



HEALTH CARE
AUTHORITY

Michelle Lujan Grisham, Governor
Kari Armijo, Secretary
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Interested Parties:

The Medical Assistance Division (MAD) of the New Mexico Health Care Authority (HCA) is required by the Centers for Medicare and Medicaid Services (CMS) to post the payment rate for the Turquoise Care 1115 Waiver Medical Respite service in accordance with New Mexico's State Plan Amendment public comment process. This is required per Turquoise Care 1115 Waiver Special Terms and Conditions (STCs) section 10.4 on Health-Related Social Needs (HRSN) services. CMS must approve the rate methodology for Medical Respite before services can be billed to Medicaid.

OPPORTUNITY TO VIEW DOCUMENTS AND MAKE COMMENTS

Interested parties are invited to make comments on this proposed payment rate. The complete draft is below and may also be found on the New Mexico Health Care Authority website at:

<https://www.hca.nm.gov/comment-period-open-2025/>.

Medical Respite is acute and post-acute care for people who are homeless and too ill to recover from sickness or injury on the street or in a shelter, but not sick enough to warrant a hospital level of care.

Estimated Total Financial Impact — \$3.6 million for the State share has been proposed in the Governor's budget for State Fiscal Year (SFY) 2026. HCA will continue to request funding for this initiative from the legislature on an annual basis.

The table below outlines the proposed Medical Respite rate. Future sites will be organized into rate tiers depending on the National Institute for Medical Respite Care (NIMRC) model of medical respite care, and rates will be revised according to service tier.

HCA submitted this medical respite rate methodology to CMS on December 2, 2024, for a proposed effective date of February 1, 2025. The final effective date will depend on CMS timely review and approval.

Service Rate

Service Description	Short-term post-hospitalization housing with room and board for up to six months per rolling year, where integrated, clinically-oriented recuperative or rehabilitative services and supports are provided.
Rate	\$331
Unit of Service	Per Diem
HCPCS Billing Code	T1002, T2033
Delivery System and Payment	Fee-for-Service and Managed Care non-risk fee schedule payment

A written copy of this document may be requested by contacting HCA/MAD in Santa Fe at (505) 827-1337.

Recorded comments may be left by calling (505) 827-1337. Electronic comments may be submitted to HCA-madrules@hca.nm.gov. All comments must be received no later than **5:00 pm Mountain time (MT) on February 26, 2025**.

Interested persons may also submit written comments to:

Health Care Authority
Office of the Secretary
Attn: Medical Assistance Division Public Comments
P.O. Box 2348
Santa Fe, NM 87504-2348

Copies of all comments will be made available by HCA/MAD upon request by providing copies directly to a requestor or by making them available on the HCA/MAD website or at a location within the county of the requestor.