

## **Table of Contents**

**State/Territory Name: New Mexico**

**State Plan Amendment (SPA) #: 13-04**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
Dallas Regional Office  
1301 Young Street, Suite 833  
Dallas, Texas 75202



**DIVISION OF MEDICAID & CHILDREN'S HEALTH - REGION VI**

July 10, 2013

Our Reference: SPA-NM-13-04

Ms. Julie Weinberg, Director  
New Mexico Human Services Department  
Medical Assistance Division  
Post Office Box 2348- ARK  
Santa Fe, New Mexico 87504-2348

Dear Ms. Weinberg:

We have reviewed the State's proposed amendment to the New Mexico State Plan submitted under Transmittal Number 13-04, dated April 10, 2013. This state plan amendment makes technical changes to reflect the income disregards currently in place for the family planning and the optional poverty-level pregnant women and infants groups.

Based on the information submitted, we have approved the amendment for incorporation into the official New Mexico State Plan with an effective date change of April 1, 2013. A copy of the CMS-179 and approved plan pages are enclosed with this letter.



If you have any questions, please contact Suzette Seng at (214) 767-6478.

Sincerely,

A large black rectangular redaction box covering the signature of Bill Brooks.

Bill Brooks  
Associate Regional Administrator  
Division of Medicaid and Children's Health

Enclosure

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</b>		1. TRANSMITTAL NUMBER: 13-04	2. STATE New Mexico
<b>FOR: HEALTH CARE FINANCING ADMINISTRATION</b>		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE April 1, 2013	
5. TYPE OF PLAN MATERIAL (Check One):  <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION:  MORE LIBERAL METHODS OF TREATING INCOME UNDER SECTION 1902(a)(10)(A)(ii)(XXI) OF THE ACT,		7. FEDERAL BUDGET IMPACT: a. FFY 2012 \$0 b. FFY 2013 \$0	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:  SUPPLEMENT 8a TO ATTACHMENT 2.6 -A Page 3a		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):  SUPPLEMENT 8a TO ATTACHMENT 2.6 -A Page 3a, TN 08-01	
10. SUBJECT OF AMENDMENT: Amend our New Mexico State Plan page Supplement 8a, Attachment 2.6-A page 3a in order to remove the reference to infants in paragraph 7 and add the Family Planning block disregard that is our current practice, but was not cited in our State Plan.			
11. GOVERNOR'S REVIEW (Check One): <input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT      X OTHER, AS SPECIFIED: Authority <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED      Delegated to the Medicaid Director. <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
12. SIGNATURE OF STATE AGENCY OFFICIAL 		16. RETURN TO: Julie B. Weinberg, Director Medical Assistance Division P.O. Box 2348 - ARK 2025 S. Pacheco St. Santa Fe, NM 87504-2348	
13. TYPED NAME: Julie B. Weinberg			
14. TITLE: Director, Medical Assistance Division			
15. DATE SUBMITTED: April 10, 2013			
<b>FOR REGIONAL OFFICE USE ONLY</b>			
17. DATE RECEIVED: 19 April, 2013		18. DATE APPROVED: 10 July, 2013	
PLAN APPROVED - ONE COPY A			
19. EFFECTIVE DATE OF APPROVED MATERIAL: 1 April, 2013		20. SIGN 	
21. TYPED NAME: Bill Brooks		22. TITLE: Associate Regional Administrator Division of Medicaid and Children's Health	
23. REMARKS:			

SUPPLEMENT 8a TO ATTACHMENT 2.6 -A  
Page 3a  
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State NEW MEXICO

MORE LIBERAL METHODS OF TREATING INCOME  
UNDER SECTION 1902 (r)(2) OF THE ACT

☐ Section 1902 (f) state

☒ Non-section 1902 (f) state

4) The following applies to infants described at sections 1902(a)(10)(A)(i)(IV) and 1902(1)(1)(B) and children ages 1 through 5 described at 1902 (a)(10)(A)(i)(VI) and 1902 (1)(1)(C) of the statute.

An earned income disregard of seven hundred-fifty (\$750) dollars will be applied to the gross earned income of the parent(s).

The dependent care deduction will be greater of the actual care costs or three hundred-seventy-five (375) dollars per household whichever is greater.

5) For Working Disabled Individuals Medicaid group, an amount equal to the current SSI FBR is disregarded for purposes of the second step in the income eligibility determination process (i.e. the individual must meet SSI income criteria when the individual's earnings are disregarded).

6) For Working Disabled Individuals Medicaid group, work-related expenses for the disabled and for the blind will be deducted after the "1/2 of the remainder of the earnings" deduction is applied.

7) The following applies to Pregnant Women covered under provisions of section 1902(a)(10)(A)(ii)(IX) of the Act: An amount of income equal to the difference between 185% and 235% FPL for the appropriate household size will be disregarded from Income calculations.

8) The following applies to Family Planning covered under provisions of section 1902(a)(10)(A)(ii)(XXI) of the Act: An amount of income equal to the difference between 185% and 235% FPL for the appropriate household size will be disregarded from Income calculations.

9) For eligible groups; 1902 (a)(10)(A)(i)(IV), 1902 (a)(10)(A)(VI) and 1902 (a)(10)(A)(i)(VII): All wages paid by the Census Bureau for temporary employment related to Census activities are excluded.

TN No.  
Supersedes  
TN No. 08-01

Approval Date \_\_\_\_\_

Effective Date \_\_\_\_\_

Superseded By NM 08-01

STATE <u>New Mexico</u>	A
DATE REC'D <u>4-19-13</u>	
DATE APPV'D <u>7-10-13</u>	
DATE EFF <u>4-1-13</u>	
NOFA 179 <u>13-04</u>	