NMAC Transmittal Form



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7018 0EC 11 PM 44 A

Volume: XXIX	Issue: 24 Publication date:	12/27/2018 Number of	pages: 2	(ALD Use Only) Sequence No.
Issuing agency nar	me and address:			Agency DFA code:
HSD - Medical Assistance Division				63000
Contact person's n	ame: Di	hone number:	E-mail address	•
Tabitha Mondragon 505-827-3171			tabitha.mondragon@state.nm.us	
				(ALD Use Only)
Type of rule action: Most recent fil New Amendment Repeal Emergency Renumber 12/2/2013				
[Y] Fitle number:	Title name:			
8	Social Services			
Chapter number:	Chapter name:			
252	Medical Assistance Program Eligibility - Breast and Cervical Cancer Program			
Part number:	Part name:			
600	Benefit Description			
Amendment descri	ption (If filing an amendment):	Amendment	t's NMAC citation	(If filing an amendment):
Are there any mate	erials incorporated by reference? F	Please list attachments or In	ternet sites if ap	plicable.
Yes No	<u>,</u>			
 If materials are at	tached, has copyright permission bee	n received? Yes	7 No	Public domain
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Specific stat	Concise Explanatory tutory or other authority .0 1115 Waiver, Federal Register/Vo	authorizing rulema	aking:	g Adoption:
Notice date(s): 9/25/2018	Hearing date(s):	Rule adoption 12/10/2018	date:	Rule effective date:
7/23/2016	10/24/2016	12/10/2018		1/1/2019
Findings MUST - Reasons for	quired for rulemaking add Finclude: adopting rule, including any fi ny independent analysis done	indings otherwise requ	iired by law o	f the agency, and a

Reasons for any change between the published proposed rule and the final rule; and
 Reasons for not accepting substantive arguments made through public comment.

The Department is amending this rule to delete the three-month retroactive language and refer to 8.200.410.14 NMAC

This rule is being repealed/replaced due to the amount of changes and for cost efficiency.

FREED WITH LIVER RECORDS OF WAY

Findings required for rulemaking adoption: continued





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