NMAC Transmittal Form



COMMISSION OF PUBLIC RECORDS Your Access to Public Information **Publication date:** Number of pages: (ALD Use Only) Volume: |XXXIII Issue: 306.5 12/13/2022 Sequence No. Issuing agency name and address: Agency DFA code: 630 HSD - Medical Assistance Division Contact person's name: Phone number: E-mail address: Tabitha Mondragon 505-795-3572 tabitha.mondragon@state.nm.us Type of rule action: (ALD Use) Recent filing date: New Amendment Repeal **Emergency** Renumber 12/2/2013 Title number: Title name: 8 Social Services Chapter number: Chapter name: Medical Assistance Program Eligibility - Refugee Medical Assistance (RMA) Program 249 Part number: Part name: 400 Recipient Requirements Amendment description (If filing an amendment): Amendment's NMAC citation (If filing an amendment): Amending 3 Sections. Sections 6, 7, and 9 of .8.249.400 NMAC Please list attachments or Internet sites if applicable. Are there any materials incorporated by reference? No Yes If materials are attached, has copyright permission been received? Yes No **Public domain** Specific statutory or other authority authorizing rulemaking: Office of Refugee Resettlement (ORR)-DCL 22-12 Expansion of RMA Eligibility Period Notice date(s): Hearing date(s): Rule adoption date: Rule effective date: 7/26/2022 1/1/2023 8/26/2022 10/19/2022

Concise Explanatory Statement For Rulemaking Adoption:

Findings required for rulemaking adoption:

Findings MUST include:



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- Reasons for adopting rule, including any findings otherwise required by law of the agency, and a summary of any independent analysis done by the agency;
- Reasons for any change between the published proposed rule and the final rule; and
- Reasons for not accepting substantive arguments made through public comment.

This rule is being adopted to implement the recent federal requirement that the Refucategory be expanded to cover individuals from eight months to twelve months. The written or oral comments received so this rule is being adopted as proposed.	
Issuing authority (If delegated, authority letter must be on file with ALD): Name: Check if authority letter must be on file with ALD):	ity has been delegated
David R. Scrase	
Title:	
Secretary	
Signature: (BLACK ink only OR Digital Signature)	Date signed:
Docusigned by: David, R. Sivasi, M.D.	10/20/2022

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This is an amendment to 8.249.400 NMAC, Sections 6, 7 and 9, effective 1/1/2023.

8.249.400.6 OBJECTIVE: The objective of this rule is to provide specific instructions when determining eligibility for the medicaid program and other health care programs. Generally, applicable eligibility rules are detailed in the medical assistance division (MAD) eligibility policy manual 8.200 NMAC, *Medicaid Eligibility - General Recipients Policies*. Processes for establishing and maintaining medicaid eligibility are detailed in the income support division (ISD) general provisions policy manual 8.100 NMAC, *General Provisions for Public Assistance Programs*. Refugee medical assistance (RMA): The RMA offers health coverage for a refugee within the first [eight] twelve months from [his or her] their date of entry to the United States (U.S.) when [he or she does] they do not qualify for other medicaid eligibility categories. An RMA eligible refugee has access to a benefit package that parallels the full medicaid services. This program is not funded by medicaid; funds are provided through a grant under Title IV of the Immigration and Nationality Act. The purpose of this grant is to provide for the effective resettlement of a refugee and to assist him or her to achieve economic self-sufficiency as quickly as possible.

[8.249.400.6 NMAC - Rp, 8.249.400.6 NMAC, 1/1/2014; A, 1/1/2023]

8.249.400.7 DEFINITIONS: "Refugee" is an immigrant, who because of persecution or fear of persecution on account of race, religion or political opinion, fled from [his or her] their home country and cannot return because of fear of persecution because of race, religion or political opinion.

[8.249.400.7 NMAC - N, 1/1/2014; A, 1/1/2023]

8.249.400.9 REFUGEE MEDICAL ASSISTANCE ONLY - CATEGORY 049 AND 059:

A. A medicaid eligible refugee recipient must meet the following non-financial eligibility requirements:

- (1) is ineligible for full medicaid coverage;
- (2) is not a full-time student in an institution of higher education, except where enrollment is part of an individual employability plan for a refugee enrolled in the refugee cash assistance program;
 - is in the U.S. fewer than [eight] twelve months and meets one of the following statuses:
 - (a) is admitted as a refugee under Section 207 of the Immigration and Nationality

Act;

- (b) is paroled into the U.S. as a refugee or asylee under Section 212 (d)(5) of the Immigration and Nationality Act;
 - (c) is granted asylum under Section 208 of the Immigration and Nationality Act;
- (d) is admitted as an Amerasian immigrant from Vietnam through the orderly departure program, under Section 584 of the Foreign Operations Appropriations Act, incorporated in the fiscal year 1988 Continuing Resolution P.L. 100-212;
- (e) is a Cuban-Haitian entrant who was admitted as a public interest parolee under Section 212 (d)(5) of the Immigration and Nationality Act;
- (f) is certified as a victim of human trafficking by the federal office of refugee resettlement (ORR);
- (g) is an eligible family member of a victim of human trafficking certified by ORR who has a T-2, T-3, T-4, or T-5 Visa;
- (h) is admitted as a special immigrant from Iraq or Afghanistan under Section 101 (a)(27) of the Immigration and Nationality Act; or
- (i) is a lawful permanent resident (LPR) when the individual had previously met a status as listed in Subparagraphs (a) through (h) above;
- (4) an individual who meets the following eligibility requirements pursuant to 8.200.410 NMAC and 8.200.420 NMAC of citizenship or non-citizen status, enumeration, residence, non-concurrent receipt of assistance and applications for other benefits;
- appropriate to the size of the budget group (not including the ineligible parent due to citizenship or non-citizen status or enumeration), countable gross income must be less than one hundred and eighty-five percent of the standard of need (SON) countable net income must be less than the SON pursuant to 8.200.520 NMAC and 8.202.500 NMAC; and
- (6) an applicant or an eligible recipient may have other creditable health insurance coverage.

 B. An eligible recipient may have other creditable health insurance coverage. If the eligible recipient has other creditable health insurance coverage, RMA is the second payor.



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