

State/Territory: \_\_\_\_\_

New Hampshire

4.4 Medicaid Eligibility Quality Control (MEQC)

Citation

42 CFR 431 Subparts P & Q

50 FR 21839

75 FR 48847

1903(u) of

the Act,

P.L. 99-509

(Section 9407)

P.L. 107-300

P.L. 111-3

(a) A system of quality control is implemented in accordance with 42 CFR Part 431, Subpart P.  Yes

Not Applicable. The State operates an Approved MEQC Pilot

(b) In accordance with 431.806(c), the State operates a Medicaid quality control claims processing assessment system that meets the requirements of 431.830 – 431.836.  Yes.

Not applicable. The State has an approved Medicaid Management Information System (MMIS).

(c) In accordance with 431.806(b), Payment Error Rate Measurement (PERM) is implemented in accordance with 42 CFR Part 431, Subpart Q, in substitution to meet the statutory and regulatory ("traditional") Medicaid Eligibility Quality Control (MEQC) review during the State's PERM cycle year.  Yes.

Effective for FFY 13   
Effective for FFY \_\_\_\_\_   
Effective for FFY \_\_\_\_\_   
Not applicable.

TN No. 12-011

Supersedes

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