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State/Territory Name: New Mexico

State Plan Amendment (SPA) #: 19-0015

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approved Page

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services Center for Medicaid & CHIP Services 233 North Michigan Ave., Suite 600 Chicago, Illinois 60601



Financial Management Group

February 18, 2020

Ms. Nicole Comeaux Director Medical Assistance Division P.O. Box 2348 Santa Fe, NM 87504-2348

RE: TN 19-0015

Dear Ms. Comeaux:

We have reviewed the proposed New Mexico State Plan Amendment (SPA) to Attachment 4.19-B, NM 19-0015 which was submitted to the Centers for Medicare & Medicaid Services (CMS) on December 30, 2019. This plan amendment updates the behavioral health fee schedule.

Based upon the information provided by the State, we have approved the amendment with an effective date of October 1, 2019. We are enclosing the approved CMS-179 and a copy of the new state plan pages.

If you have any additional questions or need further assistance, please contact Thomas Couch at (208) 861-9838 or Thomas.Couch@cms.hhs.gov.

Sincerely,

Todd McMillion Acting Director **Division of Reimbursement Review**

Enclosures

Cc: Jennifer Vigil

DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES	FORM APPROVE(OMB No. 0938-019)		
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICE	$\frac{1}{9} = 0 = \frac{1}{5}$ New Mexico		
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES 5. TYPE OF PLAN MATERIAL (Check One)	4. PROPOSED EFFECTIVE DATE October 1, 2019		
NEW STATE PLAN AMENDMENT TO BE CON	ISIDERED AS NEW PLAN		
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AM	ENDMENT (Separate transmittal for each amendment)		
6. FEDERAL STATUTE/REGULATION CITATION 42 CFR 447 Subpart F	7. FEDERAL BUDGET IMPACT a. FFY_2020\$ 46,600,000 b. FFY_2021\$ 46,600,000		
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)		
Attachment 4.19-B page 3	Attachment 4.19-B page 3 (NM SPA 19-0002)		
10. SUBJECT OF AMENDMENT Behavioral Health Fee Schedule Pricing			
11. GOVERNOR'S REVIEW (Check One)			
 GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL 	OTHER, AS SPECIFIED Authority delegated to the Medicaid Director		
12. SIGNATURE OF STATE AGENOY OFFICIAL 18. TYPED NAME Nicole Comeaux 14. TITLE Director, Medical Assistance Division 15. DATE SUBMITTED 12./30/2019	16. RETURN TO Nicole Comeaux, J.D., M.P.H., Director Medical Assistance Division P.O. Box 2348 Santa Fe, NM 87504-2348		
FOR REGIONAL	DEFICE USE ONLY		
17. DATE RECEIVED December 30, 2019	18. DATE APPROVED February 18, 2020		
	ONE COPY ATTACHED		
19. EFFECTIVE DATE OF APPROVED MATERIAL October 1, 2019	20. SIG <u>NATURE OF REGIONAL OFFIC</u> IAL		
21. TYPED NAME Todd McMillion	22. TITLE Acting Director Division of Reimbursement Review		
23. REMARKS			

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT STATE OF NEW MEXICO AND STANDARDS FOR ESTABLISHING PAYMENT RATES --OTHER TYPES OF CARE

Attachment 4.19-B Page 3

A. Other Practitioners Services

1. Behavioral health professional services are reimbursed on a fee schedule basis applicable to psychologists, counselors, therapists, licensed alcohol and drug abuse counselors, behavioral health agencies, licensed independent social workers and psychiatric clinical nurse specialists.

Except as otherwise noted in the state plan, state developed fee schedule rates are the same for both governmental and private providers. The agency's fee schedule rates were set as of October 1, 2019 and are effective for services provided on or after that date. All rates are published at http://www.hsd.state.nm.us/providers/fee-schedules.aspx.

Non-independent behavioral health practitioners who are required by state law to be supervised are not paid directly for their services. Rather, payment is made to the supervising practitioner, or the appropriate group, licensed treatment and diagnostic center or agency to which the behavioral health worker belongs.

 Independently practicing certified Nurse Practitioners and Clinical Nurse Specialists are reimbursed at 90% of the physician fee schedule as described in Item I. A of Attachment 4.19 B, including preventive services for alternative benefit plan recipients.

Except as otherwise noted in the state plan, state developed fee schedule rates are the same for both governmental and private providers. The agency's fee schedule rates were set as of January 1, 2019 and are effective for services provided on or after that date. All rates are published at http://www.hsd.state.nm.us/providers/fee-schedules.aspx.

3. Certified nurse anesthetists and anesthesiology assistants are reimbursed a rate per anesthesia unit for the procedure and for units of time for medically directed and non-medically directed services.

Except as otherwise noted in the state plan, state developed fee schedule rates are the same for both governmental and private providers. The agency's fee schedule rates were set as of March 31, 2014 and are effective for services provided on or after that date. All rates are published at http://www.hsd.state.nm.us/providers/fee-schedules.aspx.

State: New Mexico Date Received: 12-30-19 Date Approved: 02-18-20 Date Effective: 10-01-19 Transmittal Number: 19-0015

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0015	Approval Date	02-18-20	
19-0002	Effective Date	10-01-19	

TN No. <u>NM 19-0015</u>

Supersedes TN No. 19-0002