# NMAC Transmittal Form



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Issuing agency name and address:							Agency DFA code
HSD - Medical Assistance Division							63000
Contact person's name: Phone number:					E-mail addre	ss:	
Tabitha Mondragon			505-827-3171		tabitha.mondragon@state.nm.us		
Type of rule action	n:	·					O Use Only) cent filing date:
New Amend	lment 🕢 Repe	al Emergei	ncy Renum	iber		4/12/201	8
Title number:	Title name:		·				
8	Social Services					•	
Chapter number:	Chapter name:						
308	Managed Care	Program					
Part number:	Part name:						
10	Care Coordina	ion		<del> </del>			<u>.</u>
Amendment descr	ription (If filing ar	amendment):		Amendment	's NMAC citatio	on (If filing an a	mendment):
Amendment description (If filing an amendment):  Amending (1) Section  Amendment's NMAC citation (If filing a 8.308.10 NMAC, Section 9							
Are there any mat		d by reference?	Please list atta			<del></del>	
Yes No					-		
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Centennial Care	2.0 1115 Waiver,	Federal Register	/Vol. 81. No. 230	, 42 CFR 435.1	l 19(b)(2)		
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Notice date(s):	He	aring date(s):		Rule adoption (	date:	Rule eff	ective date:
8/28/2018	9/	26/2018		11/2/2018		1/1/201	9
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## Findings required for rulemaking adoption:

#### **Findings MUST include:**

- 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.

The Human Services Department added language to NMAC 8.308.10, Care Coordination, Section 9 to allow the Managed Care Organizations (MCOs) to delegate care coordination activities and requiring the MCOs to share information about release form incarceration with the member's providers for care coordination purposes. The Human Services Department is moving language regarding Electronic Visit Verification to NMAC 8.308.13, Community Benefit.

### Continued on next page

## Findings required for rulemaking adoption:

continued



The Human Services Department received one comment on NMAC 8.308.10, Care Coordination, Section 9, General Requirements noting that there was no reference to reporting requirements for members in a delegated arrangement. The Human Services Department provides direction in the Medicaid Managed Care Services Agreement Section 4.4.19 for the Managed Care Organizations to have written agreements with Contracted Providers for care coordination delegation that specify care coordination functions and reporting responsibilities. The final rule does not have any changes from the published rule. Issuing authority (If delegated, authority letter must be on file with ALD): Name: Check if authority has been delegated Brent Earnest Title: Secretary Signature: Date signed: (BLACK ink only)