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## Table of Contents

**State/Territory Name: New Mexico**

**State Plan Amendment (SPA) #: NM-14-0010**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) SPA Summary Form
- 3) Approved SPA Pages
- 4) Additional Attachments that are part of the state plan

The complete title XXI state plan for New Mexico consists of the most recent state plan posted on Medicaid.gov under CHIP and State Plan Amendments. The link is provided below. The following approved templates are in addition to, or replace sections of the state's posted current state plan. The attached approval letter(s) explain how these templates fit into that state plan.

Link to state title XXI state plans and amendments: <http://medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Childrens-Health-Insurance-Program-CHIP/CHIP-State-Program-Information.html>

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Mail Stop: S2-26-12  
Baltimore, Maryland 21244-1850



**Children and Adults Health Programs Group**

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**JUL 23 2014**

Julie Weinberg, Director  
Medical Assistance Division  
New Mexico Human Services Department  
2025 South Pacheco, Ark Plaza  
P. O. Box 2348  
Santa Fe, NM 87504-2348

Dear Ms. Weinberg:

I am pleased to inform you that the Centers for Medicare & Medicaid Services has approved your title XXI Children's Health Insurance Program (CHIP) state plan amendment (SPA) number NM-14-0010 submitted on May 23, 2014. This SPA relates to Modified Adjusted Gross Income (MAGI) Eligibility and has an effective date of January 1, 2014.

The SPA number NM-14-0010 converts the state's existing income eligibility standards to MAGI-equivalent standards, by age group, for children covered in its title XXI-funded Medicaid program. A copy of the approved state plan page (CS3) is attached, and should be incorporated into the state's approved CHIP state plan. This page supersedes the current Medicaid expansion Section (4.0) of the current CHIP state plan.

Your title XXI project officer is Ms. Victoria Collins. She is available to answer questions concerning this amendment and other CHIP-related issues. Ms. Collins' contact information is as follows:

Centers for Medicare & Medicaid Services  
Center for Medicaid and CHIP Services  
Mail Stop: S2-01-16  
7500 Security Boulevard  
Baltimore, MD 21244-1850  
Telephone: (410) 786-2167  
Facsimile: (410) 786-5882  
E-mail: [Victoria.Collins@cms.hhs.gov](mailto:Victoria.Collins@cms.hhs.gov)

Page 2 – Ms. Julie Weinberg

Official communications regarding program matters should be sent simultaneously to Ms. Collins and to Mr. Bill Brooks, Associate Regional Administrator (ARA) in our Dallas Regional Office. Mr. Brooks' address is:

Centers for Medicare and Medicaid Services  
Office of the Regional Administrator  
1301 Young Street, Suite 714  
Dallas, TX 75202

Congratulations on the approval. We look forward to continuing to work with you and your staff toward the approval of your remaining MAGI Eligibility SPAs. If you have additional questions, please contact Ms. Kelly Whitener, Director, Division of State Coverage Programs at (410) 786-0719.

Sincerely,

A solid black rectangular box redacting the signature of Eliot Fishman.

Eliot Fishman  
Director

Enclosure

cc:

Bill Brooks, Associate Regional Administrator, CMS Dallas Region

logged in as TONIABROWN(CMS CO Staff)

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## Children's Health Insurance Program Eligibility

**NM.1023.R00.00 - Apr 01, 2014**

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## Children's Health Insurance Program Eligibility: Summary Page

State/Territory name: New Mexico

#### Transmittal Number:

*Please enter the Transmittal Number (TN) in the format ST-YY-0000 where ST= the state abbreviation, YY = the last two digits of the submission year, and 0000 = a four digit number with leading zeros. The dashes must also be entered.*

NM-14-0010

#### Type of SPA:

- MAGI Eligibility & Methods
- XXI Medicaid Expansion
- Establish 2101(f) Group
- Eligibility Processing
- Non-Financial Eligibility

#### Proposed Effective Date

04/01/2014 (mm/dd/yyyy)

#### Federal Statute/Regulation Citation

42 CFR 457.320(a)(2) and (3)

#### Federal Budget Impact

This SPA has a budget impact.

Total budget impact:

State Funds: \$

Federal Funds: \$

#### Subject of Amendment

Please provide a brief summary of SPA changes.

Character Count: 77 out of 2000

NM CHIP: XXI Medicaid Expansion - Eligibility for Medicaid Expansion Program

#### Signature of State Agency Official

Submitted By: Caitlin Kuennen Breen

Last Revision Date: May 23, 2014

Submit Date: May 23, 2014

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# CHIP Eligibility

OMB Control Number: 0938-1148

Expiration date: 10/31/2014

## Eligibility for Medicaid Expansion Program

CS3

42 CFR 457.320(a)(2) and (3)

Income eligibility for children under the Medicaid Expansion is determined in accordance with the following income standards:

There should be no overlaps or gaps for the ages entered.

### Age and Household Income Ranges

	From Age	To Age	Above (% FPL)	Up to & including (% FPL)	
<b>+</b>	0	6	200	300	<b>X</b>
<b>+</b>	6	19	138	240	<b>X</b>

### PRA Disclosure Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148. The time required to complete this information collection is estimated to average 50 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.