



HUMAN SERVICES
DEPARTMENT

Michelle Lujan Grisham, Governor
David R. Scrase, M.D., Secretary
Nicole Comeaux, J.D., M.P.H, Director

March 19, 2020

Mr. Calder Lynch, Director
Department of Health & Human Services
Centers for Medicaid and CHIP Services
7500 Security Blvd, Mail Stop S2-26-12
Baltimore, MD 21244-1850

Dear Mr. Calder Lynch:

New Mexico greatly appreciates the tools and guidance that CMS, and CMCS in particular, has provided to the state Medicaid Agencies during this trying time. The President declared a National Emergency Concerning the Novel Coronavirus Disease (COVID-19) Outbreak issued on March 13, 2020. The HHS Secretary declared a Public Health Emergency on January 31, 2020, retroactive to January 27, 2020, which allows for CMS programmatic waivers based on Section 1135 of the Social Security Act. CMS has provided valuable information to the States that in addition to the 1135 guidance, includes flexibilities, blanket waivers, 1115 waivers, 1915 (c) Appendix K waivers, Verification Plans, and State Plan Amendments.

The New Mexico Human Services Department (HSD) is seeking CMS concurrence on the requests below which were outlined in the Disaster Toolkit and Inventory referenced above. We request to implement these requests retroactively to March 1, 2020 and end no later than the termination of the emergency period. In specific, HSD seeks CMS concurrence for the items indicated below.

Request #1: Allow self-attestation for all eligibility criteria (excluding citizenship and immigration status) on a case-by-case basis for individuals subject to a disaster when documentation is not available

HSD currently accepts self-attestation for Medicaid for the following eligibility factors per our state verification plan: residency; household composition; pregnancy; caretaker relative; application for other benefits.

HSD is seeking CMS concurrence to accept self-attestation for Medicaid for the following eligibility factors: income, age (Date of Birth); Social Security Number; Medicare; resources

Citizenship\Immigration

HSD requires verification of citizenship\immigration status. HSD provides a reasonable opportunity period to individuals who have made a declaration of citizenship or satisfactory immigration status in accordance with 42 CFR 435.406 and for whom HSD is unable to verify citizenship or satisfactory immigration status. During the reasonable opportunity period, HSD continues efforts to complete verification of the individual's citizenship or satisfactory immigration status, or request documentation, if necessary, in accordance with 8.200.410.13 NMAC.

Request #2: Delay renewal processing

HSD will delay Medicaid renewals for a period of 3 months as the renewals become due. MAGI cases will go through the administrative renewal process to determine if cases can be approved for a new 12-month certification period. If unable to renew through the automated administrative renewal process, then a caseworker will review for a manual administrative renewal. If unable to renew manually cases will be extended for a 3-month period. A pre-populated renewal form will not be issued. Beneficiaries will be notified of their 3-month extension. Non-MAGI cases will get a 3-month extension. A renewal form will not be issued and these beneficiaries will be notified of their 3-month extension.

Request #3: Provides for eligibility levels above 133% FPL for individuals under age 65 with MAGI-based income

HSD will increase the FPL level to 200% for the "Individuals Above 133% of the FPL" (also referred to as our MAGI Adult expansion group\COE 100) as allowed through State Plan Amendment (SPA) S50 and its MACPro equivalent.

If you have any questions or concerns, please contact Jennifer Vigil, CMS Liaison at (505) 827-6213.

Sincerely,



Nicole Comeaux, J.D., M.P.H, Director
Medical Assistance Division

cc: Peter Banks, State Monitoring Lead, CMS Medicaid and CHIP Operations Group
Michael Trieger, Project Officer/Health Insurance Specialist
Jackie Glaze, Senior Policy Advisor