and distribution of naloxone to first responders.

8. Strategic Prevention Framework for Prescription Drugs (SPF RX) - CFDA #93-243

This grant provides an opportunity to programs that have completed a Strategic Prevention Framework State Incentive Grant (SPF SIG) to target the priority issue of prescription drug misuse. The program is designed to raise awareness about the dangers of sharing medications and work with pharmaceutical and medical communities on the risks of overprescribing to young adults. The grant

will also raise community awareness and bring prescription drug abuse prevention activities and education to schools, communities, parents, prescribers and their patients.

9. State Targeted Response to the Opioid Crisis Grant (Opioid STR) - CFDA #93-788

The Opioid STR grant is a two year grant funded via formula based on unmet need for opioid use disorder treatment and drug poisoning deaths. The grant aims to address the opioid crisis by increasing access to treatment, reducing unmet treatment need and reducing opioid overdose related deaths through the provision of prevention, treatment and recovery activities for opioid use disorder (OUD) (including prescription opioids as well as illicit drugs such as heroin).

Child Support Enforcement Division (CSED):

1. Title IV-D, Child Support Enforcement (CSE) – CFDA # 93.563

The objective of CSE is to enforce the support obligations owed by absent parents to their children, locate absent parents, establish paternity, and obtain child, spousal, and medical support. The State must provide enforcement services to:

- All applicants for or recipients of TANF, foster care maintenance payments, and Medicaid, for whom an assignment to the State of support rights has been made and who are in need of such services;
- All individuals who cease to receive TANF;
- Individuals who provide authorization to the IV-D agency to continue support enforcement services

Income Support Division (ISD):

1. State Supplement Residential Care – State Funded

A state supplemental program that provides \$100/month to clients who stay in a shelter care home and sign over Social Security Income (SSI) to the shelter home. The \$100 is to provide for the clients personal needs.

2. Commodities Assurance – CFDA # 10. 553

The purpose of this grant is to provide each State agency with funds for its administrative expenses in supervising and providing technical assistance to local schools, school districts, and institutions in their conduct of Child Nutrition Programs.

3. Community Services Block Grant - CFDA # 93.569

The Community Services Block Grant Program (CSBG) provides a range of services designed to assist low-income people through six Community Action Agencies (CAAs) in New Mexico. The purpose of the CSBG is to reduce poverty, revitalize low-income communities, and empower low-income people to move toward self-sufficiency. The services provided by the CSBG agencies vary in accordance with the needs of each community.

4. Education Works Program (EWP) – State Funded

Education Works is a state-funded program allowing individuals to receive cash assistance and continue their post secondary education for up to twenty-four months. Individuals in this program are working toward a degree, and must maintain a 2.0 GPA or higher and be in good standing with the educational institution. Individuals with degrees obtain higher paying jobs, which in turn help them leave public assistance faster and achieve self-sufficiency more quickly.

5. Supplemental Nutrition Assistance Program (SNAP) – CFDA # 10.561

The Supplemental Nutrition Assistance program is a federal funded program that is administered by HSD ISD. SNAP serves as the first line of defense against hunger by helping families and single people with low or no income to buy nutritious food. Households may participate if they are found by local income support officials to be eligible for food assistance. Those usually eligible include households:

- Receiving some form of public assistance
- Unemployed
- Part-time employed
- Working for low wages
- Living on limited pensions

Eligibility is based on household size, income, and level of resources, and certain allowable expenses.

6. State SNAP Supplemental

The State Nutrition Assistance Program is aimed at providing the elderly and disabled with increased purchasing power resulting in better nutrition. State funds are utilized to extend federal SNAP benefits up to \$25.00 in cases where the Federal SNAP benefits fall below \$25.00.

7. Supplemental Nutrition Assistance Program (SNAP) – Nutrition Education Program - CFDA # 10.561

This program provides federal funding for nutrition education, food safety, thrifty shopping and cooking classes to SNAP eligible and recipients. This program is 100% federally funded.

8. Supplemental Nutrition Assistance Program (SNAP) Employment and Training - CFDA # 10.561

This program provides federal financial aid to state agencies for costs incurred to operate the SNAP Employment and Training (E&T) Program. SNAP E&T programs are funded by individual grants, of which a small portion is a 100% federal E&T grant and a larger portion is federal match funds that are comprised of 50% federal and 50% State funds. The amount that is 100% federally funded is determined by United States Department of Agriculture – Food and Nutrition Services (USDA-FNS), based on the State’s historical spending and utilization of funds. The E&T funds are inclusive of administrative expenditures and participant expenditures (transportation and dependent care). If State costs exceed the grant allocation, additional funding is available on a fifty percent basis.

9. General Assistance for Disabled Adults and for Unrelated Children - State Funded

General Assistance provides limited state funded cash assistance to adults (without dependent children) who are determined disabled and who are not eligible for assistance under a federally matched cash assistance program, such as Supplemental Security Income (SSI).

General Assistance also provides limited state funded cash assistance to children residing in the homes of unrelated adult caretakers who are not eligible for assistance under a federally matched cash assistance program, such as TANF.

10. Homeless Meals and Shelter Program – State Funded

This state funded program provides direct assistance to homeless persons statewide for food and shelter. New Mexico Mortgage Finance Authority contracts to provide shelter and ISD contracts with six agencies to provide prepared meals to homeless families and individuals.

11. Low Income Home Energy Assistance Program (LIHEAP) – CFDA # 93.568

This program provides federal funding for energy assistance to low income households. Energy bills are usually paid directly to utility companies that provide service. The benefit is available to qualified recipients once every federal fiscal year (FFY). LIHEAP funds may also provide weatherization services to eligible applicants.

12. Refugee Resettlement Programs Cash and Medical Assistance and Refugee Social Services - CFDA # 93.566

The objective of the refugee programs is to assist legal refugee, and asylees to resettle in New Mexico by providing cash assistance, medical assistance, and social services through a resettlement agency which is federally approved to provide these services. To be served, refugees must meet the requirements established by Federal and State.

13. Refugee Targeted Assistance – CFDA #93.576

The Targeted Assistance Grant program provides funding for employment-related and other social services for refugees, certain Amerasians from Vietnam, Cuban and Haitian Entrants, asylees, victims of a severe form of trafficking, and Iraqi and Afghan Special Immigrants in areas with large refugee populations. An arrival must be within five years of arriving in this country or grant of asylum to be eligible for services under these grants.

14. Title IV-A, Temporary Assistance for Needy Families (TANF) - CFDA # 93.558

The objective of TANF is to provide assistance to needy families with children so that children can be cared for in their own homes; to reduce dependency by promoting work and marriage; to reduce and prevent out of wedlock pregnancies; and to encourage the formation and maintenance of two-parent families. The beneficiaries of this program include needy families with children who have been determined eligible in accordance with the plan submitted to the U.S. Department of Health and Human Services.

15. The Emergency Food Assistance Program (TEFAP) - CFDA # 10.569

The purpose of this federal grant is to provide funds to states for administrative costs involved in receiving, storage, and distribution by state and food banks of USDA commodities to low income clients state-wide through pantries, shelters and soup kitchens. Federal TEFAP administrative funds retained at the state agency level must be matched with 50% state funds.

16. Commodity Supplemental Food Program - (CSFP) CFDA #10.568 & 10.569

The Commodity Supplemental Food Program (CSFP) works to improve the health of low-income elderly persons at least 60 years of age by supplementing their diets with nutritious USDA foods. The income eligibility is at or below 130% FPL. USDA distributes both food and administrative funds to participating States and Indian Tribal Organization (ITO's) through the USDA Food and Nutrition Service.

Medical Assistance Division (MAD):

1. Title XIX Medicaid Medical Assistance Program - CFDA # 93.778

The objective of the (Medicaid) program is to provide health care coverage to certain low-income individuals and families who fit into an eligibility group that is recognized by federal and state law. Eligible groups generally include:

- Low income persons over the age of 65
- The blind or disabled
- Members of families with dependent children
- Low income children and pregnant women
- Certain Medicare beneficiaries

In addition, there are HIV/AIDS and Home and Community-Based waivers in the State's Medicaid program.

2. Title XIX, Medicaid Certification - CFDA # 93.777

This part of the program provides funds for the federal share of expenditures for activities related to the survey and certification activities for long-term care facilities

3. Title XIX, Administration and Training - CFDA # 93.778

This part of the program provides federal funding for administrative and training costs incurred by state and local agencies in operating the Medicaid program.

4. Title XXI Children's Health Insurance Program (CHIP) - CFDA # 93.737

The objective of the Children's Health Insurance Program is to provide health care coverage for low income children, improve children's health, and provide resources to States to reduce the number of uninsured children. Assistance is provided by two primary methods: 1) Obtaining health insurance that meets requirements as to amount, duration, and scope of benefits and 2) Expanding eligibility for children under the State Medicaid program.

Low income children or children whose family incomes exceed the Medicaid applicable income level but do not exceed 50 percentage points above the Medicaid applicable income level are eligible. Children cannot be found eligible for medical assistance under Title XIX or covered under a group health plan or under health insurance coverage. Administrative costs are limited to 10 percent, except for certain expenses shown in 42 CFR 457.228.

5. Refugee School Impact Program – CFDA #93.576

The Refugee School Impact Program provides assistance to refugee children to improve their academic performance and social adjustments in schools, as well as increasing the parental involvement in their children's education. Funding for the School Impact Program is provided by the Office of Refugee Resettlement

PART III SECTION 1A - FUNCTIONS OF ORGANIZATIONAL UNITS

FUNCTIONS OF ORGANIZATIONAL UNITS AND ALLOCATION BASIS

I. COST ALLOCATION — General

A. CLASSIFICATION OF COSTS

General Process

The first step in the cost allocation process is to identify all expenditures through the HSD accounting system, PeopleSoft. HSD maintains a chart of accounts that assigns each cost a Department Code, which identifies an organizational unit within HSD. Department Codes are assigned to direct costs that benefit a specific grant and to indirect costs that provide support to various programs and benefit more than one cost objective. The Department Codes assigned to indirect costs are allocated based on one of the following methods:

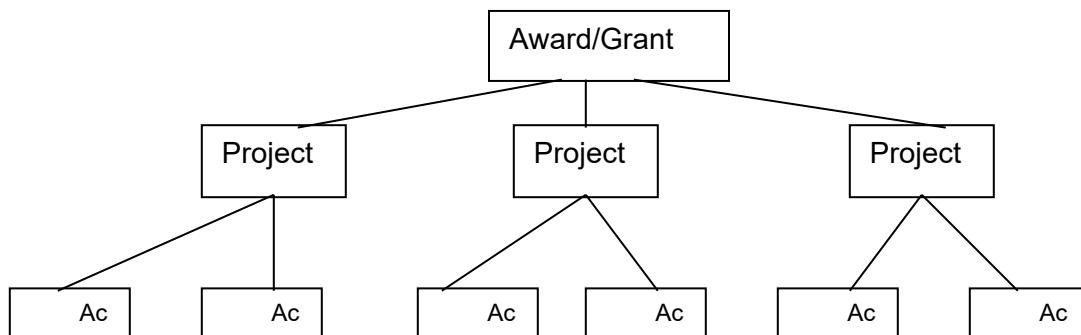
- Number of Employees,
- Expenditures,
- Recipient Count,
- Number of EBT Transactions,
- Time and Effort or
- Time Distribution

Organizational units that are not associated directly with a grant are assigned only a Department Code. The Department Code transactions do not include expenditures for financial assistance, medical vendor payments, and payments for services and goods provided directly to program recipients such as day care services, family planning services or household items as provided for under the approved State program plan.

For specific allocation method descriptions, refer to the section following **Specific Steps in the Allocation Process**. The Reporting Category code is used to account for the following type of activities: to categorize costs by allocation basis and to track 100% general fund expenditures. Exhibit 6 – Account Code Manual includes a listing of the codes described above.

In addition to the Department Code, detail of costs is obtained through using other fields or codes in the grants module in PeopleSoft. The grant structure within PeopleSoft considers each grant received by HSD an Award and each award is assigned a unique Award ID. Each Award ID may have several Project IDs; the Project IDs are lines on the various federal reports for the programs administered by HSD. For example, the Award ID for TANF, report ACF-196, will have a project titled Job Access; and the

Award ID for SNAP, FNS-269, will have a project titled EBT Issuance. The Project IDs are used to accumulate and summarize transactions for each of the line items on the federal reports. The Activity field provides additional detail about the transactions for each Project ID. For example, a project for Job Access on the ACF-196 will include each sub-recipient name; and EBT Issuance on the FNS-269 will include the name of the contractor that administers EBT card issuance for HSD. It is at the Activity level that the federal financial participation (FFP) is assigned. Each of the activities under Job Access will be assigned FFP of 100%, the appropriate FFP for TANF. The activities under EBT Issuance will be assigned FFP of 50%, the appropriate FFP for SNAP Administration. For a detailed listing of all Award IDs, Project IDs and Activity IDs see Exhibit 6 – Account Code Manual. The relationship between award, projects and activities is illustrated below.



When a cost can be directly associated with a single program, it is charged to that program's Award, Project and Activity. Direct costs are those costs that can be identified specifically with a particular final cost objective. The direct costs that are charged to a specific federal award are compensation of employees for the time devoted specifically to the performance of that award and other related costs that are incurred specifically to carry out the award. Semi-annual certifications for staff direct charged to any award will be maintained.

Costs assigned directly to program specific grants, Projects and Activities are not included in the cost allocation process, but are reported in the appropriate federal report as direct program costs. The Department Code along with the Award ID, Project ID and Activity ID identify costs that are associated directly with a grant. The Award, Project and Activity are used to provide additional detail of the costs.

The following description outlines that process:

Specific Steps in the Allocation Process

The monthly indirect expenditures for HSD are accumulated in the Department Code accounts; see Exhibit 6 – Account Code Manual. Each indirect Department Code or cost pool has an associated allocation base, reflective of the level of effort involved in providing support to programs. HSD uses established queries in the state-wide accounting system in PeopleSoft to gather the costs by the Department Code for each accounting period or month within the state fiscal year, July 1 to June 30. The queries include all transactions posted within the accounting period, the query results are downloaded into a workbook. Worksheets are created manually to segregate each cost pool by allocation basis. The data for each of the allocation basis is maintained on separate worksheets. (see description in the following section).

Pool: There are 15 cost Pool categories within HSD and consist of the following:

- 1. Office of the Secretary (OoS) Indirect Cost Pools:** costs of each bureau within OoS will be accumulated within each Department Code assigned to OoS. The costs of the Fair Hearing Bureau will be allocated based on Time and Effort reporting. The remainder of the bureaus will be allocated based on Number of Employees within the program divisions of HSD, including the Child Support Enforcement Division, Medical Assistance Division, Income Support Division (ISD) Director's Office, ISD Field Offices, ISD Work and Family Support Bureau, Food and Nutrition Services Bureau and Behavioral Health Services Division
- 2. Office of General (OGC) Counsel Indirect Cost Pool:** costs of each bureau within OGC will be accumulated here and allocated based on Time and Effort reporting.
- 3. Human Resources (HR) Division Indirect Cost Pool:** costs of each bureau within HR will be accumulated within each Department Code assigned to HR. The costs will be allocated based on Number of Employees within the program divisions of HSD, including the Child Support Enforcement Division, Medical Assistance Division, Income Support Division (ISD) Director's Office, ISD Field Offices, ISD Work and Family Support Bureau, ISD Food and Nutrition Services Bureau and Behavioral Health Services Division.
- 4. Information Technology Division (ITD) Indirect Cost Pools:** costs of each bureau within ITD will be accumulated within each Department Code. The costs of the Application Support Bureau, Quality Assurance Bureau, and Project Management Bureau will be allocated based on Time and Effort reporting, and the costs of the remainder of the bureaus will be allocated based on Number of Employees within the program divisions of HSD, including the Child Support Enforcement Division, Medical Assistance Division, Income Support Division

(ISD) Director's Office, ISD Field Offices, ISD Work and Family Support Bureau, ISD Food and Nutrition Services Bureau and Behavioral Health Services Division.

- 5. Administrative Services Division (ASD) Indirect Cost Pools:** costs for each bureau within ASD will be accumulated within each Department Code. The costs of the Budget Bureau, Accounts Payable Bureau, Accounting Bureau, Accounts Receivable Bureau and the Grants Management Bureau will be allocated based on Direct Expenditures of the program divisions of HSD. The costs of the General Services Bureau, the Payroll Bureau and the Contracts and Procurement Bureau will be allocated based on Number of Employees in the program divisions of HSD. The costs of the Restitutions bureau will be allocated based on Time and Effort reporting. The costs of the ASD Director's Office will be allocated based on Number of Employees in the program divisions of HSD, including the Child Support Enforcement Division, Medical Assistance Division, Income Support Division (ISD) Director's Office, ISD Field Offices, ISD Work and Family Support Bureau, and Behavioral Health Services Division.
- 6. Office of Inspector General (OIG) Indirect Cost Pools:** costs of each bureau within OIG will be accumulated within each Department Code. The costs of the Audit and Criminal Investigations bureau will be allocated based on Time and Effort reporting. The remainder of the bureaus will be allocated based on Number of Employees within the program divisions of HSD, including the Child Support Enforcement Division, Medical Assistance Division, Income Support Division (ISD) Director's Office, ISD Field Offices, ISD Work and Family Support Bureau, ISD and Behavioral Health Services Division.
- 7. ISD Director's Office Indirect Cost Pool:** costs that support ISD will be accumulated in this cost pool. A set amount will be allocated from LIHEAP, CSBG, and Refugee based on the Administrative CAPS imposed by grant regulations, and the remainder is allocated by the Recipient Count Methodology results and then assigned to programs within ISD.
- 8. CSED Cost Pool:** costs that support CSED will be accumulated in this cost pool and assigned to IV-D at the stated (66%) FFP.
- 9. MAD Cost Pool:** costs that support MAD will be allocated based on Time Distribution reporting, assigning costs to the correct grants and the various federal financial participation (FFP) rates within the Medical Assistance Division.
- 10. Income Support Division Field Office Direct Cost Pool:** costs of the Regional Field Office staff will be accumulated here and allocated to programs based on Recipient Count Methodology results.
- 11. Work and Family Support Cost Pool:** costs of the staff managing the service provider contracts for training of TANF recipients in the New Mexico Works activities, services for SNAP recipients in the SNAP Employment and Training

(E&T) Program. Other allocations are based on direct charges to the various ISD programs.

- 12. Policy and Program Development Cost Pool:** costs of the staff that analyzes, and develops State regulations to administer the Supplemental Nutrition Assistance Program (SNAP), TANF cash assistance, and State funded General Assistance. These costs are allocated based on Recipient Count Methodology reporting to SNAP, TANF, Medicaid, Education Works, and Adult Supplemental for Residential Care Homes.
- 13. Food and Nutrition Services Cost Pool:** costs of this staff that administers a number of programs that assist people with low income. Allocations to the programs are based on direct charges to program and a monthly Time Allocation.
- 14. BHSD Cost Pool:** costs that support BHSD are applied using one of three methods: Certain staff will be paid 100% through state general funds; or staff costs will be directly charged to a federal grant; or Time and Effort reporting will be applied to determine the split between federal grant and state general funds.
- 15. Statewide Cost Allocation Plan (SWCAP) Indirect Cost Pool:** costs from the State Wide Cost Allocation will be allocated to programs based on Number of Employees. Those costs are allocated further by each program in the division for their portion of the statewide expense.

The allocation basis determines how and in what proportion the pool amounts are distributed. The Basis or proportion of the amount allocated to each federal program will be based on Number of Employees, Direct Expenditures, Recipient Count Methodology, Number of EBT Transactions or Time and Effort, and Time Distribution. A more detailed description of each Basis can be found in subsection B. The allocation basis calculation is included in each cost pool worksheet and applied to the total costs for the accounting period. The amounts allocated to each federal program are totaled in each worksheet by Project ID and Activity for each federal program. The sub-totals from each cost pool are captured in a summary sheet by federal program as support for federal claims and federal draws by program.

PART III SECTION 1B - ALLOCATION BASIS

B. BASIS OF ALLOCATIONS

1. Number of Employees Allocation

Number of Employees allocation is determined by using the monthly count of the number of employees in each program division within HSD. Number of Employees allocation is defined in ASMB C-10 Implementation Guide for OMB Circular A-87, to include all full and part time employees of all operating units that are serviced by the organizational unit. The base is also readily available and verifiable; the monthly count is the number of paid employees working in each division/bureau at the end of the month.

Note: The current month count of Number of Employees will be applied to the current month's indirect costs.

2. Direct Expenditure Allocation – ASD Indirect Cost Pools

Direct Expenditure Allocation is determined by using the monthly direct expenditure amounts for each program division within HSD. The direct expenditure amounts exclude payments for major contracts, benefits to recipients and sub-recipients. These expenditures are coded as Activity Type "Program" in the HSD accounting system; see Exhibit 6 Account Code Manual – Activity Legend.

Note: The current month Direct Expenditure Allocation statistics will be applied to the current month's indirect costs.

3. Recipient Count Allocation

Each month the ASPEN system produces a report called the ASD Federal Funding Report. This report tallies a count of individual recipients who received benefits from the Cash, SNAP, Medicaid and CHIP programs during the month. Recipient counts are totaled for each program and divided by the total of all recipients for all programs to determine a percentage. Individual recipients receiving benefits for multiple programs are counted against each program respectively. These percentages are used to calculate the allocated costs amounts for each program.

This report is accessed in the ASPEN reports module and is identified by report number FR-001- Monthly and is available to print or view. The report displays Cash, SNAP, Medicaid and CHIP recipient counts and program percentages.

The report is currently being used to calculate costs for the Departments Maintenance and Operations (M&O) activities for the ASPEN system.

The first column is a numbered item list; the second column displays the program; the third column lists the recipient count and the fourth column displays the percentage of the total. Exhibit A is an example of the September 2016 report.

Exhibit A. ASD Federal Funding Report

State of New Mexico
 Human Services Department
 ASD Federal Funding Report
 (Cost Allocation Report)

Report Id : FFR-001-Monthly
 Report Period : 09/2016

Run Date : 10/02/2016
 Run Time : 02:00:41AM

	Program	# of Individuals Receiving	% of Total (to 4 decimal places)
1	Cash Active	37,699	2.5945%
2	SNAP Active	537,764	37.0091%
3	Medicaid Active	864,043	59.4638%
4	CHIP Active	13,552	0.9327%
5	Total Duplicated Count	1,453,058	100%

***** END OF THE REPORT *****

ASPEN Report, Page 1 of 1

4. Number of EBT Transactions Allocation

Number of EBT Transactions allocation is determined by using the monthly count of the EBT transactions for each program that is provided on the EBT card. Number of EBT Transactions is used to allocate the costs associated with administering the EBT cards; the expenditures are the payments to the fiscal agent of the EBT card, Fidelity Information Systems (FIS) , and the EBT Section with ISD.

The programs included in EBT Transactions are the following:

- SNAP
- Refugee CMA
- TANF
- General Assistance
- Education Works
- Adult Residential Shelter Care Home Program

NOTE: The current month Number of EBT Transactions Allocation statistics will be applied to the current month's indirect costs.

5. Administrative Expenditure Allocation – MAD

The costs allocated to the Medical Assistance Division from the following indirect cost pools: Office of the Secretary, Office of General Counsel, Human Resources Division, Information Technology Division, Administrative Services Division, and the Office of Inspector General are further allocated to the Medical Assistance Division programs based on direct administrative expenditures for each of the grants managed by MAD. The only grant in MAD allocated costs is Title XIX Medical Assistance Administration.

6. Expenditure Allocation – ISD

The CSBG, Refugee CMA and LIHEAP grants have costs allocated from the ISD Indirect Cost Pool. HSD has taken into account the other administrative costs charged to these grants and calculated the maximum amount each grant could be allocated of the ISD Indirect Cost Pool.

7. Expenditure Allocation – BHSD

BHSD is comprised of 44 staff that conduct BHSD operations and provides support to the Collaborative and the BHPC. Currently, 6 staff are term positions and charged directly to a federal grant. There are 19 staff that are paid through State General Funds and 17 staff are paid by a combination of State General Funds and Medicaid (thirteen of these seventeen staff were approved in previous PACAP updates). Two (2) staff are paid by a combination of state general funds and federal grant allocation based on actual time reporting (Time and Effort).

8. Time and Effort Reporting:

The costs associated with several bureaus within HSD are allocated based on Time and Effort, or positive activity reporting. This is necessary for allocating staff costs to the multiple activities and/or programs on which they spend their time. Staff assigned to the following administrative bureaus report their time through the Time and Effort reporting process recording how their time is spent each week (by grant). Staff signs and submits these monthly worksheets for review and approval by supervisors and managers. The Time and Effort worksheets are received in Administrative Services' Grants Management/Cost Allocation Bureau for continued processing to convert times recorded into allocated costs to the appropriate grants. The bureaus /sections in HSD utilizing time and effort are: Quality Assessment Bureau, two New Mexico Works staff in the Work and Family Support Bureau, Work and Family Support Bureau chief,

staff manager and some of the field specialized units in the Income Support Division (ISD); Office of General Counsel; Fair Hearings and Appeals in the Office of the Secretary (OoS); Fraud Investigation and Prosecution Bureau, Internal Audit Bureau and Restitutions Bureau in the Office of Inspector General Division (OIG); and Application Support Bureau, Engineering Compliance Bureau, and Project Management in the Information Technology Division and several staff within Behavioral Health Services Division (BHSD) who work on more than one cost objective.

9. Time Distribution Process:

Certain staffs in the Medical Assistance Division use the Time Distribution process to report and monitor time spent on activities with various federal financial participation rates. The rates for payroll of the Medical Assistance Division are:

- 90% for personnel engaged in the design, development or installation of mechanized claims processing and information retrieval system
- 90% for personnel administering family planning services and supplies
- 75% for personnel engaged directly in the operation of mechanized claims processing and information retrieval systems
- 75% for Skilled Professional Medical Personnel (SPMP) and directly supporting staff to SPMP
- 50% for all other staff of the Medical Assistance Division, training and other expenses
- Current CHIP EFMAP for personnel administering the CHIP program
- FMAP for Other Medical Assistance Division grants or
- 0% FFP for grants or state-funded programs in the Medical Assistance Division

For staff in all MAD bureaus, percentage estimates are determined based on the actual tracking of how time was spent the previous months. These estimates are compared monthly with actual time tracking completed by staff, reviewed and signed off by supervisors, line managers, or bureau chiefs. Adjustments are made to the task profile area of the PeopleSoft system for each employee (which drives the assignment of costs to correct grants/projects) and adjustments are made to the general ledger to reflect the actual time spent on these various FFPs. The time tracking process, used to adjust percentages set up for staff members utilizes similar Time and Effort worksheets shown in Exhibit 3.

NOTE: Costs specifically assigned directly to programs through Department Codes or Award IDs and Project IDs will continue to be directly assigned, as appropriate.

10. Time Verification:

Time verification is the process of staff entering 100% of their time in the Human Capital Management System (HCM). Managers review and approve the time entered verifying the programs entered and that the hours worked reconciles to staff approved schedules.

PART III SECTION 1C – STATEWIDE COST ALLOCATION

C. STATEWIDE COST ALLOCATION

The latest statewide cost allocation plan prepared by the New Mexico Department of Finance and Administration's Budget Division allocates the following statewide costs to HSD:

- Department of Finance and Administration (DFA): Administrative Services; Financial Control; Budget
- General Services Department (GSD): Purchasing and Property control
- Public Records
- Personnel Office
- State Treasurer

In general, allocation statistics in the Statewide Cost Allocation Plan (SWCAP) do not allow the identification of costs below the department level; therefore, the costs from the SWCAP must be allocated using statistics that relate to the services being provided. Costs are first allocated based upon Number of Employees in each program division then a step down allocation within each program division. The costs allocated to the Income Support Division (ISD) are further allocated based on Recipient Count Methodology results; and the remainder of the costs allocated to the other program divisions are allocated based on direct expenditures, as described in Part III Section 1.B.2.

A step-down allocation is used based upon expenditures include:

- DFA-Administrative Services, Financial Control, Budget
- GSD-Purchasing and Property Control
- State Treasurer

These costs will be assigned to two intermediate cost pools—one set up to distribute costs directly to programs based on FTE's and another set up to distribute costs directly to programs based on expenditures.

D. SPECIAL ALLOCATION ISSUES

The Public Assistance Cost Allocation Guide identifies several specialized cost allocation issues. Most of those issues are specifically identified in the allocation methods listed for each organizational support unit within Program Support, in Part II A. The special cost categories listed in the Public Assistance Cost Allocation Guide include:

- Quality Control

- Office of General Counsel
- Fair Hearings and Appeals
- Fraud Investigation and Prosecution
- Automated Data Processing (ADP)

Quality Control, Office of General Counsel, Fair Hearings and Appeals, and Fraud Investigation and Prosecution are all allocated based upon specialized Time and Effort reporting, previously described. Central Processing Unit (CPU) Usage costs and ADP costs are described below.

Central Processing Unit (CPU) Usage Costs are based on billings from the State's central information technology agency, the Department of Information Technology (DoIT). The CPU system costs incurred by HSD are assigned to each of the divisions based on the utilization for each of the systems used by CSED.

CSES – Child Support Enforcement System

CSES provides tracking for Child Support Enforcement cases, support orders and financial transactions for child support clients of New Mexico. CSES contains a database that provides information to custodial parents, non-custodial parents, employers and Child Support Enforcement Division management. CSES also ensures that federally mandated reporting changes by the Office of Child Support Enforcement (OSCE) are met. Costs attributable to CSES are HSD staff that has CSES user identification codes and the amount of time logged onto CSES. No allocated costs are attributable to CSES.

Each month HSD receives a bill from DoIT for utilization of the mainframe system CSES, The utilization costs associated with CSES is direct charged to CSED and the Title IV-D grant.

Advanced Planning Documents (APDs and APDUs) Costs associated with major system development and ongoing operations and maintenance of existing program specific systems plus the Advanced Planning Documents (APDs) and Advanced Planning Document Updates, are accounted for in the HSD accounting system. HSD's accounting structure places an emphasis on recording, managing and reporting detail expenditures and detail project data, tying these to approved APD budgets by FFP rates by Federal Fiscal Year. Within this structure are the Project ID's needed to track the costs of the various FFP rates and the Activity codes for isolating certain costs (i.e. staff costs, contractual costs, etc.).

A summary of these APDs are listed below with more descriptive information in the paragraphs that follow:

Area	Number of APD's	Status
MMIS Enhancements	2	Open
HIT Implementation/Incentives	2	Open
ASPEN Maintenance & Operations	1	Open
Enhanced Funding Eligibility Workers	1	Open
CSES – System's Maintenance & Operations	1	Open
CSES Replacement	1	Open
MMIS Replacement	1	Open

MMIS Enhancements

The MMIS contract effective April 1, 2013 was the continuation of the current State Fiscal Agent. This is in progress to modify the MMIS for various updates to enable the Department to continue its use until a replacement system is implemented; expiration date of this APD is September 2017.

Health Information Technology (HIT)

Section 4201 of the American Recovery and Reinvestment Act of 2009 (ARRA) authorized funding for Medicaid programs to run incentive payment programs for the adoption and meaningful use of health information technology (HIT). The State receives 90% federal funding for planning, implementation and operation of the Electronic Health Record (EHR) incentive program. The State received approval for FFY15 \$1,085,271 for HIT implementation.

Eligible professionals (EPs) can receive incentives by demonstrating compliance with the EHR program. Incentive payments to EPs who participate in the program are funded 100% by the federal government. The State received approval for FFY15 \$30,842,081 for HIT Incentives.

ASPEN – Maintenance & Operations

The ASPEN system was implemented statewide over the period of July 2013 through March 2014. CMS approved the OAPDU for the Maintenance and Operations (M&O) for last quarter of FFY14 and all of FFY15 in June 2014.

With the implementation of ASPEN, HSD determined that an updated M&O Cost Allocation methodology was warranted. The cost allocation percentages used will be the proportion of active clients being served by the ASPEN system in each Public

Assistance program to the total clients served. This is a duplicated count, given that many clients are served by more than one program, thus exercising functionality specific to each program.

In June 2014 the Department received approval for reallocation/carry forward of funds for Maintenance & Operations for FFY15.

In FY2016, the scope of the HSD eligibility system project encompassed ASPEN M&O and support; application development for system enhancements and “bug” fixes.

In FY2017, the scope of the HSD eligibility system project encompasses ASPEN M&O and support; application development for system enhancements and “bug” fixes; and the Eligibility and Enrollment (E&E) enhancement to the ASPEN software platform.

ASPEN - Enhanced Funding Eligibility Workers

On September 29, 2014 the Department received approval for FFY15 funding at the 75 FFP for staff time that work on mechanized eligibility determination systems. The Department complied with the Medicaid Information Technology Architecture (MITA) seven standards and conditions and demonstrated readiness on October 1, 2013.

CSES - Maintenance & Operations

The CSED automated system has been certified since April 5, 1999. CSED has been submitting Annual APD Updates since 1994.

CSES - Replacement

As of December 2014 the Department has received an SFY15 appropriation for \$1,551,000 (\$1,023,700 in federal funds and \$527,300 in state general funds) for the CSES replacement project (CSESR). In SFY16 an appropriation of \$3,400,000 in state funds has been requested. The Department received approval of \$26,636,478 in federal funding for the CSES replacement project. The project is intended to enhance the efficiency and effectiveness of the current process of child support enforcement by reducing costs and improving customer service and system usability.

The State procured a Project Management Office (PMO) with experience in planning and executing child support replacement systems to oversee the planning, monitoring and execution of the replacement of the NM Child Support Enforcement System (CSES). The contractors selected for the **PMO are FirstData and Netlogx.**

In addition to the CSESR project, the State is also in the initial stages of the Medicaid Management Information System Replacement (MMISR) project. With the recent implementation of New Mexico's eligibility system to support the IV-A program (ASPEN), New Mexico has implemented new technologies, and components that may be leveraged for both CSESR and MMIS.

Advantages of having one PMO oversee both the CSESR and the MMISR projects will:

- Share resources across the project for activities such as financial, administrative, technical and project controls to save resources, time and money;
- Systems and technical staff on both projects become familiar and responsible with federal HHS standards (such as NHSIA and MITA) for leveraging hardware and frameworks for both projects and ideally with ASPEN;
- Leverage web portal functions for all New Mexico Human Services clients to provide a single and simplified way for consumers to access and provide information (rather than siloed web portals); and
- Leverage technology across HSD to provide strong privacy and security protections to safeguard client information.

The total cost of the PMO contract for both CSESR and MMISR is estimated to be **\$22,315,269** for an estimated period of 63 months. The total estimated cost of the PMO for the life of each project is estimated at \$11,157,634.50. The CSESR PMO contract is a cost based fixed price deliverable contract.

MMIS Replacement – The Department received approval from the CMS in March of 2014 for \$52 million in federal funding for federal fiscal year 2014. The approval of the federal funding is enhanced federal financial participation in accordance with the seven standards and conditions as required by Sections 1903 (a)(3)(A)(i) and 1903(a)(3)(B) of the Social Security Act. The estimated total cost of the replacement of the MMIS is \$176 million; which includes \$144 million federal funding and \$32 million in state general fund. Overall, the planning effort and replacement work will require six years for completion. The Department has exercised the option to use a "Shared PMO" with the Child Support Enforcement Division to reduce costs and leverage current technology investments made in the ASPEN Eligibility System.

PART III – SECTION 2A – PROGRAM SUPPORT

II. FUNCTIONS OF ORGANIZATIONAL UNITS AND COST ALLOCATION OR COST ASSIGNMENT METHODS

A. PROGRAM SUPPORT

1. Office of the Secretary (1000000000)

The Cabinet Secretary and staff establish the mission, long-term goals, and short-term objectives for the department within the limits imposed by legislative, executive, and federal laws, rules, regulations and budget. Staff in the office is responsible for the Department's public information and internal communications system. Within the Office of the Secretary are Constituent Services, the Native American Liaison, the Communications Director. The Secretary directly supervises the two Deputy Cabinet Secretaries, as well as the Chief Legal Counsel, the Administrative Services Division Director, the Inspector General, the Communications Director and an Executive Assistant.

One Deputy Cabinet Secretary oversees the Child Support Enforcement Division, the Income Support Division, the Information Technology Division, the Human Resources Division, and the Fair Hearings Bureau.

The other Deputy Cabinet Secretary oversees the Medical Assistance Division, and the Behavioral Health Services Division .

Allocation Basis: *Costs of the Office of the Secretary and staff will be allocated to programs based on Number of Employees. All of the staff works in a single indirect cost activity. Costs of the Chief Legal Counsel and staff will be allocated based on the results of Time and Effort.*

2. Human Resources Division (3000000000)

The Human Resources Division develops, maintains, monitors, and improves HSD's internal position recruitment system. It executes all personnel action requests for establishment, reclassification, transfer or deletion of positions, as well as appointments, changes to salary, employment, pay and leave status, employee classification, position numbers, work location, name, address, etc. for HSD.

Allocation Basis: *Costs of the Human Resources Division are allocated to programs and based on Number of Employees. All of the staff works in a single indirect cost activity.*

3. Information Technology Division (ITD) (4000000000)

The Information Technology Division develops and maintains HSD's many automated systems. It is also responsible for equipment maintenance and equipment refresh initiatives, as well as help desk functions. HSD operates the following large scale information systems that establish and record eligibility for public assistance, deliver a variety of services and benefits to eligible New Mexico citizens, and produce financial accounting transactions along with performance measurement data.

- The Child Support Enforcement System (CSES) is used to establish, enforce and track child support payments. CSES will be phased out over the next 5 years and a replacement system will be implemented.
- ASPEN is used for public assistance eligibility and benefit issuance.
- OMNICAID (MMIS) is used for payment of health care services on behalf of Medicaid recipients. OMNICAID will be phased out over the next 5 years and a replacement system will be implemented.

The Chief Information Officer (CIO): heads the IT organization, Information Technology Division (ITD). The CIO reports directly to the HSD Deputy Secretary, in the HSD Office of the Secretary. There are three main areas within ITD: System Services, Software Engineering and New Development Initiatives. These areas are headed by Deputy Chief Information Officers that report directly to the CIO. The Chief Security Officer and the Administrative Operations Bureau also report directly to the CIO.

Chief Security Officer: The Security Officer protects HSD's confidential business information from unauthorized disclosure, implements federal security controls, and assists HSD staff in implementing security management, operational, and technical controls. The Security officer maintains federal compliance by providing periodic security compliance reports, implements fixes and enhancements to mitigate audit findings, and will report information breaches or suspected breaches to federal partners.

Administrative Operations Bureau (AOB): is responsible for the fiscal functions of the Divisions, including entering requisitions, procurement management, receipt of goods and services and processing of invoices. This Bureau is also responsible for ITD-related human resource activities.

Allocation Basis: *The CIO and staff costs are allocated to programs based on the Number of Employees. All of the staff works in a single indirect cost activity.*

Software Engineering: is comprised of the following bureaus: Application Support Bureau and the Project Management Bureau. The following paragraphs describe each bureau:

Application Support Bureau (ASB): consists of three main teams: CSES Development, Microsoft Development and QA. The teams consist of developers, business analysts, and testers providing analysis, programming, problem-resolution, and support of in-house automated systems such as the Child Support Enforcement System (CSES), CLAIMS 2.0, SDX, SVES/WTPQ, CTS and IRU. ASB also supports the exchange of data for interfaces between other state systems such as ASPEN and MMIS; federal agencies such as SSA, CMS, FNS, and IRS; and other New Mexico State agencies such as Department of Workforce Solutions (DWS), Children Youth and Families Department (CYFD), Taxation and Revenue Department (TRD) to name a few. ASB staff also provides production control activities associated with mainframe system needs.

Allocation Basis: *Costs of the Application Support Bureau are allocated based on Time and Effort reporting.*

Project Management Bureau: is responsible for managing technology projects for programs supported by HSD. Project Managers are assigned to specific programs and are responsible for the overall coordination of efforts to ensure that a project is completed on time, within budget and in accordance with project scope, using accepted project management best practices, tools and methodologies.

Allocation Basis: *Costs of Project Management Bureau are allocated based on Time and Effort reporting.*

Test and Batch Bureau: The Test and Batch Interface Application Development team handles production and batch support for the mainframe, most especially the Child Support Enforcement System (CSES), but also Legacy mainframe applications. They also manage the Secure Transport Server which handles secure file transmissions between an ever-increasing number of internal and external interface entities. Additionally, the team is involved in automating formerly manual batch processes, TRACS management, Federal Reporting for Behavioral Health, Federal and State interfaces to HSD, and on call duties for CSES and Legacy applications.

Allocation Basis: *Costs of the Test and Batch Bureau are allocated based on Time and Effort reporting.*

ASPEN Maintenance and Operations: The Department is continuing to build upon its success with the ASPEN project and looking to extend the use of ASPEN to other agencies. Components of the ASPEN system are being enhanced so that they may be leveraged by other HSD systems as well as be used by other agencies and organizations. The Department will be enhancing ASPEN and the YES-NM portal in support of the New Mexico Health Insurance Exchange as it moves towards a state based marketplace.

Allocation Basis: *Costs of the ASPEN maintenance and operations are allocated based on the last approved APDU by CMS and FNS for the ASPEN project.*

System Services is comprised of the following Bureaus:

Production Support Bureau (PSB): is responsible for providing help-desk and desktop support for all of HSD's staff located throughout the state. The HSD Network Help Desk is the first line of technical support for hardware, software, and network problems. Security access to HSD systems and the State's ERP system (SHARE) are processed within PSB. PSB also coordinate end user IT equipment refresh cycles on an annual basis. Field support is limited, new technologies allow for support staff to provide remote support on a daily basis.

Systems Administration Bureau (SAB): is responsible for administering, maintaining, and upgrading the virtualized server architecture implemented within HSD. This includes maintaining the agency-wide backup strategy and support, planning and maintenance of various other backend technologies such as Data Storage, Virus Protection and Web Filtering. SAB also acts as the second and third tier of support for the workstations, servers, operating systems, printers, and software installation.

SAB is also responsible for HSD's wide area network (WAN) and local area network (LAN) in core sites and remote offices throughout the State. This includes all equipment associated with voice and data communications. This Bureau maintains all routers, switches, firewalls, load balancers and other network equipment. This Bureau is also responsible for designing new building infrastructure and supports all locations within HSD. The communications group works closely with the DoIT/Office of Communications, submitting work orders for any changes to the HSD Communications System. All work is coordinated with DoIT since HSD is a part of the overall State Network.

Allocation Basis: *The staff in System Services works on a single indirect cost activity. Costs of the staff are allocated to the appropriate program based on Number of Employees.*

HHS2020 Bureau: The HHS 2020 group is charged with replacing our Medicaid system with a certified replacement by 2020 in order to continue to receive the federal match and enable more cost efficient and effective health care for the Citizens of New Mexico. In addition the HHS 2020 group is working to replace the Child Support Enforcement Software as well as build a new web portal for a unified experience accessing HHS services for the citizens of New Mexico and a new Consolidated Call Center to provide a single location for Citizens to call to access any HHS services. The backend Data Services and System integrator that will be built for the Medicaid Replacement as well as the new web portal will be made available to other agencies such as DOH and CYFD to enable better service and more accurate reporting for their programs as well.

Allocation Basis: *Costs of the HHS2020 Bureau are allocated based on the last approved APDU's by CMS and OCSE.*

4. Office of Inspector General (6000000000)

The mission of the Office of the Inspector General (OIG) is to:

- Work to reduce program vulnerabilities and enhance integrity in the delivery of public assistance benefits to the citizens of New Mexico.
- Enhance the effectiveness and efficiency with which HSD manages public resources by preventing and detecting fraud, waste, abuse, and misconduct.

Inspector General's Office: includes the Office Administration Unit that facilitates the Strategic Vision Development, program evaluation, fiscal planning, records management, reporting and purchasing. The OIG oversees the following bureaus: Criminal Investigations and Internal Audit.

The Office Administration Unit is responsible for administering several federally mandated programs for the OIG, which consist of the following:

- Fleeing Felon Program, which intercepts and prevents individuals who have an outstanding felony warrant from participating in public assistance programs while notifying law enforcement of the felon's location
- The Interstate Match Program locates individuals that are concurrently receiving assistance in more than one state in order to disqualify and proceed with restitution.

- The diversionary Trust Program attempts to collect the balance from a trustee of a specified trust account that is owed to HSD.
- Administrative Disqualification Hearings (ADH) provides a third party review to ensure the sufficiency of case evidence and documentation. This unit is responsible for ADH referral case review, which is a requirement of the SNAP Program.

Allocation Basis: *All of the Inspector General's Office including the OIG Administration Unit work on a single indirect cost activity. Costs of the staff are allocated to the appropriate program based on Number of Employees.*

The Criminal Investigations Bureau: is responsible for recipient and department internal investigations, as well as investigations involving criminal activity, computer fraud and financial crimes arising from the misappropriation of public funds.

Allocation Basis: *Costs of the Criminal Investigations Bureau are allocated based on Time and Effort.*

The Internal Audit Bureau: conducts external financial and program compliance audits of vendors and contractors, as well as provides financial investigative support to the OIG. The Bureau also assists senior management in independent appraisals as to the effectiveness of organizational units within HSD.

Allocation Basis: *Costs of the Internal Audit Bureau are allocated based on Time and Effort.*

5. The Fair Hearings Bureau (1005000000)

The Fair Hearings Bureau handles formal evidentiary hearings and issues written decisions of determinations covering any program matter in dispute or any other hearing conducted by HSD.

Allocation Basis: *Costs of the Fair Hearings Bureau are allocated to the appropriate program based on Time and Effort.*

6. Office of General Counsel (2000000000)

The Office of General Counsel provides legal support both to administration and program. Its primary mission is the defense of suits filed by applicants, recipients and vendors, and includes handling appeals.

Allocation Basis: *Costs of the Office of General Counsel are allocated to the benefiting program based on Time and Effort.*

7. Administrative Services Division (5000000000)

Office of the Director: The director oversees bureaus that provide central administrative and support services to both programs and other support services. The Bureaus operating within ASD include:

- Accounting Bureau
- State Disbursement Bureau
- Grants Management Bureau
- Accounts Receivable Bureau
- Compliance and Financial Systems Bureau
- Budget Bureau
- Restitutions Bureau
- Accounts Payable and Payroll Bureau
- General Services Bureau
- Contract Management and Procurement Bureau

There are three functional areas under the Director and Deputy Directors as follows: Assets, Procurement and Budget; Accounting and Disbursements; and Collections and Compliance.

Allocation Basis: All of the staff works in a single indirect cost activity. Costs of the Director of Administrative Services and staff, including the two Deputy Directors are allocated based on Number of Employees in the program divisions.

Assets, Procurement and Budget

General Services Bureau performs a variety of functions for HSD including:

- **Property Management** staff oversees all facility issues for both leased and State-owned property; including processing quarterly lease payments and maintenance of the lease directory.
- **Fixed Asset Inventory** staff conducts the annual inventory, update fixed asset ledger in HSD's accounting system, and tag assets over \$5,000.
- **Warehouse** staff order, stock, and maintain records on supplies.
- **Copy and Mail Center** staff provides copy and mail services to all divisions.

Allocation Basis: *All of the staff works in a single indirect cost activity. Costs of Property Management will be allocated based on the Number of Employees.*

Contract Management (Procurement) Bureau: audits all purchase documents for State Procurement Code compliance, correct account codes, and other regulatory and policy compliance. Staff reviews contracts for authorized signature and proper documentation and processes them through the appropriate agencies.

Allocation Basis: *All of the staff works in a single indirect cost activity. Costs of Contract Management Bureau will be allocated based on the Number of Employees.*

The Budget Bureau: develops, implements, monitors, analyzes, and controls HSD's budget. Staff has specific responsibility for analyzing the budgets of major programs.

Allocation Basis: *All of the staff works in a single indirect cost activity. Costs of the Budget Bureau are allocated based on Direct Expenditures.*

Accounting and Disbursements

Accounting Bureau: produces the monthly internal financial statements; reconciles HSD expenditures and revenues, and analyzes balance sheet accounts. The Bureau also reconciles all fund accounts and is responsible for the administration of the petty cash and client medical travel accounts.

Allocation Basis: *All of the staff works in a single indirect cost activity. Costs of the Accounting Bureau are allocated based on Direct Expenditures.*

Accounts Payable and Payroll Bureau: is responsible for the processing of the agency payroll and accounts payable transactions.

Allocation Basis: *All of the staff works in a single indirect cost activity. Costs of the Accounts Payable staff are allocated based on Direct Expenditures. The Payroll staff is allocated based on Number of Employees.*

State Disbursement Bureau: is responsible for posting all collections to the child support system, including reconciling electronic fund transfers to the State Treasurer's Office records. Previously, this unit was housed within the Child

Support Enforcement Division. HSD management felt that better financial focus and oversight would result from moving this organization under ASD.

Allocation Basis: *Since these services benefit only the Child Support Enforcement Program, costs are assigned directly to that program. The staff's time is assigned to this program through Time and Labor reporting. Semi-annual certifications are maintained for staff that works solely on one program.*

Collections and Compliance

Accounts Receivable Section: is responsible for processing accounts receivables and managing the cash draw down functions for the department.

Allocation Basis: *All of the staff works in a single indirect cost activity. Costs of the Accounts Receivable and Cash Management Bureau are allocated based on Direct Expenditures.*

Grants Management Section compiles, analyzes, and reports expenditures and revenues of all federal, state, and local programs. These responsibilities include developing the cost allocation plan and any amendments thereto plus preparing the monthly cost allocation calculations.

Allocation Basis: *All of the staff works in a single indirect cost activity. Costs of the Grants Management Bureau are allocated based on Direct Expenditures.*

Compliance and Financial Systems Bureau: is the liaison for federal, internal and/or external audits, documents HSD policies and procedures and oversees system administration for the statewide accounting system.

Allocation Basis: *All of the staff works in a single indirect cost activity. Costs of the Compliance and Financial Systems Bureau are allocated based on the Number of Employees.*

The Restitution Services Bureau: tracks and collects civil and criminal penalties in addition to overpayments due to HSD by clients, contractors and vendors. Restitutions are facilitated through the administrative disqualification of clients, federal and state income tax refund intercept programs and other administrative sanctions and court orders of garnishment. The Restitution Services Bureau normally tracks some 120,000 active claims, representing over 70,000 individual debtor accounts

Allocation Basis: *Costs of the Restitution Services Bureau are allocated to the appropriate program based on Time and Effort.*

PART III – SECTION 2 B – MEDICAL ASSISTANCE DIVISION

B. MEDICAL ASSISTANCE DIVISION (MAD) (8000000000)

MAD Director's Office

The **Medical Assistance Division (MAD)** is responsible for direct administration of the New Mexico Medicaid, Children's Health Insurance Program (CHIP) and other medical assistance programs. Medicaid and CHIP are collectively referred to simply as Medicaid. Medicaid is a joint federal and state program that pays for health care to low-income New Mexicans who have been determined to be eligible based on certain financial guidelines and citizenship/residency requirements.

Most Medicaid services are delivered under the New Mexico Centennial Care program, which began on January 1, 2014. Under Centennial Care, four managed care organizations (MCOs) provide physical health, behavioral health, long-term care and community benefits to enrolled members/recipients. Native Americans who qualify for Medicaid receive services under a fee-for-service model, unless they chose to receive services under Centennial Care, are dually-eligible for Medicare and Medicaid, or require long-term care or community benefits.

The MAD Director's Office oversees and directs the Medicaid program, develops strategic goals and objectives, and provides guidance to all levels of staff for the programs that are administered by MAD. The Director's Office consists of the Medicaid Director and three deputy directors; the Enterprise Business Manager; the Office of the Medical Director; the Office of Health Care Reform; a Health Care Operations Manager; a Native American Liaison; and various support staff members.

As the administrator of Medicaid, the Division's mission is to ensure access to medically necessary services for Medicaid-eligible individuals. There are numerous Medicaid categories of eligibility, including categories for individuals receiving Supplemental Security Income (SSI); families receiving Temporary Assistance for Needy Families (TANF) or refugee cash assistance; children; pregnant women; low-income adults; individuals who need family planning services; persons with breast or cervical cancer; working disabled individuals; and persons with a nursing facility level of care residing in long-term care facilities or in the community. In addition, Medicaid eligibility can be extended in certain circumstances when eligibility under one category is lost for various transition reasons. Medicaid covers traditional acute care services as well as psycho-social and long term care benefits. Over 15,500 providers participate in the Medicaid program in New Mexico.

Allocation Basis: *Some of the MAD Director's staff costs are direct charged at 50% to Title XIX Administration and Training. Other staff work on multiple cost objectives with various FFP and allocate their time through direct time reporting to the appropriate grant (Award ID) and FFP (Project ID). Semi-annual certifications are maintained for staff that works on a single cost objective or FFP .*

MAD is organized under three Deputy Directors who oversee the day to day functions in the Medicaid Division.

Deputy Director #1

The first MAD Deputy Director has oversight of the eligibility policy for recipients and provider enrollment for the Medicaid Program. This position oversees the Program Policy and Integrity Bureau, Communication and Education Bureau and the Eligibility Bureau. The three bureaus perform a broad range of functions that include state and federal policy and rule development, provider enrollment and Medicaid eligibility oversight, education and communication.

Program Policy Bureau (PPB):

- Provider enrollment including approving the applications and overseeing the fiscal agent's provider enrollment activities;
- Reference file maintenance including periodic updates (diagnosis codes, procedure code, provider files, pricing files and other files used in claims processing), claim editing, claims payment levels, and other tasks associated with keeping the Medicaid Management Information System (MMIS) current, accurate, and consistent with state and federal rules.
- State plan amendments, submissions, and responses.
- Promulgating Medicaid program rules and policy, including managing some of the benefit packages for various aspects of the Medicaid program, taking provider calls, reviewing problem claims suspended in the computer payment system prior to payment, and coordinating claims resubmissions between the providers and the Medicaid fiscal agent.
- Operating the Medicaid program integrity unit, taking referrals, and coordinating activities, working with and overseeing the federally required RAC contractor, working with the fraud unit, the department's office of the inspector general, and the attorney general's office.
- Operating a fair hearings unit, to work with Fair Hearings Bureau in the Office of the Inspector General and coordinates all necessary materials and expertise from the Medicaid Assistance Division.

- Analyzing Medicaid data from the Medicaid data warehouse for multiple purposes.

PPB has several health care professionals within the bureau whose medical knowledge and expertise are required in order to manage a health insurance program, properly direct the Medicaid fiscal agent on claims payment issues, and work with others on numerous operational and claims payment issues related to a wide array of physical health and mental health services.

Allocation Basis: *Some of staff costs are direct charged at 50% to Title XIX Administration and Training. Other staff works on multiple cost objectives with various FFP and allocates time through direct time reporting to the appropriate grant (Award ID) and FFP (Project ID). Semi-annual certifications are maintained for staff that works on a single cost objective or FFP.*

Communication and Education Bureau (CEB)

The Communication and Education Bureau (CEB) is responsible for the development and dissemination of Medicaid recipient education. CEB staff develops educational materials and marketing collateral and are responsible for coordinating the review and approval process of all MCO marketing materials. CEB staff oversees the Medicaid Presumptive Eligibility (PE) program. This includes the training and certification of PE Determiners state-wide. Staff will audit the performance measures of all PE Determiners.

The Bureau also has the ability to make changes to client case information and eligibility functions in ASPEN. Client MCO change requests are submitted to and processed by CEB staff.

Beginning in the spring of 2014, the CEB will begin processing all Breast and Cervical Cancer application approvals and re-certifications. They will also process client applications and re-certifications submitted by PE Determiners on behalf of clients. CEB has managed and offered oversight of the Children's Health Insurance Program Reauthorization Act (CHIPRA) Cycle I, II & III grants received by HSD/MAD.

The bureau is now also responsible for implementing and overseeing the Medicaid for Incarcerated Individuals Program (MIIP) and Short-term Medicaid for Incarcerated Individual program (STMII). The bureau works with the New Mexico Corrections Department and county correctional facilities to support care

for individuals leaving incarceration or needing short-term inpatient care while remaining incarcerated.

Allocation Basis: *Some of the staff costs are direct charged at 50% to Title XIX Administration and Training. Other staff works on multiple cost objectives with various FFP, allocate their time through direct time reporting to the appropriate grant (Award ID) and FFP (Project ID). Semi-annual certifications are maintained for staff that works on a single cost objective or FFP.*

Eligibility Bureau (EB)

The Eligibility Bureau (EB) performs recipient related activities and is comprised of the following two sections:

- Modified Adjusted Gross Income (MAGI) related Medicaid categories (Adult expansion, children and family categories)
- Non-MAGI related Medicaid categories (Institutional Care, Waiver, Medicare Savings programs, WDI, BCC, and EMSA categories)

The EB is responsible for a variety of recipient related activities. Staff is responsible for promulgating and interpreting Medicaid eligibility policy for all Medicaid categories including the Affordable Care Act categories. Staff review eligibility related error reports to address fixes needed for SSI, buy-in, and other Medicaid categories. Staff arrange in and out-of-state transportation, meals, and lodging for fee-for-service recipients. Additional activities include responding to recipient and general public inquiries, partnering with Income Support Division (ISD) and the vendor on ASPEN related projects, processing and submitting Disability Determination requests to the disability adjudicators, prepare and submit the CHIP annual report to CMS, process trust related documents, implement annual COLA, FPL, and CSMIA changes, and assist with the estate recovery program.

Allocation Basis: *Six staff members are direct charged to eligibility determination activities and matched at 75% FFP in accordance with the provisions of the Affordable Care Act (ACA). Some of the staff is direct charged at 50% to Title XIX Administration and Training. Other staff works on multiple cost objectives, or FFP's, and allocate time through direct time reporting to the appropriate grant (Award ID) and FFP (Project ID). Semi-annual certifications are maintained for staff that works on a single cost objective or FFP.*

Deputy Director #2

The second MAD Deputy Director has oversight of Medicaid programs. This position oversees the Centennial Care Bureau, Exempt Services and Program Bureau, **Long Term Services** and Quality Bureau. These bureaus manage specific Medicaid programs that serve Medicaid recipients and assure quality for the services received and performed by various entities including the Managed Care Organizations (MCOs).

Centennial Care Contracts Bureau (CCCB)

The Centennial Care Bureau (CCB) is responsible for the daily operational oversight and management of the Centennial Care managed care contracts. Activities include those functions necessary to implement, oversee, and evaluate these contracts. The managed care contracts provide access to and the delivery of quality physical and behavioral health and long term services as medically necessary to over 650,000 children and adults in the New Mexico Medicaid Program. The development and successful implementation of managed care contracts is influenced through its close working relationship with both clinical and business representatives and senior staff of the managed care plans and the analysis and follow-up of several required reports.

In addition to contract compliance issues, staff is also responsible for the identification, development and implementation of State and federal policy changes that might impact the contracts or delivery of services. Staff interprets State and federal regulations, drafts State regulations, submits federal waivers, develops policy and prepares guidance memoranda, develop and implement contract amendments for the MCOs. Staff members educate clients, stakeholders, providers, advocates, and sister agencies about the managed care program and policies.

Contract monitoring includes:

- Providing MCO technical assistance
- Conducting on-site visits for contract compliance
- Ensuring contract compliance to federal and State regulations
- Determining claims resolution
- Developing and implementing sanctions
- Conducting audits
- Conducting and preparing on site readiness reviews
- Analyzing MCO physical and behavioral health reports

- Monitoring access to care
- Verifying provider availability

Service delivery, availability and access are also measured through the CCB's monitoring of complaints and grievances. It is the contract managers' responsibility to:

- Receive and facilitate resolution of provider and client grievance and complaints
- Identify barriers to care and working with the MCOs for resolution
- Act as liaison to other State agencies and advocacy groups involved with managed care clients.

Additional activities: Collaborate with the Office of General Counsel and external attorneys as needed, to provide extensive input regarding litigation related to Medicaid

- Assist and facilitate systems issues between the MCOs and the Systems Bureau
- Assist sister agencies and other HSD divisions and bureaus with project development and implementation
- Collaborate with the Native American Liaison for tribal consultation on various issues related to delivery of health care
- Participate in the RFP development process
- Represent on community boards and advocacy groups to promote and improve health care delivery
- Attend, represent HSD, and present at in and out-of-State conferences

Allocation Basis: *Some of the staff costs are direct charged at 50% to Title XIX Administration and Training. Other staff work on multiple cost objectives with various FFP, allocate their time through direct time reporting to the appropriate grant (Award ID) and FFP (Project ID). Semi-annual certifications are maintained for staff that works on a single cost objective or FFP.*

Exempt Services and Program Bureau (ESPB)

The primary role of the Exempt Services and Program Bureau (ESPB) is to manage certain long-term care fee-for-service programs including the Program of All Inclusive Care for the Elderly (PACE), the Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF-IID) and home and community based services (HCBS) 1915(c) waivers including the self-directed waiver, for individuals with Developmental Disabilities, and Medically Fragile conditions. In

addition, ESPB the Third Party Assessor (TPA) contract for Medicaid and the Emergency Services for Undocumented Aliens benefit. Lastly, the ESPB manages the non-Medicaid funded Brain Injury program. The ESPB manages a comprehensive array of fee-for-service long-term care programs for low income New Mexicans who are disabled. These programs allow disabled or brain injured consumers to maintain their quality of life and remain independent. Long-term care programs allow consumers the choice and flexibility as to how their care is delivered. The programs are constantly evolving to meet the changing needs of consumers.

The Medicaid School Based Services Program (MSBS)

- The MSBS Program is a Medicaid program for children and youth under 21 years of age who have special education and health care needs and who are eligible to receive services as part of an Individualized Education Plan (IEP) in accordance with the Individuals with Disabilities Education Act (IDEA);
- Multiple interagency initiatives requiring collaboration between the HSD and the Public Education Department (PED) on matters relating to health services provided in the school setting.

Allocation Basis: *Some of the MSBS staff costs are direct charges at 50% to Title XIX Administration and Training. Staff works on multiple cost objectives, or FFP's, and allocate their time through direct time reporting to the appropriate grant (Award ID) and FFP (Project ID). Semi-annual certifications are maintained for staff that works on a single cost objective or FFP. HSD has implemented a web based Random Moment Time Study system to administer the Medicaid Administrative Claiming Program and Direct Medical Services Cost Report for the participating Local Education Agencies (LEAs), Regional Education Cooperatives (RECs), and State Funded Education Agencies (SFEAs).*

Home and Community Based Waivers

The Medicaid program offers three HCBS Waivers for individuals who are developmentally disabled, have medically fragile conditions, or who wish to self-direct their services. The HCBS Waivers operate under Section 1915(c) of the Social Security Act that allows a state to limit the amount, duration, and scope of services. Provision of long-term care services under a waiver allows applicants/recipients to receive the care needed in a home and/or community based setting, at less cost than in an institutional setting.

The Department of Health (DOH) administers all three waiver programs, Developmental Disabilities (DD) Medically Fragile (MF), and Mi Via, for the

Human Services Department through a Governmental Services Agreements (GSAs).

Services offered under these waivers vary by program. Services may include: Case Management; Respite; Physical, Speech, and Occupational Therapy; Nutritional Counseling; Living Supports; Day Habilitation; Supported Employment; Homemaker Services; Behavior Therapy; Private Duty Nursing; and Emergency Response Services.

The New Mexico Medicaid program strives to provide long-term care services to consumers in the most integrated setting. MAD has implemented programs and services that help New Mexico comply with the Americans with Disabilities Act (ADA), the Olmstead Supreme Court interpretation of the ADA, and the Jackson vs. the State of New Mexico Consent Decree.

Allocation Basis: *Some of the staff costs are direct charged at 50% to Title XIX Administration and Training. Other staff work on multiple cost objectives with various FFP and allocates their time through direct time reporting to the appropriate grant (Award ID) and FFP (Project ID). Semi-annual certifications are maintained for staff that works on a single cost objective or FFP.*

Long Term Services and Supports Bureau (LTSSB)

The Long-term Services and Supports Bureau (LTSSB) is responsible for daily operational oversight of the long-term care (LTC) programs within Centennial Care. These programs include the Community Benefit (CB) and nursing facilities. LTSSB is also responsible for issuing allocations to the CB for individuals on the central registry. LTSSB's overall activities include:

- Management and interpretation of the NMAC, Centennial Care Policy Manual, and MCO contracts for the LTC programs
- Oversight of the MCOs in regards to their LTC programs
- LTC related MCO report reviews
- Issuing allocations via mail to individuals on the central registry, including collaboration with the Aging and Long-Term Services Department (ALTSD)
- Assisting allocants through the eligibility process
- Collaborating with ALTSD to improve central registry processes
- Assisting CB providers and nursing facilities with billing issues
- Assisting LTC members with provider and MCO issues

- Collaborating with the MCOs on projects to improve the LTC system and better align enrollment for dual eligibles
- Ensuring that Centennial Care LTC programs meet federal requirements

Additional activities:

- Collaborate with Office of General Counsel and external attorneys as needed, to provide extensive input regarding litigation related to Medicaid
- Assist and facilitate systems issues between the MCOs and the Systems Bureau
- Assist sister agencies and other HSD divisions and bureaus with project development and implementation
- Collaborate with the Native American Liaison for tribal consultation on various issues related to delivery of health care
- Participate in RFP development and evaluation
- Represent on community boards and advocacy groups to promote and improve health care delivery
- Attend, represent HSD, and present at in and out-of-State conferences

Allocation Basis: *Some of the staff costs are direct charged at 50% to Title XIX Administration and Training. Other staff work on multiple cost objectives with various FFP, allocate their time through direct time reporting to the appropriate grant (Aware ID) and FFP (Project ID). Semi-annual certifications are maintained for staff that works on a single cost objective or FFP.*

Quality Bureau (QB)

The Quality Bureau's (QB) primary role is to ensure quality through oversight of all aspects of quality of care; tracking, monitoring and evaluating quality indicators. QB is tasked with multiple State and federal oversight duties directly related to the quality and performance of Medicaid contractors, providers, and other State agencies in the delivery of both managed care and fee-for-service (FFS) Medicaid covered services.

The QB is primarily responsible for oversight of the MCO's care coordination functions, development and implementation of Patient Centered Medical Homes (PCMH) and Health Homes (HH) as authorized under Section 2703 of the Patient Protection and Affordable Care Act (PPACA). While PCMH model has been directed through existing managed care contracts since 2008, the HH model was rolled out in 2016.

The QB oversees compliance with quality standards of care defined by the federal Centers for Medicare and Medicaid Services (CMS) as well as the requirements mandated through regulations, State quality contract and/or General Service Agreements (GSA) requirements, and requirements between managed care organizations and the Human Services Department.

Some mechanisms used by the bureau to monitor and ensure compliance with State and federal Medicaid requirements include multiple targeted clinical audits of client and provider files, which document the access and the appropriateness of physical and behavioral health and long term services and supports delivered to Medicaid populations. Clinical deficiencies identified during these audits result in various sanction activities initiated by the QB including the monitoring of Corrective Action Plans (CAPs) by the provider and/or Managed Care Organization coupled with technical assistance and follow-up clinical audits until adequate correction of the deficiency is verified.

The QB is responsible for the analysis of multiple comprehensive data reports, which are then reported to the various mandated bodies such as the Legislature, CMS, and the Medicaid Advisory Committee. Reports includes trending of patterns of utilization management, complaints and grievances, critical incidents, performance measures, provider and member surveys.

Allocation Basis: *Some of the staff costs are direct charged at 50% to Title XIX Administration and Training. Other staff works on multiple cost objectives with various FFP and allocates their time through direct time reporting to the appropriate grant (Award ID) and FFP (Project ID). Semi-annual certifications are maintained for staff that works on a single cost objective or FFP.*

Deputy Director #3

The third MAD Deputy Director has an oversight of the financial planning and operations of the Medicaid program. This position oversees the Budget Planning and Reporting Bureau, the Financial Management Bureau, and the General Economics. The two bureaus perform a broad range of functions that include budgetary administration, oversight of the financial reports compliance of the managed care organization, development of reimbursement methodologies to certain providers and assurance of accurate financial payments to providers.

Budget Planning and Reporting Bureau (BPRB)

The Budget Planning and Reporting Bureau (BPRB) manages the budget and financial planning functions for the Medicaid program with a role in reviewing financial and accounting reports. Selected functions of BPRB are:

- Publish the Medicaid expenditure and enrollment estimates and projections
- Prepare the state annual budget request for the Medicaid program
- Prepare and submit the quarterly federal budget estimates and budget plan
- Provide research and analysis on health care and health delivery issues, socio-economic topics, and policy implications
- Review managed care rates
- Review budget, procurement, accounting and federal reports
- Perform certain division-wide administrative functions
- Reconcile financial activities
- Analyze managed care financial reports

The BPRB works closely with other bureaus within the MAD, other divisions within the Human Services Department, other state agencies, and CMS regional staff to ensure that the Medicaid program is properly and sufficiently funded. On the financial side, the BPRB works closely with the HSD Administrative Services Division (ASD) on budget, accounting, and federal reporting. These functions are essential to assure the accuracy and consistency of the financial and accounting reporting of the Medicaid program. The BPRB prepares and certifies the federal quarterly budget estimates (CMS-37 and 21B Reports for Title XIX -- Medicaid), budget planning (Title XXI – CHIP), and enrollment report (SEDS) to CMS.

As for planning and research, the bureau produces the Medicaid expenditure and enrollment projections for Title XIX and Title XXI in coordination with other units within the Department and other state agencies. These projections provide the basis for budget and funding needs for medical payments. As such, the projections play a key role for program planning and policy development. The BPRB also conducts research and analytical projects related to health care services and deliveries in support of the Medicaid administration. Additionally, the bureau also evaluates MCO financial reports for trends and consistency that may mirror the encounter data.

The BPRB also manages the actuarial services contract and participates in the managed care rate development and review process.

Allocation Basis: *Some of the staff costs are direct charged at 50% to Title XIX Administration and Training. Other staff work on multiple cost objectives with various FFP and allocate their time through direct time reporting to the appropriate grant (Award ID) and FFP (Project ID). Semi-annual certifications are maintained for staff that work on a single cost objective or FFP.*

Financial Management Bureau (FMB)

The Financial Management Bureau (FMB) oversees the financial compliance of the contracted managed care organizations (MCOs) and the development of provider reimbursement methodologies for hospitals and nursing facilities. The FMB reviews MCO financial reports to assure financial soundness of each MCO and its practices. Selected functions of FMB are:

- Monitor MCOs pursuant to financial provisions of Medicaid Managed Care Contract, including recoupment of overpayments
- Review/validate payments and recoupments for Indian Health Service (IHS) and tribal 638 facilities
- Review hospital and nursing facilities cost reports
- Review federally required disproportionate share hospital report
- Monitor revenue funding for special programs and from miscellaneous revenue sources (e.g., third party liability, fraud, etc.)
- Prepare gross level financial payments to providers via accounting transaction request (ATR) including advance payments
- Evaluate uncompensated care qualifications and payments
- Coordinates the Hospital Quality Improvement Incentive, which includes analyzing performance measure data and applying the allocation and payment methodology.

The FMB operations include financial oversight of the MCOs, assuring proper payments to the MCOs through a process of reconciliation, validation, payments and recoupments, process gross level financial payments to providers and MCOs, and review cost and audit reports. The financial functions may require the creation of ad hoc reports or the development of desktop applications, in addition to standard reports, to gather the information for analysis. These financial functions also involve data lookup and review in Omnicaid. Furthermore, the financial functions include monitoring MCO financial reporting on a monthly, quarterly, and annual basis and may conduct claims and financial audits. In addition, the FMB works closely with the Eligibility Bureau, Budget Planning and

Reporting Bureau, Systems Bureau and Xerox, Medicaid fiscal agent, to improve capitation payment accuracy and correct client-related issues.

The FMB oversees the development of the reimbursement methodologies for Fee-For-Service institutional providers. It executes the reimbursement of Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF-IID), Residential Treatment Centers, Accredited Residential Treatment Centers, Hospitals (Acute and Psych), Home Health Agencies, Hospice Facilities, and Primary Care Clinics. FMB also analyzes rate settings to ensure rates are properly set up in the management information system (OMNICAID) and that facilities are paid accurately and timely.

The FMB staff often represents the Department in relationships with provider associations such as the NM Healthcare Association, Primary Care Association, and the NM Health Systems and Hospital Association. Staff helps these provider groups on changes to the Medicaid program policies and procedures, reimbursement methodologies in the Medicaid Policy Manual, and other proposed legislations.

The FMB also manages the State audit agent contracts. The audit agent contractors perform audits of institutional providers to ensure that the costs being reported to the Medicaid program are allowable. These contractors also conduct the electronic health record audit. Staff reviews and ensures that the audits are performed according to State and Federal laws.

Allocation Basis: *Some of the staff costs are direct charged at 50% to Title XIX Administration and Training. Other staff work on multiple cost objectives with various FFP and allocate their time through direct time reporting to the appropriate grant (Award ID) and FFP (Project ID). Semi-annual certifications are maintained for staff that work on a single cost objective or FFP.*

The Enterprise Business Manager

The Enterprise Business Manager oversees the Medicaid Management Information System-Replacement (MMIS-R) project and with the implementation of this project directly supervises the Systems Bureau and on-going operations of the current Medicaid Management Information System (MMIS).

Systems Bureau (SB)

The Systems Bureau (SB) is responsible for managing the MMIS, MMIS Data Warehouse, MMIS Network, and related systems, as well as the Electronic Health Record (EHR) Incentive Program. Most system operation, maintenance and modification activities are conducted by a fiscal agent. SB manages the fiscal agent contract and directs the activities of fiscal agent systems and operations staff.

The primary goals of the bureau are to provide accurate and timely payments to providers; high quality customer service to providers, recipients, and MMIS users; and to provide readily accessible information to administrators and managers for use in program administration, evaluation, and fraud detection. Staff within this bureau serves as consultants to upper management and Division staff on issues related to program information data collection from the complex and inter-related systems that support the Medicaid program. They also provide training to staff to use and interpret program information to maximize its utility.

New Mexico's MMIS, including the claims processing component known as Omnicaid, is one of the primary tools that the Department uses to administer the Medicaid program. Omnicaid contains all providers, recipients, reference, and claims payment information. Program initiatives are based on information that comes from the MMIS and MMIS Data Warehouse. The duty of SB staff is to understand program managers' needs, help them to define the specifications of desired system changes or reports, and work with fiscal agent or internal staff to obtain the desired results. SB initiates system change requests, reviews and approves the fiscal agent's proposed solution to those changes, and reviews and approves test results prior to the implementation of the resulting system modifications. SB staff also produces reports from the MMIS Data Warehouse in response to requests received from internal and external users.

HSD has hired the services of a qualified contractor to transfer, modify and implement a replacement MMIS that meets the Seven Conditions and Standards, advances the New Mexico Medicaid program's Medicaid Information Technology Architecture (MITA) maturity, leverages technology investments already made by the State and CMS, and lowers ongoing costs. This MMIS-R Project has several phases. The System Evaluation Phase and Procurement Phase are matched at 90%. Additional funding details are located in the NM MMIS-R APD.

Allocation Basis: *Some of the staff costs are direct charged at 50% to Title XIX Administration and Training. Other staff works on multiple cost objectives with various FFP and allocates their time through direct time reporting to the*

appropriate grant (Award ID) and FFP (Project ID). Semi-annual certifications are maintained for staff that works on a single cost objective or FFP.

PART III – SECTION 2-C CHILD SUPPORT ENFORCEMENT DIVISION

C. CHILD SUPPORT ENFORCEMENT DIVISION (700000000)

Established in 1975 as Part D of Title IV of the Social Security Act, the Child Support Enforcement Program (IV-D Program) is a federal-state partnership program created to establish and enforce the support obligations owed by non-custodial parents to their children. Primary functions of the program include: locating non-custodial parents; establishing paternity; obtaining child and medical support orders; and monitoring and enforcing compliance with court orders. New Mexico's Child Support program is authorized through NMSA 1978, § 27-1-8 through 27-1-14, and 27-2-27, which designates the Department as the single state agency for the enforcement of child and spousal support obligations pursuant to Title IV-D of the federal Social Security Act.

The purpose of the program is to ensure that assistance in obtaining support, both financial and medical, is available to children through locating parents, establishing paternity and support obligations, and monitoring and enforcing those obligations. Maximizing child support collections, and reducing public assistance rolls will increase self-sufficiency for the families of New Mexico. The division's mission is to establish and enforces parents' financial and medical responsibilities for their children. In recent years, emphasis on medical support establishment and enforcement has increased at the state and federal program levels.

The functions of the Child Support Enforcement Program are:

- Locate non-custodial parents and their financial assets;
- Establish paternity;
- Establish support orders, including medical support provisions;
- Enforce existing orders for child and medical support (and spousal support, if included in a child support order);
- Review and adjust orders when warranted and according to statutory guidelines, federal regulations, and local court rules; and
- Receive and distribute support collections according to federal and state regulations.

Allocation Basis: Costs are allocated to the IV-D program either directly or indirectly through the methods identified in this document. CSED staff (including SDU staff) and expenditures are directly allocated to the IV-D Program. Indirect costs like HSD support staff (i.e. administration, legal, IT, etc.) and applicable expenditures (i.e. IT utilization) are allocated proportionately to the IV-D Program. HSD prepares and maintains the required semi-annual certification of activity, signed either by the employee or a knowledgeable supervisor. All costs are assigned to the Child Support Enforcement Program at 66% FFP.

Office of the Director is responsible for the oversight and direction of the New Mexico Child Support Enforcement Program to ensure optimum program performance. The Director's Office works in partnership with the US Health and Human Services' Office of Child Support Enforcement (OSCE) and the Administration for Children and Families (ACF) to administer program operations and ensure compliance with federal and state standards and regulations. The office works with the Executive, Legislative, and Judiciary branches of NM State Government and Tribal Governments to provide effective services and sufficient resources. The Director's office is responsible for providing leadership and organization, establishing and implementing policies, reporting on performance and meeting measures, promoting the program mission, responding to customer/constituent needs, managing annual operating budget, budget forecasting, monitoring productivity and cost effectiveness, project planning, overseeing the Child Support Enforcement System (CSES), and maintaining favorable public relations

Currently, the Director's Office is comprised of a Director, a Deputy Director of Field Operations, a Deputy Director of Central Operations, and a Deputy Director of Legal Services and an Executive Secretary.

Deputy Director of Field Operations

The Field Offices for CSED manage a growing caseload of 62,704 active IV-D cases and are responsible for accepting and processing applications for child support services, establishing paternity and assisting in the establishment of child support orders and enforcing child (and spousal support) and medical support orders. Field offices are also responsible for providing child support case status, and receiving and depositing child support payments made by NCPs.

CSED Field Operations are directly under the Deputy Director of Field Operations and consists of two (2) Regional Operations Managers¹¹ field offices and three (3) satellite offices (Alamogordo, Deming and Rio Rancho).

There are two (2) Navajo Nation offices (Shiprock, and Crownpoint) that work with NM CSED. Under a Joint Powers Agreement, these offices utilize CSED resources, such as the CSED automated case management system, forms printing and mailing services, and the customer service center.

The CSED field offices' priority is children. They ensure that financial and medical support is available to children by providing the following services:

Locating NCPs and their financial assets;

Establishing paternity through:

Voluntary acknowledgment

Genetic Testing

Legal Process

Establishing support orders, including medical support provisions through:

Court orders

Applications

Interstate referrals

IV-A/IV-E referrals

Enforcing and monitoring existing orders for child and medical support (and spousal support, if included in a case that also contains an existing order for child support)

through:

Wage withholding

Unemployment compensation benefits intercept

Insurance claim intercept

Credit bureau referrals

- Federal and State Tax Refund Intercept
- License suspension
- Lottery Commission Intercept
- Financial Institution Data Match (FIDM)
- Passport Denial
- Property Liens
- Judicial Enforcement Remedies

Reviewing and modifying support obligations in court orders when warranted and according to statutory guidelines, federal regulations, and local court rules;

Receiving and distributing support collections in accordance with to federal and state laws;

Caseload by Office - November 30, 2016			
Office	ENF	EST	Grand Total
Alamogordo	1,768	309	2,077
Alb-N	6,907	1,762	8,669
Alb-S	7,351	1,287	8,638
Central	19	174	193
Clovis	2,305	734	3,039
Deming	767	161	928
Farmington	3,888	711	4,599
Hobbs	2,552	914	3,466
Las Cruces	7,514	1,043	8,557
Los Lunas	2,505	329	2,834
Las Vegas	3,713	202	3,915
Rio Rancho	2,246	830	3,076
Roswell	5,409	755	6,164
Santa Fe	3,257	663	3,920
Silver City	1,042	226	1,268
Socorro	1,053	308	1,361
Grand Total	52,296	10,408	62,704

As of November 30, 2016, there are 10,408 establishment cases. Establishment of paternity is contingent upon locating the NCP. The CSED Field Offices access numerous databases (for example, utility companies, MVD, New Hire Directory) and rely on inter-divisional cooperation. Once located, CSED Field Offices work with State, County and City Law Enforcement, plus private companies to have the NCP served to pursue judicial action. To establish paternity the field office works with paternity testing services to establish paternity through genetic testing and/or the Voluntary Paternity Unit to obtain acknowledgements of paternity. Once paternity is established, the field offices request financial data from both the CP and NCP. The field offices work with attorneys, judges or judge surrogates (Hearing Officers) who exam the evidence provided by the field offices to determine child support and medical support orders.

As of November 30, 2016, there are 52,296 enforcement cases. Enforcement of child, spousal and medical support orders is accomplished by the use of different enforcement actions. The CSED Field Offices use all remedies available (for

example, License Suspension, Wage Withholding, Financial Data Institute Match (FIDM), passport denial, credit reporting, liens, and bench warrants) to ensure that children receive the financial and medical support they are entitled to.

The field offices work with the courts and other state agencies (for example, Income Support Division (ISD) and Medical Assistance Division (MAD) to establish and enforce child support orders. The field offices are responsible for achieving the performance goals that are established by the state and federal governments. They are also responsible for complying with IRS and other regulations concerning safeguarding confidential information and tracking case information. To maintain compliance with IRS safeguards and other regulations, each field office conducts annual IRS safeguard trainings and IRS internal inspections every three years.

Deputy Director for Central Operations

Central Operations is comprised of two bureaus: Program Support Bureau and Business Information System Bureau, who report to the Deputy Director of Central Operations.

Program Support Bureau

The Program Support Bureau consists of five units: Policy and Quality Assurance Unit; Administrative Enforcement Unit; Constituent Services and Central Registry Unit; Finance Unit; and, Administrative Support Unit. The Program Support Bureau provides program and administrative support to all field offices and central office to ensure that all program initiatives and performance measures are met timely and effectively.

Policy and Quality Assurance Unit

The Policy and Quality Assurance Unit is responsible for Quality Assurance and Policy and Planning.

The Policy and Planning Section coordinates, develops, and writes all CSED operating policies and procedures to ensure that the program meets all federal Title IV-D rules and regulations. The Policy and Planning unit ensures that all standardized forms and documents are updated to meet federal IRS and OCSE guidelines timely and efficiently.

The Quality Assurance Section conducts quality assurance reviews of child support casework, per Federal guidelines and regulations based on

the Federal Data Reliability Audit Model. The goal is to achieve and maintain a minimum of 95% data reliability.

The Quality Assurance Section also conducts the Annual Self-Assessment Review based on the Code of Federal Regulations (CFR45) and submits a written report. The Quality Assurance Section conducts IRS Safeguarding reviews and submits annual written reports.

Constituent Services & Central Registry Unit

The Constituent Services and Central Registry Unit is responsible for all constituent service calls and complaints as well as managing all Voluntary Paternity Establishments, entry of Third Party Liability information reported by employers, and Central Registry. The Constituent Services and Central Registry Unit also receives and tracks constituent and legislative inquiries on child support cases that are received through government officials' offices. In concert with the Director's and Secretary's offices, the staff research and coordinate responses with field staff to ensure that inquiries are addressed timely and that customers are treated fairly and according to law and policy.

Case and customer referrals from the OCSE are also received and resolved by this unit. Constituent and Customer Services staff also respond to consumer-reporting disputes with regard to child support cases and determine if adjustments need to be made to information reported to the Credit Bureaus. Adjustments are made as needed to reported information directly in the credit bureau online system. Related to credit bureau reporting adjustments, customer identity mismatch issues are referred by field staff to Constituent Service staff for resolution. They also coordinate state debit card address updates with the State Disbursement Unit.

The Voluntary Paternity Section works in conjunction with the Department of Health to obtain copies of all Acknowledgements of Paternity (AOP). This section is responsible for entering the AOPs into the CSED automated system and providing the field offices with a paper copy of the AOP upon request. Working with county caseworkers, the unit requests and distributes archived Acknowledgement of Paternity forms from the Department of Health, Bureau of Vital Statistics that are essential to case establishment.

The Constituent Services and Central Registry Unit reviews and monitors the Customer Service Center contract deliverables, including the National Medical Support Notices (NMSN) process,

Under the *Customer Service Center contract*, a toll-free number is available to answer calls for bi-lingual (English and Spanish) information on child support cases. This Customer Service Information Center provides people with need-to-know information on child support cases, and transmits requests for information or action to caseworkers, and relays answers to callers. This staff also manages the Interactive Voice Response (IVR) - an automated tool that provides answers to those questions such as recent payment status, etc. The Customer Service Information Center also assists employers, other states' caseworkers, and customers with their inquiries, which include expediting disbursement of payments by ensuring that information is updated. The Customer Service Center also performs targeted outbound calls to customers on issues such as overdue payments, court hearing reminders, etc.

The Centralized Case Services Section under the Constituent Services and Central Registry Bureau manages central office program operations mandated by Federal and/or State law. The unit is divided into two sections, the Central Registry and the Locate/Central Data Entry.

The Centralized Registry is the clearinghouse between New Mexico and other states', tribal governments', and countries' child support enforcement programs. It initiates all responding interstate cases, communicates requests for action or information on interstate cases to caseworkers, reports on case status to other states' Central Registries or caseworkers, maintains program information for other states' access, and responds to inquiries from Federal officials on New Mexico Interstate cases.

The Central Registry section is responsible for State and Federal Parent Locate Service and Data entry. Locate services include responding to requests from the field offices, other states' and countries' child support enforcement programs to locate parties in child support cases who reside in New Mexico, responding to District Attorneys requests for information for parental kidnapping cases, coordinating in-state parent locator activities with other state agencies/departments (i.e. New Mexico Corrections Department, New Mexico Department of Health, Vital Records and Health Statistics Bureau), county clerks, and other locator information

sources. Other sources utilized for parental locate are Accurint, a debt collection service, and New Hires Directory as well as employer verification and postal address verification letters. All information provided by these sources is entered into the CSES on member based screens to promote legal activity for the field offices.

The New Mexico *New Hires Directory* contract is monitored by the Constituent Services section. The Directory receives information on newly hired employees from employers within 20 days of hiring, as required by Federal and State laws. This information is transmitted to the National New Hire Directory for use in other states' child support cases, and is matched with CSED obligor information to locate and implement employer income withholding for New Mexico child support cases. This Directory is responsible for outreach to employers to ensure their compliance with the law.

Finance Unit

The Finance Unit assists Federal Auditors, submits quarterly reports, and assists Child Support case workers in the field with caseload management, and budget and procurement issues. Provides guidance regarding State and Federal laws, regulations, and procedures, and works closely with field staff as well as staff from other divisions within HSD to help ensure best business practices are followed.

The Finance Unit processes and monitors progress of contracts, budget adjustments, travel reimbursements, and purchase orders for office equipment, maintenance, furniture, supplies, and IT needs. The staff monitors and analyzes the division budget and coordinates recommendations for budget expansion requests. They assist with fiscal and program audits and filing of Federal reports as well as reports to the State legislature and Governor. They assist county offices with budget tracking and other financial issues related to program support.

Administrative Support Unit

The Administrative Support Unit is responsible for all administrative support functions for Central and Field office staff, including processing of all HR related documents and functions for CSED.

Business Information Systems Bureau

The Business Information Systems Bureau is responsible for all program performance and reporting as well as IT related business needs and help desk functions.

The Business Information Systems Bureau primarily focuses on IV-D Child Support Enforcement Program Performance for both Federal and State Performance Metrics. This unit provides statistical information regarding all business processes supported by the New Mexico Child Support Enforcement System (CSES). Case activity reports are analyzed and used to provide management with a perspective as to when a shift of focus needs to occur and where it should occur. This unit also informs the Federal agencies of CSED's compliance with Federal mandates; provides audit information; and monitors and ensures that the program is on track towards meeting both Federal Incentive and site performance measures. This unit reviews and works closely with Federal OCSE to implement new program regulation changes or modifications. This unit works with OCSE Auditors to provide and validate Federal reporting information used to determine Data Reliability for New Mexico's share of Federal Incentives. It is this unit's responsibility to ensure accuracy as well as timely submission of the OCSE 34A Quarterly Collections and OCSE 157 Annual Data Reports as well as the Data Reliability Audit Database.

The Business Information Systems Bureau coordinates with other stakeholders to ensure that CSED automated case management system (CSES) corrections and changes are implemented properly. The unit works in conjunction with the HSD Information Technology Division (ITS) CSES resources, as well as CSED users, to identify and facilitate the resolution of system fixes and enhancements. In addition, the unit reviews, prioritizes, monitors, and manages CSES related IT system changes and change requests (CRs) through to system implementation. This Bureau is also responsible for the CSES Help Desk.

The CSES **Help Desk** provides user support services to the field. The Help Desk responds to questions and provides assistance regarding CSES functionality and related web applications, as well as PC Forms. The *Undistributed Collections* component of this section represents significant amounts of child support money that cannot be credited to a case or disbursed to the intended payee for various reasons and adversely reflects on the Division's audit and overall performance. Some of the issues that occur in these cases include collections on a closed case, money that has been sent in without identifying information and is therefore suspended, no address for the recipient, or money received for parties that do

not have a case with New Mexico CSED, etc. Resolution of these problems must be done in accordance with federal PRWORA distribution rules as well as CFR requirements. CSED is committed to serving the families of New Mexico by processing all child support payments as expeditiously as possible. The resolution of payment problems will result in child support funds reaching their intended payees.

The *Arrears Management Program (AMP)* component of this unit administers the Fresh Start/Arrears Management Program. These are cases where the CSED negotiates a lump sum payment in order to close a case or sign a new order. The cases are tracked monthly to see how much was waived by either the custodial parent or the State, if it was settled with a lump sum payment, if the non-custodial parent signed a new order, or if the case was returned to enforcement status. Closure process is also tracked on these cases to see how many cases we have been able to close due to a settlement. Statistical reports are compiled and submitted to the Office of the Secretary.

The *State Verification Exchange System (SVES)* component of this unit interfaces with the Social Security Administration to identify non-custodial parents receiving Social Security Benefits (i.e. GA or SSI). The information is then referred to the respective field office so that it can inform the custodial parent that he/she can apply for benefits for the dependent children through the Social Security Office. This information also helps with arrears only case where the arrears are all assigned because the case can be referred for closure since the non-custodial parent is on a means tested program.

Administrative Enforcement Unit

The Administrative Enforcement Unit is responsible for all administrative enforcement activities allowed under the Title IV-D grant, which include Tax Intercept, Financial Institution Data Match, and License Suspension.

The *Financial Institution Data Match* Section of this unit refers obligors in arrears to financial institutions, via the Federal Office of Child Support and a state consortium. The *Financial Institution Data Match* staff reviews matches obtained from financial institutions, validates information with field staff, requests account freezes, and ensures due process notification. After verification of the correct amount of debt and due process, staff either request release of all monies in the accounts, or conduct an administrative seizure of part or all of the funds to pay child support arrears. The *Financial Institution Data Match* staff also manages the Automated Enforcement Interstate (AEI) project, which facilitates the same

processes between states. The staff is also responsible for the Insurance Match program, where obligors with child support debt are referred via a state consortium to insurance companies for interception of claims payouts in a similar manner to the bank and credit union match/freeze/seize processes. *Financial Institution Data Match* manages the Lottery Intercept program, coordinating between the Lottery Commission and field offices to seize lottery winnings to pay child support debts. Additionally, *Financial Institution Data Match* is responsible for the Gaming Intercept, whereby child support obligors' gaming machine winnings in racetrack casinos (racinos) are subject to interception to pay support arrears. Finally, *Financial Institution Data Match* is responsible for coordinating between field staff and county clerks on the filing of Property Liens on obligors who owe past due support.

The *Tax Intercept* section of this unit administers three intercept programs, the IRS Tax Refund Intercept, New Mexico Taxation and Revenue (TRD) Tax Refund Offset, and the Federal Administrative Offset program. The Tax Intercept staff ensures that CSED referrals to the tax entities are correct and that amounts are current in accordance with federal and state laws and policies. It also coordinates with field staff, with parties whose tax refunds have been or may be intercepted to pay child support, and with the administrative law judges for appeals. In addition, the Intercept staff administers the Passport Denial program, which involves coordination among obligors, field staff, and the U. S. State Department for persons denied passport issuance due to substantial child support debt.

The License Suspension Section administers CSED's duties in regard to the state Parental Responsibility Act. This law requires CSED to refer delinquent child support obligors to every licensing entity in the State, which includes motor vehicle, occupational, and recreational licensing authorities. The unit distributes referral lists to all agencies, coordinates with caseworkers, issues Certificates of Compliance, coordinates with the agencies who conduct administrative due process hearings, and produces an annual report as required by the statute.

PART III – SECTION 2D INCOME SUPPORT DIVISION

D. INCOME SUPPORT DIVISION (ISD) (9000000000)

The Income Support Division (ISD) administers public assistance programs for the State of New Mexico, such as Temporary Assistance for Needy Family (TANF), Supplemental Nutrition Assistance Program (SNAP), Food Distribution, Nutrition Education, General Assistance (GA), Community Services Block Grant (CSBG), Low Income Home Energy Assistance Program (LIHEAP), State-funded Homeless Meals Program, State-funded Homeless Shelter Program, Education Works Program (EWP), State Supplement Residential Care, and the Refugee Resettlement Program (RRP). ISD also determines and re-certifies eligibility for the Medical Assistance (Medicaid) programs. The division has a field staff of approximately 930 FTE and a Central Office staff of approximately 80 employees. ISD is also responsible for the Automated System Program and Eligibility Network (ASPEN) help desk and testing operations. The Information Technology Division ITD provides project management for this system. Direct costs are allowable ISD program costs. The indirect costs of the Division consist of the ISD Director's Office and the allocated administrative units' costs plus any indirect costs from the program support cost pool.

Office of the Director is comprised of the Division Director, and the Deputy Directors of Programs, Program Administration Bureau, and Field Operations Bureau and Field Support Bureau.

Field Support Bureau

The Field Support Bureau consists of the ISD Electronic Benefit Transfer (EBT) Unit, ISD Training Unit and the Central ASPEN Scanning Area (CASA). These units provide information and technical assistance for the ISD field staff.

The EBT Unit was established to assist cardholders and field staff with any problems related to the EBT program. The **EBT Team** manages all aspects of operating the Electronic Benefit Transfer System, including conducting management evaluations related to card stock. The team will also authorize the Over-the-Counter (OTC) EBT cards for participants to pick up at their local field office.

The ISD Training Unit develops, maintains, and schedules a wide range of training opportunities designed to support both division and departmental requirements for workforce development. These trainings increase efficiency and job performance while also ensuring quality customer service. Through the provision of management resources, the ISD Training Unit assists the department in increasing staff competency, continuing effective program administration, and assuring the superior delivery of public benefits. Our vision promotes professional development while imparting the department's mission and goals to all ISD staff.

The Central ASPEN Scanning Area (CASA) is an essential function of business for the Income Support Division (ISD). The eligibility verification process of ISD involves managing large volume of paper or EFAV documents received from individuals and beneficiaries. CASA is responsible for digitizing many of these documents. Documents are mailed or faxed by ISD customers and received by CASA. CASA prepares paper documents for imaging, and indexes both scanned and EFAV documents. Indexing of documents creates tasks for Income Support offices to work from ASPEN or adds documents to ECF (Electronic Case File) where the task has already been completed in the case of remote field locations where field staff does not have EDM (Electronic Document Management) capabilities.

Allocation Basis: *Costs of the ISD Director's office will be allocated based on Recipient Count Methodology.*

Bureaus under the Deputy Director of Program Administration are the Policy and Program Development Bureau, the Work and Family Support Bureau, the Quality Assessment Bureau, and the Federal and State Compliance Unit.

The Deputy Director of Programs is leading a Division wide Pilot Project that is reviewing federal and state regulations and evaluating each area in the Division to ensure federal and state compliance. This includes the Federal and State Compliance Unit (FSCU) that ensures compliance with federal and state regulations and focuses on settling and meeting the requirements set forth in the Debra Hatten-Gonzales lawsuit.

Allocation Basis: The costs for those who work in FSCU are allocated based on Recipient Count Methodology

The Policy and Program Development Bureau

The Policy and Program Development Bureau (PPDB) analyzes, develops, and promulgates State regulations to administer the SNAP Program, TANF Cash Assistance, State Funded General Assistance, Education Works Program, State Funded Adult Residential Support Services, Burial Assistance and Refugee Cash Assistance. The Bureau works directly with the Medical Assistance Division to develop Medicaid rules and processes related to the eligibility work ISD field staff performs. Specifically, staff participates in county office management evaluations to determine program access inclusive of Medicaid. Also, staff participates in the development and implementation of program changes to the automated eligibility system ASPEN, and policy changes from all programs are inclusive of Medicaid.

Development and implementation includes reviewing rules, and development of notices and forms. The Bureau Chief is responsible for the overall management of bureau activities. The Bureau Chief participates in quality assurance of SNAP and Medicaid corrective action activities regarding programs administered by the Bureau, as well as many Medicaid related eligibility processes and procedures. Specifically, the Bureau and Bureau Chief participate in development and implementation of program changes and the implications on eligibility staff. The Bureau Chief also participates with Medicaid Advisory councils, program projection workgroups, and overseeing pilot projects.

Allocation Basis: *Costs will be allocated based on Recipient Count Methodology.*

Work and Family Support Bureau

The Work and Family Support Bureau (WFSB) manages multiple programs: (1) Low Income Home Energy Assistance Program (LIHEAP) and weatherization, (2) Community Services Block Grant Program (CSBG), (3) Refugee Resettlement Social Services (RRSS) and Health Screening (RRHS) Programs, (4) TANF New Mexico Works (NMW), (5) Special State Funded Initiatives such as the Homeless Shelter Program, (6) State funded Zuni and Navajo TANF. The Bureau collects and analyzes data on TANF work participation and reports participation rates to the federal government. The Bureau develops the state plans for each of these programs and is responsible for monitoring the performance of each program as services are delivered by means of external contractors or other state agencies. The Bureau initiates and negotiates contracts with service providers, develops scopes of work, approves contract budgets and tracks expenditures, and through management evaluations, monitors and reports on program performance. Regular fiscal and program outcomes reports are provided to the federal funding source. The Bureau also reviews, analyzes and interprets federal and state regulations, and analyzes state legislation.

Allocation Basis: *Each section of the bureau will be allocated as indicated below with the exception of the management team whose costs will be allocated based on Time and Effort reporting. The costs of this bureau are not charged to Title XIX Medicaid.*

LIHEAP is a federal grant program that helps New Mexico low income families meet the costs of home heating and cooling and increase energy self-sufficiency by providing an assistance benefit to an eligible household once per year. The staff assigned to this program manage the entire program, including tracking and reporting on the budget and the number of families served, initiating and

completing all state plans, negotiating multiple fuel vendor agreements and reporting to the federal government as required. In addition staff monitors and provides training and technical assistance to ISD field offices statewide.

Allocation Basis: *The services of the LIHEAP staff benefit only the LIHEAP program; costs are assigned directly to that program at the 100% standard LIHEAP FFP. Semi-annual certifications are maintained for staff that work solely with the program. The costs of this staff are not charged to Title XIX Medicaid.*

CSBG is a federal block grant program that provides a flexible funding source for local communities through a network of community action agencies for the reduction of poverty. The staff assigned to this program manages the entire program including the tracking and reporting on the budget, initiating and completing all state plans, contracts/agreements and related scopes of work, RFPs and amendments. In addition, staff monitors and provides training and technical assistance to each community action agency.

Allocation Basis: *The services of the CSBG staff benefit only the CSBG Program; costs are assigned directly to that program at the 100% standard CSBG FFP. Semi-annual certifications are maintained for staff that works solely on one program. The costs of this staff are not charged to Title XIX Medicaid.*

The **Refugee Resettlement Program (RRP)** is cash assistance, medical screenings, after school activities for youth and case management for all participants funded through multiple federal Refugee Resettlement grants. Contractors and other state agencies provide a broad range of services including employment preparation and job placement, skills training, English language training, after school care, social adjustment and health screenings. The staff assigned to this program manages the entire program including tracking and reporting on the budget and the number of families served, initiating and completing contracts/agreements, scopes of work, and amendments. In addition, staff monitors and provides training and technical assistance to ISD field offices and New Mexico Works service providers statewide. ISD field offices determine eligibility for medical services and cash assistance.

Allocation Basis: *The services of this staff benefit only the RRP; costs are assigned directly to that program at the 100% standard FFP. Semi-annual certifications are maintained for staff that works solely on one program. The Refugee Coordinator and staff will be reported on the ORR-1 quarterly report on line 4 Administration – Planning and Coordination.*

New Mexico Works (NMW) is the employment and training, and case management program for the federal TANF block grant program. The NMW program uses a case management model to assist cash recipients with work activities and supportive services. The staff assigned to this program manages the entire program including tracking and reporting on the budget and the number of families served, initiating and completing contracts/agreement, scopes of work, RFPs and amendments. In addition, staff monitors and provides training and technical assistance to ISD field offices and NMW providers statewide.

Allocation Basis: *The services of the NMW staff benefit multiple programs; costs for some staff are assigned directly to that program at the 100% standard FFP and cost for designated staff is allocated by Time and Effort reporting. Semi-annual certifications are maintained for staff that works solely with one program. The costs of this staff are not charged to Title XIX Medicaid.*

The Reporting Section supports the ISD Work and Family Support Bureau, by collecting and analyzing data on TANF work participation and reporting work participation rates to the federal government. The Reporting Section also collects data and prepares the Maintenance of Effort report and other federal reports pertaining to TANF caseload and participant activities.

Allocation Basis: *The services of the NMW and TANF staff benefit multiple programs; costs for some staff are assigned directly to that program at the 100% standard FFP and cost for designated staff is allocated by Time and Effort reporting. Semi-annual certifications are maintained for staff that works solely with one program. The costs of this staff are not charged to Title XIX Medicaid.*

The Quality Assessment Bureau

The Quality Assessment Bureau (QAB) audits and reports on the performance of programs as delivered by the field offices including SNAP, Medicaid Payment Error Rate Measurement (PERM) reviews and TANF Cash Assistance. In addition, staff compiles, investigates, audits, and reports on civil rights complaints and alleged violations for all programs. The Bureau monitors field staff performance through QC payment accuracy reviews, the management evaluation, and program access reviews for compliance with federal regulations. The QAB staff monitors Corrective Action Plans by office to ensure compliance within Federal guidelines. Staff from the Quality Improvement Section - also acts as the Division's audit liaison.

Allocation Basis: *Costs are allocated based on Time and Effort results.*

The General Manager oversees the Food and Nutrition Services Bureau, The Program Administration Bureau and the ASPEN Operations Bureau.

Food and Nutrition Services Bureau

The Food and Nutrition Services Bureau (FANS) supports ISD by administering and monitoring a number of programs that assist people with low income. These include USDA commodity food programs for schools, summer feeding, Farm to School, Homeless Meals Program, SNAP Nutrition Education Program (SNAP Ed), Commodity Supplemental Food (CSFP), Program, and The Emergency Food Assistance Program (TEFAP). The Bureau orders and allocates USDA commodities based on the entitlement funding received for the State and the needs of recipient agencies. The FANS warehouse receives stores and delivers those commodities statewide. The bureau is responsible for the CNP Web System used to receive, distribute, and ship commodities. Also, FANS initiates and completes all contracts for these programs, requests for proposal (RFP) and amendments with agencies as required

Allocation Basis: Staff costs for the Food and Nutrition Services Cost Pool are allocated to the State Administrative Expenditures (SAE), The Emergency Food Assistance Program (TEFAP), Commodity Supplemental Food Program (CSFP) SNAP Ed and state general funds. Delivery staff and other costs are charged to general fund which are allocated for school food delivery. Semi-annual certifications are maintained for staff that works solely on one program. The Bureau Chief is cost allocated based on the direct charges of the staff in the bureau.

Program Administration Bureau

The Program Administration Bureau (PAB) manages the financial planning and financial policy affairs of the Division, the Statistical section, and the Employee Administration Section. The bureau is responsible for providing guidance and reports of all of the forecasts, projections, and analysis of administrative expenditures and revenue, either directly or through coordination with other units within HSD. The administrative budget exceeds \$82 million annually and has over 1,000 FTE.

The Employee Administration Section processes personnel action forms including: new hire packets, promotions, retirements, and employee evaluations. This section also reports on the division's staffing pattern, the vacancy report and monitors timesheet approval. The Constituent Services Section addresses complaints and concerns from the public in regards to benefits.

The Fiscal Section monitors budget activity, reviews spending for administrative and contract accounts. The section develops spending plans and provides the Division with fiscal guidance. Staff also provides supplies and purchasing guidance for Central Office and the rest of the Division.

The Statistical Reporting section completes the Monthly Statistical Report, and performs a series of complex projections regarding program related expenditures for all ISD programs. This section also tracks federal reports for timeliness and provides technical assistance to various program related activities throughout the Division.

Allocation Basis: The costs for those who work in PAB are allocated based on Recipient Count Methodology.

ASPEN Operations Bureau

The ASPEN Operations Bureau (AOB) manages and provides oversight to several centralized units which include: the Division's Training Unit, Help-Desk/Testing Unit and the ASPEN Release Planning Manager

The Help Desk assists the Department by providing ASPEN users with technical assistance to internal and external customers. The staff also provides ongoing testing to program changes in the ASPEN System. This section works with all ISD eligibility programs including Medicaid.

ASPEN Release Planning manager acts as the liaison to guide the Division's system changes related to workflow and state or federal changes. The manager coordinates efforts with ISD, Information Technology Division and contractors and advises the Director of status changes to projects related to current and future releases of ASPEN.

Allocation Basis: *Costs for the Help Desk and the ASPEN Release Planning Manager will be allocated based on Recipient Count Methodology.*

Allocation Basis: *The costs for those who work in CSCU are allocated based on Recipient Count Methodology.*

Field Operations

The Deputy Director of Field Operations oversees the Regional Managers, CSU, Customer Service Centers located within each region and the Incapacity Review Unit.

Field operations are divided into five regions; a Regional Operations Manager supervises each region. The county field offices administer more than twenty categories of assistance, including SNAP, TANF/GA cash assistance, LIHEAP and Medicaid. The five regions have approximately 930 field staff. This number is comprised of support staff, family assistance analysts, supervisors, county directors, trainers, and regional managers. In addition to supervising field operations, regional operations managers oversee contractors who provide assessment, training, job placement, and case management to TANF and SNAP participants.

Allocation Basis: *The costs for those who work on generic cases and related indirect costs are allocated based on Recipient Count Methodology. Refugee Resettlement programs will be separated as Refugee Cash and Refugee Medical Assistance to comply with the requirements of the quarterly ORR-1 report. Costs will be allocated based on Recipient Count Methodology.*

LIHEAP Field Staff

Staff accept LIHEAP applications, interview clients, determine eligibility, and respond to LIHEAP related inquiries, during the main LIHEAP season October 1 through August 31st. During the non-heating season, the staff works on LIHEAP case clean up.

Cost Assignment: *The services of the LIHEAP staff benefit only the LIHEAP program; costs are assigned directly to that program at the 100% standard LIHEAP FFP. Semi-annual certifications are maintained for staff that works solely with the program. The costs of this staff are not charged to Title XIX Medicaid.*

Specialized Unit Assigned to Region II

The Case Support Unit (CSU) accepts and processes applications for New Mexicans applying for Medical Insurance through the Federal Facilitated Marketplace (FFM). Staff compares and verifies applications to existing files and either process the application as a Medicaid Application or refers applicants back to FFM depending on eligibility status.

Allocation Basis: *Costs will be allocated 100% to Medicaid Administration.*

Specialized Unit Assigned to Region III

The Incapacity Review Unit (IRU) reviews all medical reports and documents related to an applicant's request for State funded GA, TANF disability, Domestic Violence Waivers and hardship extension, and determines disability and eligibility

for these programs. Staff regularly participate in the fair hearings process and provides support to field staff relating to disability determinations.

The Institutional Care Waiver Unit (IC Waiver Unit) provides support to in all categories for recipients who receive care in institutional facilities.

Allocation Basis: *Costs for IRU and IC Waiver unit will be allocated based on Recipient Count Methodology.*

PART III – SECTION 2E – BEHAVIORAL HEALTH SERVICES DIVISION

E. BEHAVIORAL HEALTH SERVICES DIVISION (BHSD) (7900000000)

BHSD Operations

BHSD is the federally designated mental health authority and substance abuse single state agency and, in coordination with the New Mexico Behavioral Health Purchasing Collaborative (defined in Paragraph 3 below), manages community-based treatment services for persons over 18 with substance use disorder, mental health diagnoses and co-occurring disorders (mental health/substance abuse). BHSD's purpose is to address need, services, planning, monitoring and continuous quality systemically for all people in need of publicly funded behavioral health services, including both prevention and treatment.

Mental Health and Substance Abuse Prevention and Treatment

Mental Health and Substance Abuse Authority: One of BHSD's most prominent roles, is serving as the adult Mental Health and Substance Abuse Authority for the State of New Mexico. Its key functions as authority include:

1. Administer the Federal Substance Abuse, Prevention and Treatment Block Grant (SAPTBG) and the Community Mental Health Services Block Grant (CMHSBG).
2. Facilitate the mapping of the prevalence, incident and impact of mental illness and substance abuse for adults across the state.
3. Facilitate comprehensive service planning for the provision of integrated systems of care based identified need.
4. Establish an integrated and comprehensive substance abuse prevention services delivery system through the promotion of sound policy, effective practice and cooperative partnerships to ensure the availability of quality prevention.
5. Monitor progress in the system's capacity to meet the identified need and identification of significant gaps in services.
6. Identification of behavioral service best practices and the development of fidelity and quality standards.
7. Facilitate statewide behavioral health service access and capacity.
8. State wide disaster response for persons with behavioral health disorders.
9. Integration of comprehensive substance abuse and mental health services from prevention to recovery.
10. Function as the state Opioid Treatment authority for the state.
11. Homelessness service planning and funding through the Projects in Assistance to Transition from Homelessness (Path) Grant.

BHSD's core tasks under Operations are:

Development of Best Practices: BHSD in collaboration with its partners in the Behavioral Health Collaborative identify best practices; create service definitions; develop fidelity models; facilitate implementation of strategies; provide technical assistance; and monitor outcomes. Best practices currently being developed include:

- **PAX Good Behavior Game:** This is a classroom prevention model that teaches students individual and group self-regulation. It is included in SAMHSA's National Registry of Evidence-Based Programs and Practices. It is currently implemented in 4 school districts in New Mexico with anticipation of expanding to more.
- **This is a Supportive Housing:** Supportive Housing, through the Housing First model transforms lives through access to affordable rental housing with support services that are needed by people with behavioral health and severe mental health issues and other disabilities, as well as transitional youth and those reintegrating from jail or prison. It emphasizes direct placement into permanent housing and a service approach that does not necessarily require sobriety or treatment compliance and the use of services or programs is not a condition of occupancy.
- **Total Community Approach:** Total Community Approach (TCA) is a partnership between the New Mexico Behavioral Health Collaborative (Collaborative) and local communities most affected by substance abuse to address problems caused by use of these substances. Total Community Approach teams local municipalities/Local Collaborative and targets resources, from prevention to treatment and law enforcement to the area where they are most needed to deal with substance abuse and behavioral health challenges.
- **Assertive Community Treatment:** Assertive Community Treatment (ACT) services are therapeutic interventions that address the functional problems associated with the most complex and/or pervasive conditions of the identified population. These interventions are strength-based and focused on promoting symptom stability, increasing the individual's ability to cope and relate to others and enhancing the highest level of functioning in the community.
- **Intensive Outpatient Program;** IOP services provide a time-limited, multi-faceted approach to treatment service for eligible recipients who require structure and support to achieve and sustain recovery. The IOP model is based on research and evidence-based interventions that target specific behaviors with individualized behavioral interventions.

- Comprehensive Community Support Services (CCSS); CCSS coordinates and provides services and resources to promote recovery rehabilitation, and resiliency for adults with Serious Mental Illness, Chronic Substance Dependence and Co-Occurring Disorders; and children with or at risk with Serious Emotional/Neurological/Behavioral disorders. CCSS identifies and addresses barriers that impede the development of skills necessary for independent functioning in the community as well as strengths which may aid the consumer or family in the recovery and resiliency process.
- Integrated Treatment for Co-occurring disorders; New Mexico targets system changes to improve access to co-occurring treatment, disseminate evidence-based treatment and Continuous Quality Improvement processes, and build consensus for reforms in various areas, including clinical training and workforce development
- Screening, Brief Intervention and Referral to Treatment (SBIRT): SBIRT services are provided in primary care/physical health locations, in order to screen for those persons in need of services to address substance abuse issues, as well as the mental health issues of depression and trauma. SBIRT is an evidence-based program.

Managing Special Initiatives: Another key function for BHSD is to work with Collaborative partners and the Administrative Services Organization in the rollout of state funded behavioral health initiatives. Current Initiatives not already listed above include:

- Methamphetamine
- Veteran's Services
- Supported Employment
- Transportation
- Jail Diversion
- Compulsive Gambling
- DWI
- Substance Abuse Residential Treatment
- Medication Fund
- School Based Behavioral Health
- Substance Abuse Prevention
- Preadmission Screening and Resident Review
- Forensic Evaluation
- Sexual Assault Support and Services

- **Native American Liaison:** BHSD works closely with tribal behavior health providers across the state. The lead is the dedicated BHSD Native American Liaison. Primary function of the liaison is to promote and enhance funding for adult culturally competent behaviorally health initiatives for Native Americans based on their assessment of needs.

The Office of Peer Recovery and Engagement: The Office of Peer Recovery and Engagement formally known as The Office of Consumer Affairs (OCA) was created to advance consumer and family driven services through training and education that support and empower individuals in the recovery process and to legitimize their voices in statewide behavioral health policy and initiatives. The Office of Peer Recovery and Engagement's vision is to assure that the voice of the New Mexican consumer and family members is heard and included in all major decisions pertaining to mental health and substance abuse issues. The mission is accomplished through progress on the following strategies: training, program development and advocacy, funding and participation/information dissemination.

Contracts: Approximately 94% of the BHSD budget is utilized to contract for behavioral health and adjunct services, BHSD budgets, contracts, monitors and amends contractual relationships to ensure the letter and intent for the use of the funds are carried out.

Quality Improvement: The Policy and Quality Bureau functions to maintain and review performance and outcome data on publicly funded behavioral health services, to ensure continuous quality improvement in the delivery of the public behavioral health system, and to ensure progress on the Collaborative's Strategic Plan. Quality Service Reviews (QSR) and Integrated Quality Service Reviews (QSR) as well as training and technical assistance to providers are core functions of BHSD.

- Track and Trend Analyses of managed care and other behavioral health data and reports.
- Implementation CMHS (NOMS) and SAPT (TEDS)
- Continuous Quality Improvement

BH Health Homes: two have been established in the eastern and northwestern parts of NM and additional sites are in planning

Certified Behavioral Health Clinics (CCBHC): BHSD received a SAMHSA planning grant to establish CCBHCs. These clinics expand services to youth and

adults needing BH services, as well as, physical health services. The CCBHC Planning Grant resulted in the certification of 6 CCBHCs.

Treat First: This model of care is an innovative approach to clinical practice improvement. It has been in pilot mode within six provider organizations. The organizing principle has been to ensure a timely and effective response to a person's needs as a first priority in approach.

Prevention Policy Consortium (PPC): The PPC is a collaboration of state agencies that fund prevention activities throughout the state. The group aims to increase the state's capacity and meet gaps in the current prevention system by leveraging resources and supporting evidence-based practices, quality improvement, cultural competence and training and technical assistance efforts.

Statewide Epidemiological and Outcomes Workgroup (SEOW)

The vision of the NM SEOW is that data and products produced by the SEOW will be utilized to expand data-driven decision making and collaboration that support community level outcomes related to behavioral health. The mission of the SEOW is to provide strategic guidance to the state and communities on using assessment and epidemiological data and to direct broad, public prioritization processes based on: severity, burden, trends, preventability/changeability, capacity/resources, need, readiness, political will and public concern.

Network of Care (NOC): The NOC web portal capacity has been expanded to include the implementation of web portals for Veterans' Services and for Aging and Long Term Services. The portal allows local services to be searched as well as providing information about the Collaborative, consumer and family services, prevention programs and the work of the Behavioral Health Planning Council.

Crisis Triage Centers (CTC): Enabling legislation was passed in 2015 to establish Crisis Triage Centers as part of BH continuum of care. Currently, NM is promulgating licensing standards for these facilities and a Medicaid payment mechanism to financially sustain them.

NM Crisis and Access Line (NMCAL): began operations in February 2013. NMCAL is available 24 hours a day and seven days a week to respond to calls related to behavioral health crises and how to access services. It is staffed by mental health professionals who connect consumers to local providers and state agencies. NMCAL also has a peer-operated Warm Line that connects callers with persons in recovery who are trained as Certified Peer Support Workers.

BHSD Organizational Structure

The BHSD organizational structure is comprised of the Office of the Director and three Bureaus:

The Office of the Director is comprised of a Director, a Deputy Director of Finance, a Deputy Director of Programs and a Deputy Director of Policy and Quality and is responsible for the overall oversight and direction of the Division. This Office is responsible for such things as providing leadership, establishing and implementing policies, ensuring quality services, project planning, responding to customer/constituent needs, managing the operational and services budgets, and ensuring cost-effectiveness. It also works in collaboration with federal partners, including SAMHSA, in providing services and ensuring compliance with federal regulations. In addition this Office collaborates with Tribal Governments to plan and provide for services.

The Division has three Bureaus, as follows:

The Finance and Contracts Bureau is responsible for budgetary and contractual oversight of the BHSD Division as well as monitoring the financial aspects of the Collaborative such as drafting and monitoring the Collaborative contract, working with Collaborative Agencies in the resolution of any issues that need to be addressed and tracking and monitoring and managing the Collaborative contract budget. In addition, this Bureau mediates between the behavioral health network providers and the Administrative Services Organization (ASO) to resolve payment issues and/or issues with claims that are submitted and denied for payment.

The Program Support Bureau ensures that services provided meet clinical requirements associated with the responsibility of being the State Mental and Substance Abuse Authority. In addition, the Bureau is the lead in the coordination for the development of the adult behavioral health system of care by the Behavioral Health Collaborative. It provides leadership as the BHSD clinical lead in the definition and development of operational procedures and integrated systems of care for adult behavioral health services. Furthermore, The Prevention, Treatment and Recovery manages the delivery and oversight of direct program services funded by Federal discretionary grants, it works with the Collaborative and its agencies on supportive housing initiatives, Native American Services, Women's Services, and Substance Abuse Treatment and Prevention services, and Mental Health Services.

The Policy and Quality Bureau's objective is to be sure that the process of making important organizational decisions, including the identification of different

alternatives such as programs or spending priorities, and choosing among them on the basis of the impact they will have. The policies can be understood as political, management, financial, and administrative mechanisms arranged to reach explicit BHSD and Collaborative goals. The Bureau also participates in the strategic planning activities for the Division and Collaborative. In addition, this Bureau is responsible for the data management and quality oversight of the Division. Furthermore, the Bureau provides performance measures and reporting, fund mapping, and work with a consultant on Quality Service Reviews (QSR). QSR is a means to assess the quality of casework practice and evaluates the quality of supports delivered by Providers and assess the individual's satisfaction with services and supports. We believe that this tool is supportive to Core Service Agencies (CSAs) & Local Collaborative (LCs) to improve local practice. QSR reinforces the CSA's role and integrates the use of Comprehensive Community Support Services (CCSS).

New Mexico Behavioral Health Purchasing Collaborative (Collaborative)

The Collaborative is responsible for improving the access, quality, and accountability of the delivery of behavioral health services to New Mexico residents in need of those services. In moving BHSD under the Collaborative CEO, the Division continues its role in providing the necessary infrastructure for the Collaborative, the governing organization of that state's transformation of its behavioral health service system. BHSD remains focused on the development, implementation and evaluation of a service system that underscores its focus on transformation and ensure that individuals with behavioral health issues receive the support and services that they need to manage their illness; to support and enhance the recovery process; and to eliminate barriers to self-sufficiency and resiliency.

Since the Collaborative CEO is also the BHSD Director, when functioning within the role of the Collaborative CEO the position is responsible for planning and coordinating the activities of the Collaborative. This includes directing activities involved with developing new initiatives into operational programs, determining utilization of staff and financial resources in order to achieve the goals of the Collaborative, overseeing contract compliance, and developing the Collaborative policy, goals, strategies, and activities that involve other division staff, agencies, workgroups, councils, citizens, and other stakeholders..

Behavioral Health Planning Council (BHPC)

The New Mexico Behavioral Health Planning Council (BHPC) was statutorily established and is comprised of a minimum 51% consumer and family representation. It's role is to advise the New Mexico Behavioral Health Collaborative on policies, programs, and funding; and to provide input on an ongoing basis in all Collaborative involved and related initiatives.

The BHPC has played key advisory roles on many initiatives in our state, both federally and locally funded, to help ensure consumer voice and choice and meaningfully involved and a central role in decision making. They BHPC is focused on and will continue to be a potent voice for children, adults and families, and providers that serve New Mexico's consumer-centered, recovery and resiliency-focused coordinated quality behavioral health care system.

The BHPC members are appointed by the Governor to provide diverse demographic and statewide representation of stakeholders in the planning process, including consumers and family members, Native Americans, advocates, providers, and state agency representatives. The BHPC has actively participated in numerous consumer and family initiatives to further recovery and resilience. Activities during the last 7 years include:

- Advised HSD and the Collaborative in Legislative Priorities, including developing local systems of care and sustainability of services with available resources;
- Advised HSD in the development of standards regarding services for consumers and their family members;
- Active participation in the review and approval of the CMHS and SAPT block grant applications and reports..

In SFY 2017, the BHPC has an annual budget of \$34,100 from the State General Fund. The BHPC has a representative on the Trauma Informed System of Care Steering Committee. The BHPC Chair reports quarterly to the state Collaborative on how the BHPC is addressing various behavioral health issues affecting New Mexicans.

BHPC Subcommittees

Within the Behavioral Health Planning Council (BHPC) structure there are five Subcommittees that meet monthly. They were established by statute as part of the BHPC to enhance the goals of the Collaborative. Following is a description of the subcommittees.

Adult Subcommittee – The mission of the Adult subcommittee is to make recommendations to the Behavioral Health Planning Council regarding services for adult consumers and their families across the full spectrum of needs.

Medicaid Subcommittee - The mission of the Medicaid Subcommittee to the BH Planning Council is to educate and advise the Council and the Medicaid Advisory Committee on matters relating to behavioral health in New Mexico's Medicaid program.

Substance Abuse Subcommittee - The Substance Abuse Subcommittee of the Behavioral Health Council serves to provide guidance and recommendations regarding substance abuse/dependence, prevention and treatment services for communities, families and individuals.

Note: ASAM -- Adult, Substance Abuse, and Medicaid Subcommittee was created to combine the first three subcommittees into one large subcommittee.

CASC – Children and Adolescents Subcommittee: The mission of the Children's Subcommittee of the Behavioral Health Planning Council serves to: advocate for families, children and adolescents with or at-risk of emotional, neurobiological and behavioral disorders, including substance abuse and co-occurring disorders.

NASC - Native American Subcommittee: The Native American Subcommittee's mission is to assure excellence in behavioral health services to all Native American people in New Mexico. Co-chaired by the Indian Affairs Department, the NASC has established 5 priority areas for improvements in Native American behavioral health: best practices, cultural competency, comprehensive services, workforce development, and quality management systems.

Allocation Basis: *BHSD is comprised of 44 staff that conduct BHSD operations and provides support to the Collaborative and the BHPC. Currently, 6 staff are term positions and charged directly to a federal grant. There are 19 staff that are paid through State General Funds and 17 staff are paid by a combination of State General Funds and Medicaid (thirteen of these seventeen staff were approved in previous PACAP updates). Two (2) staff are paid by a combination of state general funds and federal grant allocation based on actual time reporting (Time and Effort).*

PART IV - COST IMPACT

Cost Impact

The changes to the HSD PACAP effective March 1, 2018 are in the Behavioral Health Services Division (BHSD) Cost Pool cost pool.

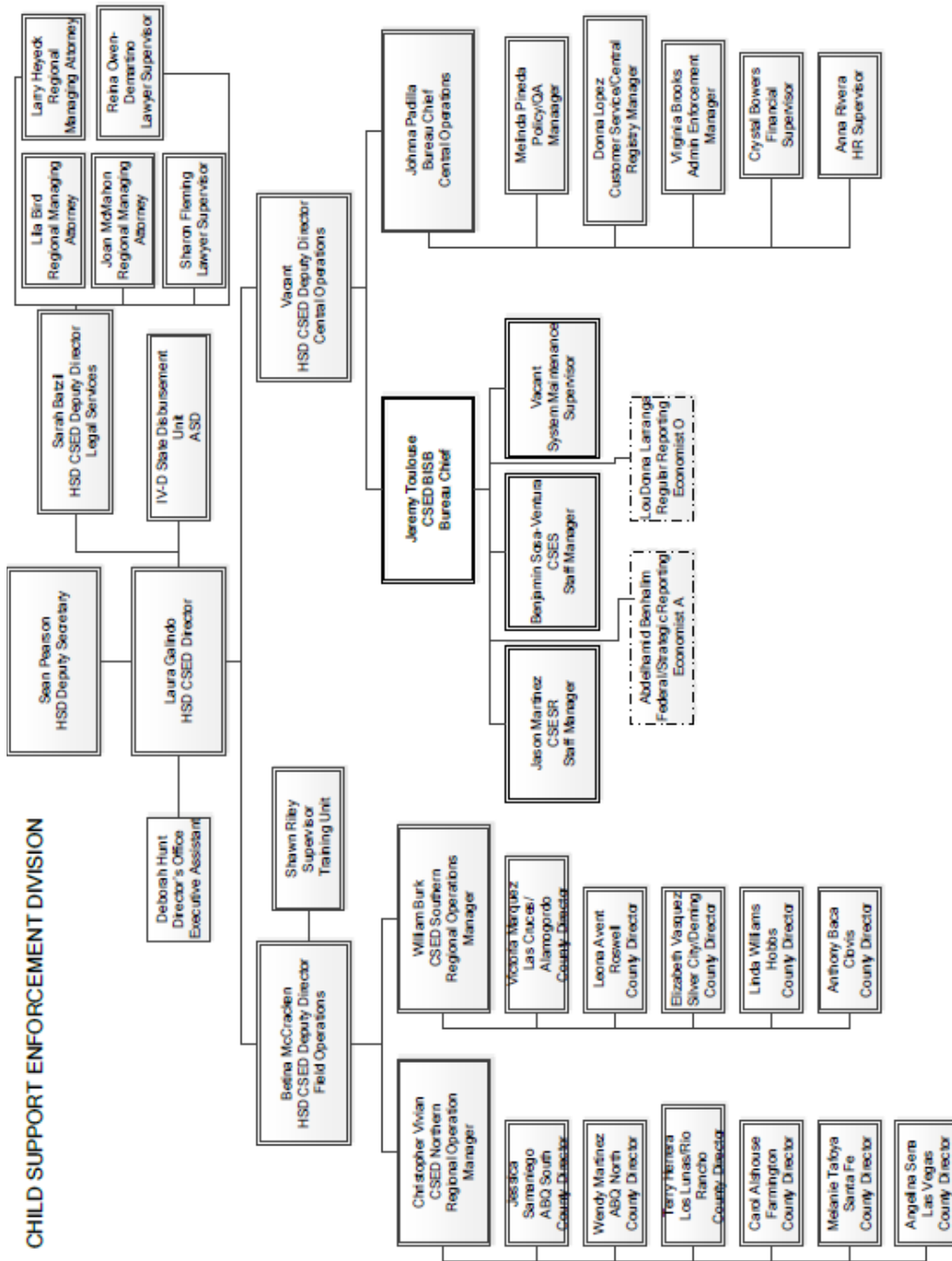
A change was made to allocate the salary and benefits of four staff in the BHSD based on the time verification process. These costs were previously charged to general fund, because these positions work on several activities, including Medicaid, they now account for their time using time verification.

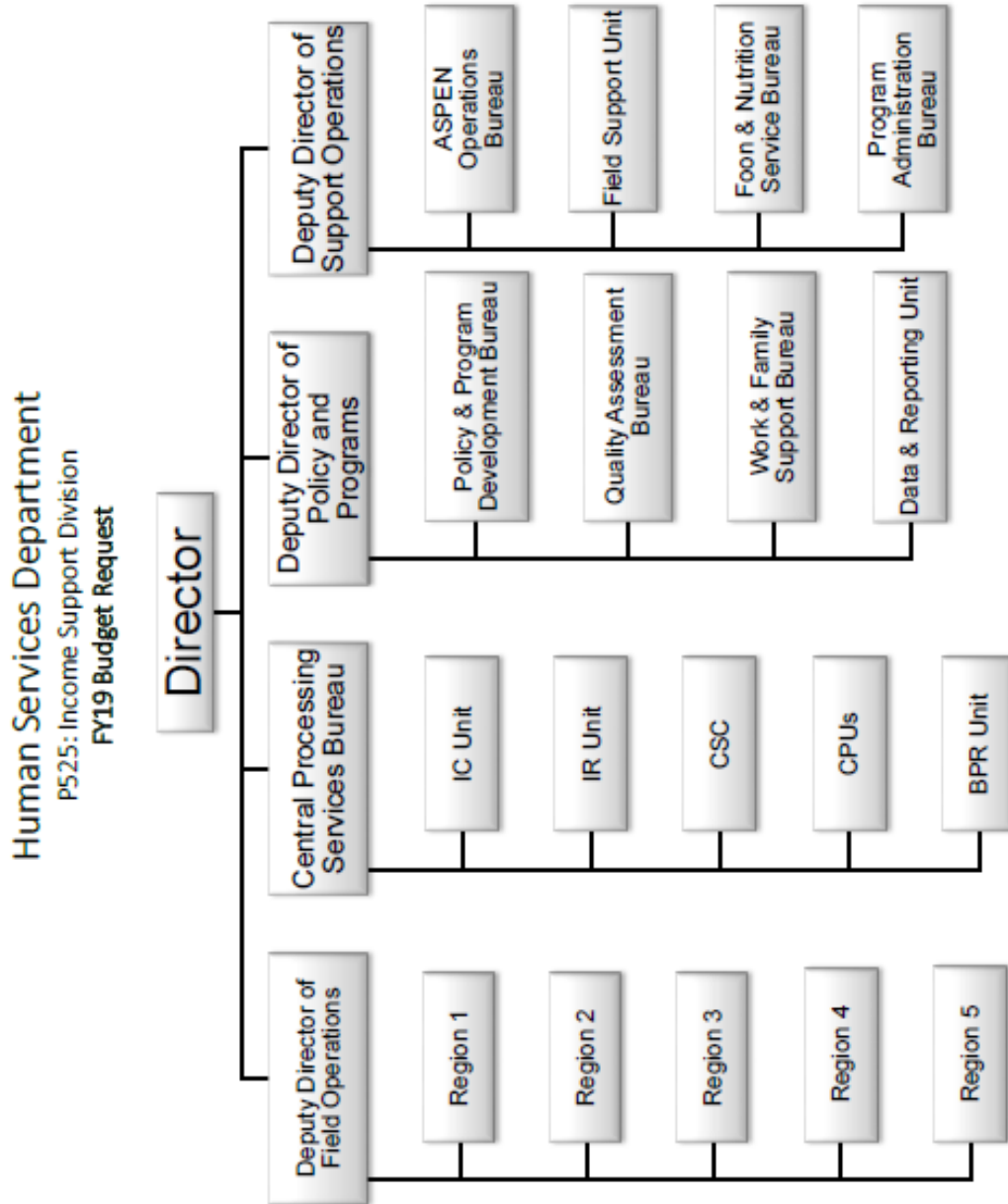
An initial estimate of the percentage of time spent on Medicaid was used to calculate the cost impact of the four staff, the detailed calculation of the Cost Impact can be found in Exhibit 7.

Proposed Additional Annual Cost Impact to BHSD Cost Pool					
Funding Source	Current	Proposed Total Computable	FFP	Proposed Federal Share	Proposed State Share
Medicaid Administration	0	215,100.54	50%	107,550.27	107,550.27
General Fund	417,021.70	201,921.16		-	201,921.16
Total	417,021.70	417,021.70		107,550.27	309,471.43
					Total proposed additional Fed/State cost: 417,021.70
Total Current & Proposed Annual Cost Impact to BHSD Cost Pool					
Funding Source	Current	Current & Proposed Total Computable	FFP	Current & Proposed Federal Share	Current & Proposed State Share
Medicaid Administration	564,480.85	779,581.39	50%	389,790.69	389,790.69
General Fund	939,252.65	724,152.12		-	724,152.12
Total	1,503,733.50	1,503,733.50		389,790.69	1,113,942.81
					Total current & proposed Fed/State cost: 1,503,733.50

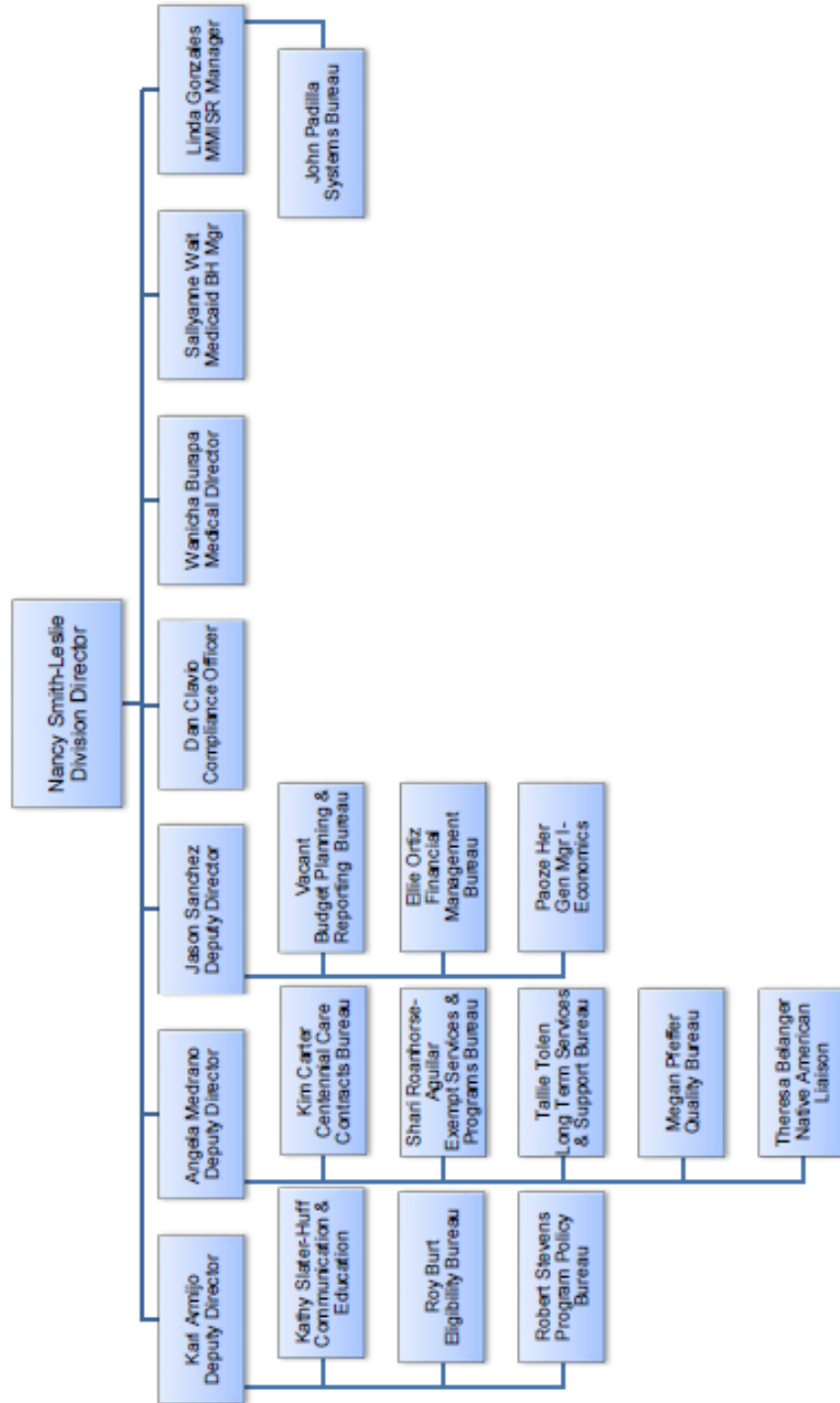
EXHIBIT 1: Organization Charts

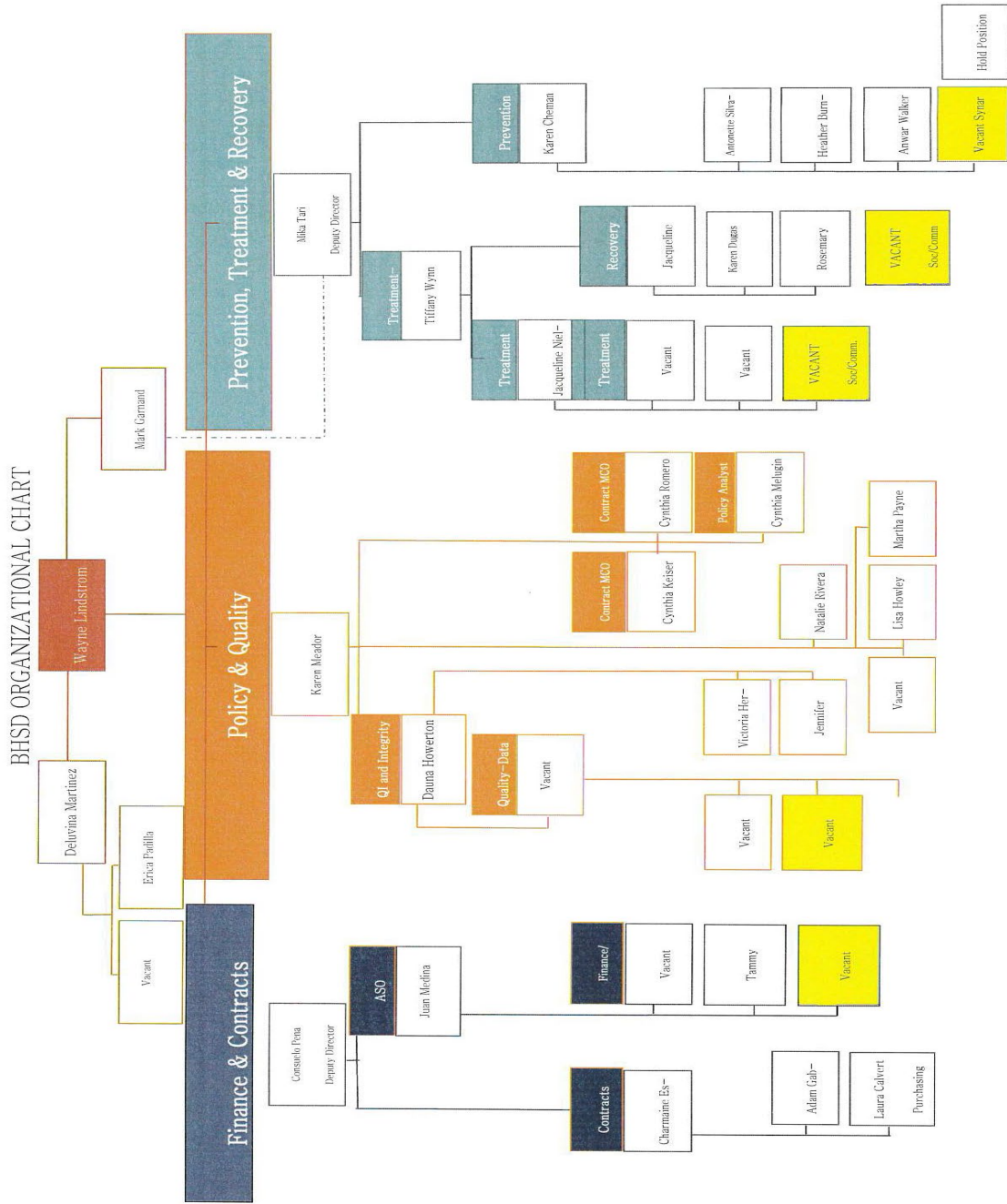
State of New Mexico
 New Mexico Human Services Department
 Public Assistance Cost Allocation Plan





New Mexico Human Services Department
 Medical Assistance Division





Revised January 30

State of New Mexico
 New Mexico Human Services Department
 Public Assistance Cost Allocation Plan

Human Services Department
 P522: Information Technology Division
 FY19 Budget Request

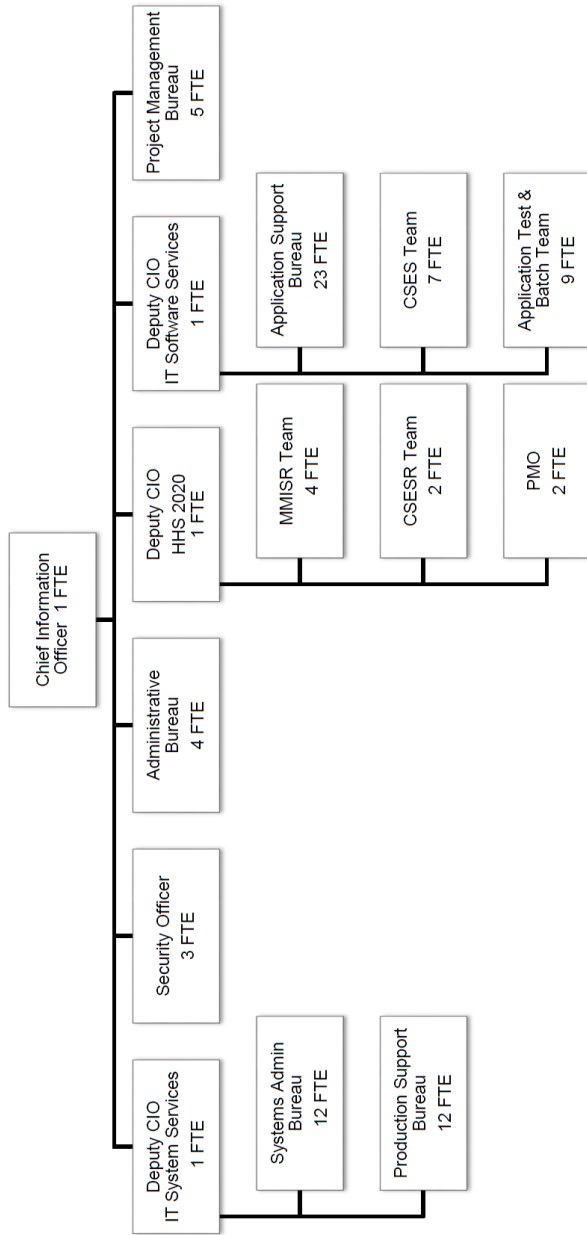


EXHIBIT 2: ACRONYMS USED IN THIS DOCUMENT

ACRONYMS USED IN THIS DOCUMENT

ADP: Automated Data Processing (now known as IT information technology)

AEI: automated enforcement interstate program (in CSED)

APA: New Mexico Administrative Procedures Act

APD: Advance Planning Document

ASB: Application Support Bureau (of DoIT)

ASB: Administrative Support Bureau (of CSED)

ASD: Administrative Services Division

ASPEN: Automated System Program and Eligibility Network

BPRB: Budget Planning & Reporting Bureau (in MAD)

CB: Communications Bureau (in DoIT)

CCCB: Centennial Care Contracts Bureau (in MAD)

CEB: Communications & Education Bureau (in MAD)

CFN: Community Food and Nutrition Program

CFR: Code of Federal Regulations

CHIP: Children's Health Insurance Program (also see SCHIP)

CIO: Chief Information Officer

CMS: Centers for Medicare and Medicaid Services

CSBG: Community Services Block Grant

CSE or CSED: Child Support Enforcement or Child Support Enforcement Division

CSES: Child Support Enforcement System

DD: Developmental Disabilities (as in HCBS wavier)

D & E: Disabled and Elderly (as in HCBS wavier)

DFA: State Department of Finance and Administration

DOH: New Mexico Department of Health

DOIT: HSD Department of Information Technology

EB: Eligibility Bureau (in MAD)

EBT: Electronic Benefits Transfer Section (in ISD)

EFT: Electronic Funds Transfer

EQRO: External Quality Review Organization (in MAD)

ESPB: Exempt Services & Programs Bureau (in MAD)

E & T: Employment and Training (as in Food Stamp Employment and Training Program)

FFP: Federal Financial Participation

FFS: Fee for Service (as in fee-for-service providers)

FFY: Federal Fiscal Year

FIDM: Financial Institution Data Match Section (in CSED)

FIS: Fidelity Informations Systems (ISD EBT Vendor)

FMB: Financial Management Bureau (in MAD)

FPL: Federal Poverty Level

FSET: Food Stamp Employment and Training

FTE: Full Time Equivalent

GA: General Assistance

GSD: State General Services Division

HCBS: Home and Community Based Services

HRSA: Human Research and Services Administration (part of US Department of Health and Human Services)

HSD: New Mexico Human Services Department

ISD: Income Support Division

IT: Information Technology (also see ADP)

LIHEAP: Low Income Home Energy Assistance Program

LTSSB: Long Term Services & Supports Bureau (in MAD)

MAD: Medical Assistance Division

MCO: Managed Care Organizations (in MAD)

MMIS: Medicaid Management Information System (also known as Omnicaid)

OCSE: Federal Office of Child Support Enforcement

OIG: Office of the Inspector General

PAB: Program Administration Bureau

PAR: Personnel Activity Report

PERM: Payment Error Rate Measurement

PPB: Program Policy Bureau

QB: Quality Bureau (in MAD)

QMB: Qualified Medicare Beneficiary

PRWORA: Personal Responsibility Work Opportunity Reconciliation Act

QCB: Quality Control Bureau (in DoIT)

SB: Systems Bureau (in MAD)

SBS: (Medicaid) school-Based Services

SCHIP: State Children's Health Insurance Program (also see CHIP)

SDX: State Data Exchange

SHO: School Health Office (in MAD)

SLIMB: Simplified Low Income Medicare Beneficiary

SOB: Systems Operation Bureau (of DoIT)

SPLU: State Parent Locator Unit (in CSED)

SSA: Federal Social Security Administration

SWCAP: Statewide Cost Allocation Plan (State's Central Service Cost Allocation Plan)

TANF: Temporary Aid to Needy Families

T & E: Time and Effort Report

TEFAP: The Emergency Food Assistance Program

USDA-FNS: United States Department of Agriculture, Food and Nutrition Services

EXHIBIT 7: Cost Impact Calculation

State of New Mexico
New Mexico Human Services Department
Public Assistance Cost Allocation Plan

Cost Impact Calculation

Current Cost Impact to BHSD Cost Pool on Annual Basis					
Position	Hourly	Benefits	Salary & Benefits	% on Medicaid	Cost to Medicaid
Policy Analyst	26.81	9.65	36.46	60%	21.73
Deputy Director Program	40.57	14.61	55.18	48%	26.51
Data Analyst	26.92	9.69	36.61	53%	19.41
Deputy Director Quality	44.57	16.05	60.62	45%	27.28
Improvement & Integrity Mgr	33.51	12.06	45.57	22%	9.94
Quality and Data Manager	33.07	11.91	44.98	60%	26.90
MCO Contract Manager	29.13	10.49	39.62	93%	36.76
MCO Contract Manager	23.64	8.51	32.15	66%	21.22
State Opioid Treatment Auth	25.60	9.22	34.82	20%	6.96
Clinical Program Manager	23.31	8.39	31.70	89%	28.21
Quality Business Ops Analyst	23.41	8.43	31.84	17%	5.41
Data Analyst	26.81	9.65	36.46	53%	19.32
Policy Analyst	26.81	9.65	36.46	60%	21.73
			522.46		271.39
Current					
	State	Federal			
Total Hourly	251.07	271.39			
Total Annual	522,230.96	564,480.85			
Additional Cost Impact to BHSD Cost Pool on Annual Basis					
Position	Hourly	Benefits	Salary & Benefits	% on Medicaid	Cost to Medicaid
Division Director	47.12	16.96	64.08	62%	39.73
Clinical Manager	35.00	12.60	47.60	12%	5.71
Deputy Director of Finance	41.87	15.07	56.94	52%	29.61
Clinical Program Mgr.	23.43	8.43	31.86	89%	28.36
			200.49		103.41
Proposed					
	State	Federal		State	Federal
Total Hourly	200.49	0		97.08	103.41
Total Annual	417,021.70	0		201,921.16	215,100.54

State of New Mexico
 New Mexico Human Services Department
 Public Assistance Cost Allocation Plan

Proposed Additional Annual Cost Impact to BHS D Cost Pool					
Funding Source	Current	Proposed Total Computable	FFP	Proposed Federal Share	Proposed State Share
Medicaid Administration	0	215,100.54	50%	107,550.27	107,550.27
General Fund	417,021.70	201,921.16		-	201,921.16
Total	417,021.70	417,021.70		107,550.27	309,471.43
		Total proposed additional Fed/State cost:			417,021.70
Total Current & Proposed Annual Cost Impact to BHS D Cost Pool					
Funding Source	Current	Current & Proposed Total Computable	FFP	Current & Proposed Federal Share	Current & Proposed State Share
Medicaid Administration	564,480.85	779,581.39	50%	389,790.69	389,790.69
General Fund	939,252.65	724,152.12		-	724,152.12
Total	1,503,733.50	1,503,733.50		389,790.69	1,113,942.81
		Total current & proposed Fed/State cost:			1,503,733.50

ATTACHMENT C.

U.S. DEPARTMENT OF AGRICULTURE
FOOD AND NUTRITION SERVICE

PROGRAM AND BUDGET SUMMARY STATEMENT

PART A - BUDGET PROJECTION

1. STATE AND STATE CODE _____
 2. LETTER OF CREDIT NO. _____
 3. UNIVERSAL IDENTIFIER NUMBER _____
 4. FEDERAL FISCAL YEAR
 FY 2024 , Revision 0 , OP
 4A. FROM MONTH YEAR 4B. TO MONTH YEAR
 October 2023 September 2024

FUNCTION		FEDERAL FISCAL QUARTER ENDING				PROJECTION TOTALS
		DECEMBER	MARCH	JUNE	SEPTEMBER	
01 CERTIFICATION	Requested	15,967	15,968	15,968	15,968	63,871
	Approved					
	Pending					
	Difference					
02 COUPON ISSUANCE	Requested					
	Approved					
	Pending					
	Difference					
03 QUALITY CONTROL	Requested					
	Approved					
	Pending					
	Difference					
04 MANAGEMENT EVALUATION	Requested					
	Approved					
	Pending					
	Difference					
05 50% FUNDING FRAUD CONTROL	Requested					
	Approved					
	Pending					
	Difference					
06 75% FUNDING FRAUD CONTROL	Requested					
	Approved					
	Pending					
	Difference					
07 ADP OPERATIONS	Requested					0
	Approved					
	Pending					
	Difference					
08 FAIR HEARINGS	Requested					
	Approved					
	Pending					
	Difference					
09 OTHER ACTIVITIES (20+30)	Requested	0	0	0	0	0
	Approved					
	Pending					
	Difference					
10 TOTAL (1-9)	Requested	15,967	15,968	15,968	15,968	63,871.00
	Approved					
	Pending					
	Difference					

5. REMARKS
 Nutrition Ed is on separate 425 report and therefore not included in budget. 10/1/2019 FNS is still reviewing the Certification and Fair Hearings categories so these two categories are approved at this time for the FY 2019 approved amounts.

6. SIGNATURE OF AUTHORIZED OFFICIAL *Carolee A. Graham* 7. NAME AND TITLE Carolee Graham, Deputy Director/CFO 8. DATE 9/14/23
 STAMP/CERTIFY DATE LAST UPDATED BY Alex Salcedo LAST UPDATED ON 08/08/2023

SBU

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 0584-0083. The time required to complete this information collection is estimated to average 13 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 any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to Department of Agriculture, Clearance Officer, Stop 7602, 1400 Independence Avenue S.W., Washington D.C. 20250-7602.

**U.S. DEPARTMENT OF AGRICULTURE
FOOD AND NUTRITION SERVICE**

PROGRAM AND BUDGET SUMMARY STATEMENT

PART A - BUDGET PROJECTION

1. STATE AND STATE CODE			
2. LETTER OF CREDIT NO.			
3. UNIVERSAL IDENTIFIER NUMBER			
4. FEDERAL FISCAL YEAR FY 2024 , Revision 0 , OP			
4A. FROM		4B. TO	
MONTH	YEAR	MONTH	YEAR

	FUNCTION	FEDERAL FISCAL QUARTER ENDING				PROJECTION TOTALS
		DECEMBER	MARCH	JUNE	SEPTEMBER	
11	E & T 100% GRANT	Requested				
		Approved				
		Pending				
		Difference				
12	E & T 50% MATCHING	Requested				
		Approved				
		Pending				
		Difference				
13	E & T DEPENDENT CARE	Requested				
		Approved				
		Pending				
		Difference				
14	E & T TRANSPORTATION AND OTHER	Requested				
		Approved				
		Pending				
		Difference				
15	OPTIONAL WORKFARE	Requested				
		Approved				
		Pending				
		Difference				
16	OUTREACH	Requested				0
		Approved				
		Pending				
		Difference				
17	NUTRITION EDUCATION	Requested				
		Approved				
		Pending				
		Difference				
18	REINVESTMENT	Requested				
		Approved				
		Pending				
		Difference				
19	SAVE	Requested				
		Approved				
		Pending				
		Difference				
20	PAGE 2 SUBTOTAL	Requested	0	0	0	0
		Approved				
		Pending				
		Difference				

5. REMARKS
 Nutrition Ed is on separate 425 report and therefore not included in budget. 10/1/2019 FNS is still reviewing the Certification and Fair Hearings categories so these two categories are approved at this time for the FY 2019 approved amounts.

6. SIGNATURE OF AUTHORIZED OFFICIAL	7. NAME AND TITLE Carolee Graham, Deputy Director/CFO	8. DATE
-------------------------------------	---	---------

STAMP/CERTIFY DATE	LAST UPDATED BY Alex Salcedo	LAST UPDATED ON 08/08/2023
--------------------	------------------------------	----------------------------

**U.S. DEPARTMENT OF AGRICULTURE
FOOD AND NUTRITION SERVICE**

PROGRAM AND BUDGET SUMMARY STATEMENT

PART A - BUDGET PROJECTION

1. STATE AND STATE CODE			
2. LETTER OF CREDIT NO.			
3. UNIVERSAL IDENTIFIER NUMBER			
4. FEDERAL FISCAL YEAR FY 2024 , Revision 0 , OP			
4A. FROM		4B. TO	
MONTH	YEAR	MONTH	YEAR

	FUNCTION	FEDERAL FISCAL QUARTER ENDING				PROJECTION TOTALS
		DECEMBER	MARCH	JUNE	SEPTEMBER	
21	50% FUNDING ADP DEVELOPMENT	Requested				0
		Approved				
		Pending				
		Difference				
22	63% FUNDING ADP DEVELOPMENT	Requested				
		Approved				
		Pending				
		Difference				
23	75% FUNDING ADP DEVELOPMENT	Requested				
		Approved				
		Pending				
		Difference				
24	EBT ISSUANCE	Requested				0
		Approved				
		Pending				
		Difference				
25	ISSUANCE INDIRECT	Requested				
		Approved				
		Pending				
		Difference				
26	EBT STARTUP	Requested				
		Approved				
		Pending				
		Difference				
27	UNSPECIFIED PORTION OF OTHER	Requested				
		Approved				
		Pending				
		Difference				
28	E&T ABAWD GRANT	Requested				
		Approved				
		Pending				
		Difference				
29		Requested				
		Approved				
		Pending				
		Difference				
30	PAGE 3 SUBTOTAL	Requested	0	0	0	0
		Approved				
		Pending				
		Difference				

5. REMARKS
Nutrition Ed is on separate 425 report and therefore not included in budget. 10/1/2019 FNS is still reviewing the Certification and Fair Hearings categories so these two categories are approved at this time for the FY 2019 approved amounts.

6. SIGNATURE OF AUTHORIZED OFFICIAL	7. NAME AND TITLE Carolee Graham, Deputy Director/CFO	8. DATE
-------------------------------------	---	---------

STAMP/CERTIFY DATE	LAST UPDATED BY Alex Salcedo	LAST UPDATED ON 08/08/2023
--------------------	------------------------------	----------------------------

ATTACHMENT D.

BUDGET NARRATIVE

After completing all Budget Narrative worksheets for each project, we strongly recommend that the Program Manager and Grants Section review the totals from each worksheet to ensure that the amounts match what is listed in the Budget Summary costs columns. Where there are discrepancies, please meet w/ the Contract and Grants Bureau Chief so they can correct the errors prior to submitting the plan. Please be sure to thoroughly review the Budget Narrative(s) for accuracy prior to submitting the plan.

1. PROJECT TITLE: FFY2023 Child Care PEBT Plan					
BUDGET SUMMARY PAGE					
BUDGET CATEGORIES	INDIRECT COSTS	FFY2023 CARRYOVER FUNDS SUBTOTALS	FFY2024 FUNDS SUBTOTALS	TOTALS	
2. Personnel Salaries, Wages, & Fringe Benefits	\$ -	\$ -	\$ 3,991.37	\$ 3,991.37	
3. Travel	\$ -	\$ -	\$ -	\$ -	
4. Equipment	\$ -	\$ -	\$ -	\$ -	
5. Supplies	\$ -	\$ -	\$ -	\$ -	
6. Contractual (Salaries, Wages, & Fringe Benefits)	\$ -	\$ -	\$ 59,878.86	\$ 59,878.86	
7. Other	\$ -	\$ -	\$ -	\$ -	
Indirect Cost Rate:	Subtotals	\$ -	\$ 63,870.23	\$ -	
0%			Grand Total:	\$ 63,870.23	

SNAP Outreach 366a Category Budget Totals

Summary 366a	Q1	Q2	Q3	Q4	Totals
01 Certification	\$15,967.60	\$15,967.60	\$15,967.60	\$15,967.60	\$63,870.38
Total					\$63,870.38

- After completing all 7 "Budget Narrative" worksheets, we strongly recommend that the applicant review the totals from each worksheet to ensure that the amounts match what is listed in the Budget Summary direct costs columns.
- Where there are discrepancies, the applicant must correct the errors prior to submitting the application. Please be sure to thoroughly review the "Budget Narrative(s)" for accuracy prior to submitting the application.
- The total amount of funds outlined in all combined Project and Budget Narratives should not exceed the amount of funds available for FFY2022. Amounts of funding equipment, personnel, etc. should be consistent between the Project and Budget Narratives. Do not include State and/or Local funds in the worksheets.

Other - Indirect Cost Rate: Identify the indirect cost rate (if the applicant will charge indirect costs to the grant). The applicant must include its indirect cost rate in the box at the bottom left hand side of the worksheet. However, the indirect cost rate will not cause amounts to auto-populate in the Indirect Costs column. Instead, applicants must manually calculate and enter the amounts for the indirect costs. This is because each applicant will have an individual indirect cost rate.

NOTE: All budget costs must be allowable - i.e., they must be necessary and reasonable, allocable to the program, and adequately documented (2 CFR 200.403). They should also be clearly aligned with the "Project Narrative."