

TITLE 8 SOCIAL SERVICES
CHAPTER 294 MEDICAID ELIGIBILITY - PREGNANCY-RELATED SERVICES
PART 600 BENEFIT DESCRIPTION

8.294.600.1 ISSUING AGENCY: New Mexico Human Services Department (HSD).
[8.294.600.1 NMAC - Rp, 8.294.600.1 NMAC, 1/1/2014]

8.294.600.2 SCOPE: The rule applies to the general public.
[8.294.600.2 NMAC - Rp, 8.294.600.2 NMAC, 1/1/2014]

8.294.600.3 STATUTORY AUTHORITY: The New Mexico medicaid program is administered pursuant to regulations promulgated by the federal department of health and human services under Title XIX of the Social Security Act as amended or by state statute. See NMSA 1978, Section 27-1-12 et seq.
[8.294.600.3 NMAC - Rp, 8.294.600.3 NMAC, 1/1/2014]

8.294.600.4 DURATION: Permanent.
[8.294.600.4 NMAC - Rp, 8.294.600.4 NMAC, 1/1/2014]

8.294.600.5 EFFECTIVE DATE: ~~[January 1, 2014, unless a later date is cited at the end of a section.]~~
January 1, 2019, or upon approval by the federal centers for medicare and medicaid services (CMS), unless a later date is cited at the end of the section.
[8.294.600.5 NMAC - Rp, 8.294.600.5 NMAC, 1/1/2014; A, xx/xx/xxxx]

8.294.600.6 OBJECTIVE: The objective of this rule is to provide eligibility guidelines when determining eligibility for the medical assistance division (MAD) medicaid program and other health care programs it administers. Processes for establishing and maintaining this category of eligibility are found in the affordable care general provision chapter located at 8.291.400 NMAC through 8.291.430 NMAC.
[8.294.600.6 NMAC - Rp, 8.294.600.6 NMAC, 1/1/2014]

8.294.600.7 DEFINITIONS: Refer to 8.291.400.7 NMAC.
[8.294.600.7 NMAC - Rp, 8.294.600.7 NMAC, 1/1/2014]

8.294.600.8 ~~[MISSION: To reduce the impact of poverty on people living in New Mexico by providing support services that help families break the cycle of dependency on public assistance.]~~ **[RESERVED]**
[8.294.600.8 NMAC - Rp, 8.294.600.8 NMAC, 1/1/2014; A, xx/xx/xxxx]

8.294.600.9 BENEFIT DESCRIPTION: This category provides medicaid services restricted to and related to pregnancy only. These services do not cover procedures, services, pharmaceuticals, or miscellaneous items which are not related to pregnancy.
[8.294.600.9 NMAC - Rp, 8.294.600.9 NMAC, 1/1/2014]

8.294.600.10 BENEFIT DETERMINATION: The HSD income support division (ISD) determines initial and ongoing eligibility. Refer to affordable care general provision chapters located at 8.291.400 through 8.291.430 NMAC for eligibility requirements. A woman eligible for pregnancy-related services remains eligible throughout her pregnancy and for ~~[two months after the month of delivery or after the month in which the pregnancy terminates]~~ a 60 day postpartum period. The postpartum period begins on the date the pregnancy ends, extends 60 days, and then ends on the last day of the month in which the 60 day period ends per 42 CFR 435.4. [Up to three months of retroactive Medicaid coverage is provided to applicants who have received Medicaid covered services during the retroactive period and who have met applicable eligibility criteria had they applied. Eligibility for each retroactive month is determined separately. Application for retroactive Medicaid must be made within 180 days of the date of the Medicaid application. Retroactive coverage is not available prior to January 01, 2014.] Retroactive medicaid coverage is provided in accordance with 8.200.400.14 NMAC.
[8.294.600.10 NMAC - Rp, 8.294.600.10 NMAC, 1/1/2014; A, xx/xx/xxxx]

8.294.600.11 REPORTING REQUIREMENTS: All changes that may affect eligibility must be reported within 10 calendar days of the date of the change as detailed in 8.291.400 NMAC.

[8.292.600.11 NMAC - Rp, 8.294.600.11 NMAC, 1/1/2014]

HISTORY OF 8.294.600 NMAC:

History of Repealed Material:

8.294.600 NMAC, Benefit Description, filed 9/17/2013 - Duration expired 12/31/2013.