

State Plan Under Title XIX of the Social Security Act
State of New Mexico

Attorney General's Certification

Attachment 1.1-A

I certify that: THE NEW MEXICO HUMAN SERVICES DEPARTMENT is the single State agency responsible for:



administering the plan.

The legal authority under which the agency administers the plan on a Statewide basis is: section 9-8-4 (Human Services Department - established) and section 9-8-12 (Cooperation with the federal government; authority of secretary; single state agency status) of New Mexico Statutes .



supervising the administration of the plan by local political subdivisions.

The legal authority under which the agency supervises the administration of the plan on a Statewide basis is contained in:

(statutory citation)

The agency's legal authority to make rules and regulations that are binding on the political subdivisions administering the plan:

(statutory citation)

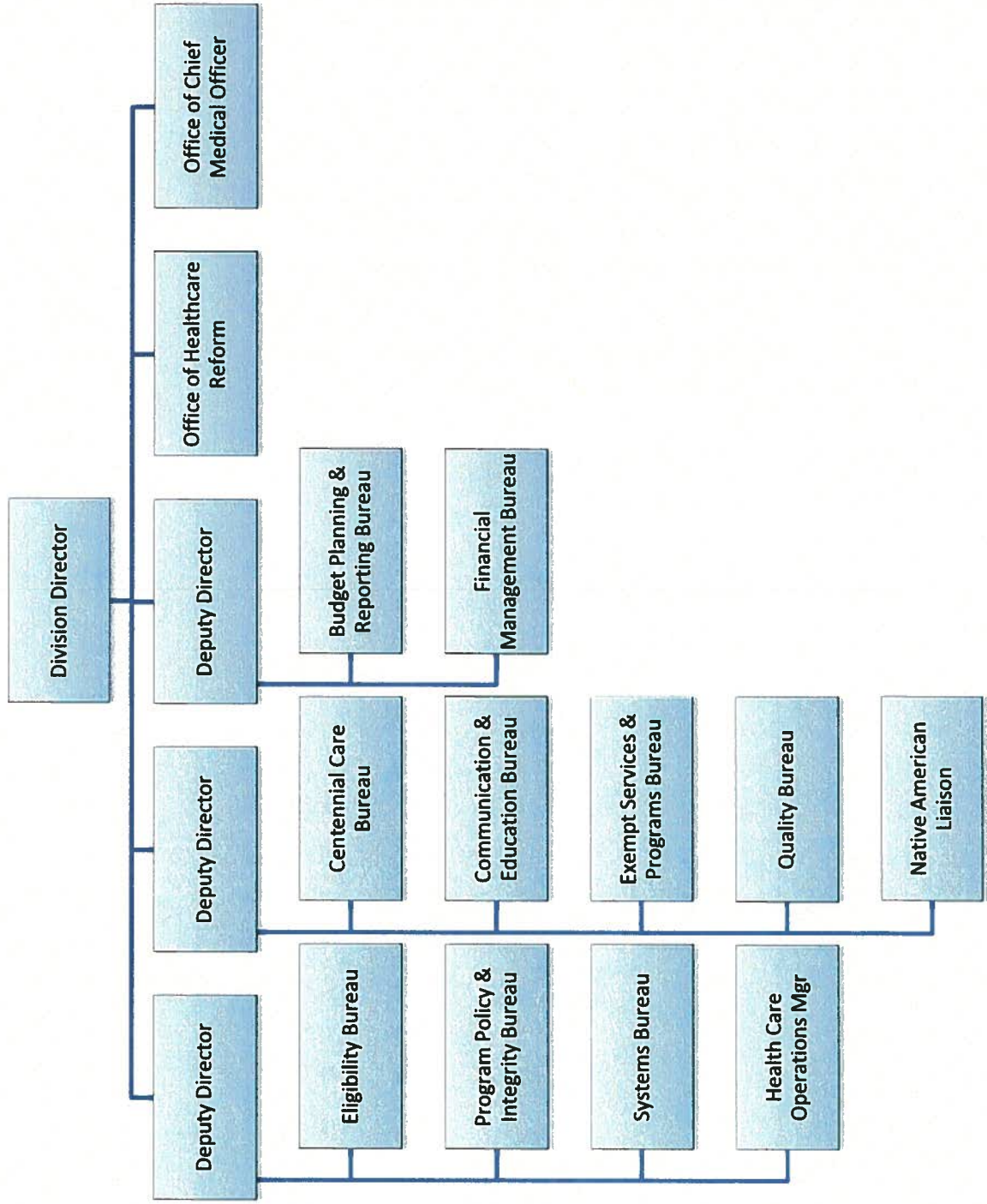
5/1/14

Date

Gary King
Attorney General

Signature

New Mexico Human Services Department Medical Assistance Division



**New Mexico State Plan Amendment (SPA) S21 – Hospital Presumptive Eligibility
CMS Comments for SPA Submission**

The Centers for Medicare & Medicaid Services (CMS) is reviewing State Plan Amendment (SPA) S21 submitted by the New Mexico Human Services Department. This SPA proposes to enact changes related to hospital presumptive eligibility (HPE).

Thank you for the opportunity to review this SPA. In this document, CMS provides comments for this SPA for the state's consideration and to facilitate future discussion. Please note that we may have further questions, pending the state's responses. We are available to discuss these at the state's request.

General Questions

1. To broaden our understanding of the State's approach, please provide a brief description of the hospitals the State anticipates will be performing presumptive eligibility. Please briefly describe the type of hospital and the locations.
2. Please comment on the status of the State's tribal notification regarding this SPA.

SPA

3. Please briefly describe how the state elected the performance standards of 90% for both options listed in the SPA.

Attachment: PE and PE+ Training Manual

4. Are there any other training materials for hospital PE, such as slides from a webinar and/or Powerpoint? The training manual references these on page 12. Please provide copies, if applicable.
5. Please confirm that PE+ providers will be the providers doing presumptive eligibility determinations in the hospital setting.
6. On page 53, please note that questions regarding private health insurance coverage cannot be required as part of an HPE application or determination.
7. Please describe the intent of requiring an individual who qualifies for HPE to enroll in an MCO at the point of determination. What happens if an individual is not willing or able to enroll in an MCO at that time?
8. On page 70, which outlines the paper PE screening form, please note that questions regarding private health insurance coverage cannot be required as part of an HPE application or determination.
9. Does the presumptive eligibility screening results page (referenced on page 64) provide proof of temporary coverage for individuals to take with them?