

Table of Contents

State/Territory Name: New Mexico

State Plan Amendment (SPA) #: 24-0004

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

December 5, 2024

Dana Flannery
Director
Medical Assistance Division
New Mexico Human Services Department
2025 South Pacheco Drive
Santa Fe, New Mexico 87504-2348

Re: New Mexico State Plan Amendment (SPA) – 24-0004

Dear Director Flannery:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) 24-0004. This amendment proposes to establish coverage for doula services as a new reimbursable preventative service for individuals navigating pregnancy-related care.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations 21 CFR Part 130; 42 CFR 440.130(c) and 1905(a)(13). This letter informs you that New Mexico's Medicaid SPA TN 24-0004 was approved on December 5, 2024, with an effective date of October 1, 2024.

Enclosed are copies of Form CMS-179 and approved SPA pages to be incorporated into the New Mexico State Plan.

If you have any questions, please contact Dana Brown at (410) 786-0421 or via email at Dana.Brown@cms.hhs.gov.

Sincerely,


Ruth
Hughes -S

Digitally signed by
Ruth Hughes -S
Date: 2024.12.05
14:14:00 -06'00'

Ruth A. Hughes, Acting Director
Division of Program Operations

Enclosures

cc: Valerie.Tapia@hca.nm.gov
Dana.Flannery@hca.nm.gov

| | | | |
|--|--|--|-------------------------------|
| TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES | | 1. TRANSMITTAL NUMBER <u>2</u> <u>4</u> — <u>0</u> <u>0</u> <u>0</u> <u>4</u> | 2. STATE <u>N</u> <u>M</u> |
| | | 3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT <input checked="" type="radio"/> XIX <input type="radio"/> XXI | |
| TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES | | 4. PROPOSED EFFECTIVE DATE 10/01/2024 | |
| 5. FEDERAL STATUTE/REGULATION CITATION 21 CFR Part 130; 42 CFR 440.130 (c) and 1905 (a)(13) | | 6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY <u>FFY 2024</u> \$ <u>34,440</u> b. FFY <u>FFY 2025</u> \$ <u>103,320</u> | |
| 7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 3.1-A page 11 Supplement A to Attachment 3.1 A page 21.1 Attachment 4.19-B Page 3a Attachment 4.19-B Page 3a1 Supplement A to Attachment 3.1 A page 21.2 | | 8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 3.1-A page 11 (TN 17-0002) Supplement A to Attachment 3.1 A page 21.1 (TN 23-0011) Supplement A to Attachment 3.1 A page 21.2 (NEW) Attachment 4.19-B Page 3a (TN 23-0017) Attachment 4.19-B Page 3a1 (TN 23-0017) | |
| 9. SUBJECT OF AMENDMENT To add coverage for doula services as a new reimbursable preventative service for individuals navigating pregnancy-related care adding coverage for lactation provider services as a new reimbursable preventative to increase access to education and management to prevent and solve breastfeeding problems and encourage support to breastfeeding mother-infant. | | | |
| 10. GOVERNOR'S REVIEW (Check One) <input type="radio"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="radio"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="radio"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL <input checked="" type="radio"/> OTHER, AS SPECIFIED: Authority delegated to the Medicaid Director | | | |
| 11. SIGNATURE OF STATE AGENCY OFFICIAL  | | 15. RETURN TO Dana Flannery Medical Assistance Division P.O. Box 2348 Santa Fe, NM 87504-2348 | |
| 12. TYPED NAME Dana Flannery | | | |
| 13. TITLE Medical Assistance Division | | | |
| 14. DATE SUBMITTED 09/19/2024 | | | |
| FOR CMS USE ONLY | | | |
| 16. DATE RECEIVED 09/19/2024 | | 17. DATE APPROVED December 5, 2024 | |
| PLAN APPROVED - ONE COPY ATTACHED | | | |
| 18. EFFECTIVE DATE OF APPROVED MATERIAL 10/01/2024 | | 19. SIGNATURE OF APPROVING OFFICIAL Digitally signed by Ruth Hughes - Ruth Hughes -S Date: 2024.12.05 14:15:36 -06'00' | |
| 20. TYPED NAME OF APPROVING OFFICIAL Ruth A. Hughes | | 21. TITLE OF APPROVING OFFICIAL Acting Director, Division of Program Operations | |
| 22. REMARKS | | | |

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State NEW MEXICO

AMOUNT, DURATION, AND SCOPE OF MEDICAL AND REMEDIAL
CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

28. (i) Licensed or Otherwise State-Approved Freestanding Birth Centers

Provided: X No limitations With limitations None licensed or approved

Please describe any limitations:

28. (ii) Licensed or Otherwise State-Recognized covered professionals providing services in the Freestanding Birth Center

Provided: ☐ No limitations ☒ With limitations (please describe below)

☐ Not Applicable (there are no licensed or State approved Freestanding Birth Centers)

Please describe any limitations:

Please check all that apply:

☒ (a) Practitioners furnishing mandatory services described in another benefit category and otherwise covered under the State plan (i.e., physicians and certified nurse midwives).

☒ (b) Other licensed practitioners furnishing prenatal, labor and delivery, or postpartum care in a freestanding birth center within the scope of practice under State law whose services are otherwise covered under 42 CFR 440.60 (e.g., lay midwives, certified professional midwives (CPMs), and any other type of licensed midwife). *

☒ (c) Other health care professionals licensed or otherwise recognized by the State to provide these birth attendant services (e.g., doulas, lactation provider etc.).*

*For (b) and (c) above, please list and identify below each type of professional who will be providing birth center services:

(b) Licensed Midwives (lay midwives licensed by the state))

(c) Doulas and Lactation Provider

State Supplement A to Attachment 3.1A

Doula Services

Pursuant to 42 CFR 440.130(c), doula services are provided as preventive services and must be recommended by a physician or other licensed practitioner acting within their scope of practice under state law.

Effective October 1, 2024, New Mexico Medicaid is adding coverage for doula services as a new reimbursable preventative service for individuals navigating pregnancy-related care before, during, and after a pregnancy or childbirth. Doula services include:

- i. Prenatal & post-partum physical, emotional, and evidence-based education support and linkages to community-based resources.
- ii. Counseling related to Pre-conception, Pregnancy Loss, Infant Loss, Termination of Pregnancy.
- iii. Non-medical Labor & Delivery (L&D) support.

Doula providers are required to obtain credentialing through the New Mexico Department of Health. Credentialing includes criteria as follows:

- i. Be at least 18 years old at the time the application is submitted.
- ii. Maintain a current adult and infant cardiopulmonary resuscitation (CPR) certification from the American Red Cross or American Heart Association.
- iii. Complete basic Health Insurance Portability and Accountability Act of 1996 (HIPAA) training.
- iv. National Doula Certification Board or meets all requirements for experience pathway.
- v. Complete twenty-four hours of continuing education in maternal, perinatal and/or infant care every two years.

Lactation Provider Services

Pursuant to 42 CFR 440.130(c), doula services are provided as preventive services and must be recommended by a physician or other licensed practitioner acting within their scope of practice under state law.

Effective October 1, 2024, New Mexico Medicaid is adding coverage for lactation provider services as a new reimbursable preventative to increase access to education and management to prevent and solve breastfeeding problems and encourage support to breastfeeding mother–infant.

Lactation Care Providers must be licensed and maintain licensure through the New Mexico Board of Nursing (NMBON).

Item 13d

Rehabilitative Services

The rehabilitative services listed below must be recommended by a physician or OLP.

Services are limited to mental health rehabilitation services for eligible recipients for whom the medical necessity of such services has been determined and who are not residents of an institution for mental illness.

The services are limited to goal oriented mental health rehabilitative services individually designed to accommodate the level of the recipient's functioning and which reduce the disability and to restore the recipient to his/her best possible level of functioning.

Services are limited to assessment, treatment planning, and specific services which reduce symptomatology and restore basic skills necessary to function independently in the community including:

1. Therapeutic interventions: Provides face to face therapeutic services which include assessments, treatment planning, ongoing treatment, and transition planning.
2. Medication Services: Provides for the assessment of the efficacy of medication and evaluation of side effects, and administration of medication by qualified personnel when it cannot be self-administered. Also provides educationally structured face to face activities delivered to patients, their families and others who provide care to patients regarding medication management.
3. Community Based Crisis Interventions: Provides coordinated services utilizing a crisis team. The service includes immediate access, evaluation, crisis intervention and respite care to patients.

State Supplement A to Attachment 3.1A

4. Professional Consultation: Provides consultation services by mental health professionals as part of treatment team, to patients for the purpose of clinical case review, treatment plan development and ongoing treatment.

4. **Licensed Midwives (Lay Midwives):** Payments to licensed midwives are reimbursed at 77% of the physician fee schedule as described in Item I. A of Attachment 4.19 B for global delivery codes; payments for other codes are reimbursed at 100% of the physician fee schedule.

The agency's fee schedule rates were set as of July 1, 2023, and are effective for services provided on or after those dates. All rates and any updates or periodic adjustments to the fee schedule are published on the New Mexico Medicaid website. Notice of changes to rates will be made as required by 42 CFR 447.205. Reimbursement for governmental and non-governmental providers are paid the same, uniform rate unless otherwise noted on the payment pages.

5. **Chiropractic Services:** Effective October 1, 2024, chiropractic services are covered for all individuals Pursuant to 440.60(b), chiropractor services are provided by a licensed chiropractor and consist of treatment by means of manual manipulation of the spine that the chiropractor is legally authorized by the State to perform.

Payments to New Mexico chiropractic licensed providers are reimbursed at 100% of the physician fee schedule with an annual benefit limit of \$2,000.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers. (ex. case management for persons with chronic mental illness). The agency's fee schedule rate was set as of October 1, 2024 and is effective for services provided on or after that date.

All rates and any updates or periodic adjustments to the fee schedule are published on the New Mexico Medicaid website. Changes to the fee schedule are made with public notice, following the requirements of 42 CFR 447.205.

6. **Doula Services:** Effective October 1, 2024, Doula services are covered for all individuals navigating pregnancy-related care before, during, and after a pregnancy or childbirth.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of (ex. case management for persons with chronic mental illness). The agency's fee schedule rate was set as of October 1, 2024, and is effective for services provided on or after that date.

All rates and any updates or periodic adjustments to the fee schedule are published on the New Mexico Medicaid website. Changes to the fee schedule are made with public notice, following the requirements of 42 CFR 447.205.

7. **Lactation Provider Services:** Effective October 1, 2024, Lactation Provider services are covered for all individuals who need access to education and management to prevent and solve breastfeeding problems and encourage support to breastfeeding mother–infant.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of (ex. case management for persons with chronic mental illness). The agency's fee schedule rate was set as of October 1, 2024, and is effective for services provided on or after that date.

All rates and any updates or periodic adjustments to the fee schedule are published on the New Mexico Medicaid website. Changes to the fee schedule are made with public notice, following the requirements of 42 CFR 447.205.

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

Attachment 4.19-B
Page 3a1

C. Other Services

1. **Ambulatory Surgical Centers Services** - Free standing ambulatory surgical centers are paid at the Medicare fee schedule. For procedures not covered by Medicare, the Department establishes a fee schedule amount equivalent to the amount allowed for procedure of similar complexity.

The agency's fee schedule rates were set as of July 1, 2023, and are effective for services provided on or after that date. All rates and any updates or periodic adjustments to the fee schedule are published on the New Mexico Medicaid website. Notice of changes to rates will be made as required by 42 CFR 447.205.

2. **Renal Dialysis Facilities** - Renal dialysis facilities are paid at the Medicare fee schedule. For procedures not covered by Medicare, the Department establishes a fee schedule amount equivalent to the amount allowed for procedure of similar complexity.

The agency's fee schedule rates were set as of July 1, 2023 and are effective for services provided on or after that date. All rates and any updates or periodic adjustments to the fee schedule are published on the New Mexico Medicaid website. Notice of changes to rates will be made as required by 42 CFR 447.205.

3. **Licensed Birth Centers** - Licensed birth centers are paid at the Medicaid fee schedule. The agency's fee schedule rates were set as of July 1, 2023 and are effective for services provided on or after that date. All rates and any updates or periodic adjustments to the fee schedule are published on the New Mexico Medicaid website. Notice of changes to rates will be made as required by 42 CFR 447.205.