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State/Territory Name: NM

State Plan Amendment (SPA): 22-0019

This file contains the following documents in the order listed:

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

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

June 22, 2023

Ms. Nicole Comeaux Director Medical Assistance Division New Mexico Human Services Department 2025 South Pacheco Drive P.O. Box 2348 Santa Fe, New Mexico 87504-2348

Re: New Mexico State Plan Amendment (SPA) 22-0019

Dear Director Nicole Comeaux:

We have reviewed the proposed New Mexico State Plan Amendment (SPA) to Attachment 4.19-B, NM#22-0019, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on August 1, 2022. This SPA proposes a temporary rate increases for providers of personal care services (PCS) and private duty nursing (PDN) under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit.

Based upon the information provided by the State, we have approved the amendment with an effective date of July, 1, 2022. We are enclosing the approved CMS-179 and a copy of the new state plan page.

If you have any additional questions or need further assistance, please contact Monica Neiman at: Monica.Neiman@cms.hhs.gov

Sincerely,

Todd McMillion Director Division of Reimbursement Review

Enclosures

CENTERS FOR MEDICARE & MEDICAID SERVICES	OMD NO. 0330-0133
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES 5. FEDERAL STATUTE/REGULATION CITATION Section 9817 of the American Rescue Plan Act of 2021; Title 19 of the SSA and Sec 1135 of the SSA 7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19-B, pg. 16	1. TRANSMITTAL NUMBER 2. STATE 2 2 0 1 9 N M 3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT XIX XXI 4. PROPOSED EFFECTIVE DATE July 1, 2022 XIX XXI 6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a FFY 22 \$ 646 b. FFY 23 \$ 2,075 \$ \$ 8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 4.19-B, pg. 16 (HCFA 179 99-06)
 SUBJECT OF AMENDMENT Temporary rate increases for providers of personal care services (PCS) and private duty nursing (PDN) under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit. 	
10. 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. TYPED NAME Nicole Comeaux 13. TITLE Director, Medical Assistance Division 14. DATE SUBMITTED August 1, 2022	5. RETURN TO Nicole Comeaux, J.D., M.P.H., Director Medical Assistance Division P.O. Box 2348 Santa Fe, NM 87504-2348
FOR CMS USE ONLY 16. DATE RECEIVED 17. DATE APPROVED	
	June 22, 2023
PLAN APPROVED - ONE COPY ATTACHED	
18. EFFECTIVE DATE OF APPROVED MATERIAL 19 July 1, 2022 19	9 <u>. SIGNATURE OF APPROVING OFFIC</u> IAL
	1. TITLE OF APPROVING OFFICIAL Director, Division of Reimbursement Review
22. REMARKS	

(c) Private duty nursing services, Christian science nurse services, and personal care services. For fee-for-service providers of personal care services (PCS) and private duty nursing (PDN) under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, effective May 12, 2023, reimbursement will be set at the same rate as 1915(c) provider rates. Thereafter, New Mexico Medicaid will apply a 10% reimbursement increase for July 1, 2022, to May 11, 2023 rates authorized by DR-NM-22-0023 and for base rates from May 12, 2023 through June 30, 2023 (as authorized by NM-23-0001) or until the American Rescue Plan Act (ARPA) 9817 funding is exhausted or expires, whichever is earlier. New Mexico Medicaid will apply a 5% reimbursement increase to base rates as authorized by NM-23-0001 for July 1, 2023, to June 30, 2024 or until the ARPA 9817 funding is exhausted or expires, whichever is earlier. Reimbursements will be made to PCS and PDN providers under EPSDT as authorized under New Mexico's ARPA Home and Community Based Services (HCBS) Spending Plan and Narrative and in accordance with Appendix B of the ARPA State Medicaid Director Letter, SMD# 21-003 Implementation of American Rescue Plan Act of 2021 Section 9817. Once Section 9817 ARP funding is fully expended, reimbursement will return to base levels in effect on May 12, 2023 (as authorized by NM-23-0001).

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers. All rates are published on the state's website at: <u>https://www.hsd.state.nm.us/providers/fee-schedules/</u>

- (d) Services by licensed master's level practitioners including psychologists, counselors, and social workers, and other individually licensed practitioners.
- (e) Chiropractic services.
- (f) Orthodontic services and other dental services not otherwise covered in the state plan.
- (g) Services provided by school districts and local education agencies. Reimbursement will be at the same rate as other providers of the specific service rendered.
- (h) Services provided by Licensed Alcohol and Drug Abuse Counselors (LADACs).

2. Inpatient Institutional Services

Inpatient services provided by JCAHO accredited institutions are reimbursed using the methodology for specialty hospitals according to the reimbursement principles, of 4.19-A.

3. **Outpatient Institutional Services**

Outpatient services provided by JCAHO accredited institutions are reimbursed using the methodology for outpatient hospital according to the reimbursement principles of 4.19- B, III.

4. Rural Health Clinic and Federally Qualified Health Center Services

Services by these providers are reimbursed in accordance with the reimbursement methodology described in 4.19-B, Item VIII.

5. Durable Medical Equipment, Supplies, Prosthetics, and Orthotics

These items are reimbursed in accordance with the reimbursement methodology described in 4.19-B, Item VII.

6. **Case Management**

Case Management services are reimbursed in accordance with the reimbursement methodology described in 4.19-B, Item X.

TN No. 22-0019

Approval Date June 22, 2023

Supersedes TN HCFA 179 99-06

Effective Date 7/1/2022