



State of New Mexico
Human Services Department
Human Services Register



I. DEPARTMENT
NEW MEXICO HUMAN SERVICES DEPARTMENT (HSD)

II. SUBJECT
8.200.510 NMAC *MEDICAID ELIGIBILITY - RESOURCE STANDARDS*

III. PROGRAM AFFECTED
(TITLE XIX) MEDICAID

IV. ACTION
FINAL RULE

V. BACKGROUND SUMMARY

Effective January 1, 2014, the federal maximum Community Spouse Resource Allowance (CSRA), applicable when one member of a married couple enters institutional care on or after January 1, 2014, will increase to \$117,240. The state minimum of \$31,290 will remain in effect.

Due to the in 1.2% increase in the Consumer Price Index (CPI) for 2014, the amount of personal needs allowance will increase from \$67 per month to \$68 per month; the maximum monthly excess shelter deduction for the community spouse will increase to \$992 from \$959; and the amount of home equity limit increased from \$802,000 to \$814,000.

The average monthly cost of nursing home care used to calculate restricted coverage for applications registers on or after January 1, 2014 is \$6229.

The Department will update 8.200.510 NMAC to reflect the changes in these federal benefit rates.

VI. RULES

The above referenced rule will be contained in the Medical Assistance Division Program Eligibility Policy Manual. All manual sections are available on the Medical Assistance Division web site at <http://www.hsd.state.nm.us/LookingForInformation/registers.aspx> and the corresponding rules posted at on our website at <http://www.hsd.state.nm.us/LookingForInformation/medical-assistance-division-1.aspx> . If you

do not have internet access, a copy of the rules may be requested by contacting the Medical Assistance Division at 505-827-3152.

VII. EFFECTIVE DATE

This rule is effective February 14, 2014.

VIII. PUBLICATION

Publication of this rule approved by:



SIDONIE SQUIER, SECRETARY
HUMAN SERVICES DEPARTMENT

MEDICAID ELIGIBILITY – GENERAL RECIPIENT POLICIES
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**MEDICAID ELIGIBILITY – GENERAL RECIPIENT POLICIES
RESOURCE STANDARDS**

**TITLE 8 SOCIAL SERVICES
CHAPTER 200 MEDICAID ELIGIBILITY - GENERAL RECIPIENT POLICIES
PART 510 RESOURCE STANDARDS**

8.200.510.1 ISSUING AGENCY: New Mexico Human Services Department (HSD).
[2-1-95; 8.200.510.1 NMAC - Rn, 8 NMAC 4.MAD.000.1, 1-1-01; A, 7-1-12]

8.200.510.2 SCOPE: The rule applies to the general public.
[2-1-95; 8.200.510.2 NMAC - Rn, 8 NMAC 4.MAD.000.2, 1-1-01]

8.200.510.3 STATUTORY AUTHORITY: The New Mexico medicaid program is administered pursuant to regulations promulgated by the federal department of health and human services under Title XIX of the Social Security Act, as amended or by state statute. See NMSA 1978, Chapter 27, Public Assistance.
[2-1-95; 8.200.510.3 NMAC - Rn, 8 NMAC 4.MAD.000.3, 1-1-01; A, 7-1-12]

8.200.510.4 DURATION: Permanent.
[2-1-95; 8.200.510.4 NMAC - Rn, 8 NMAC 4.MAD.000.4, 1-1-01]

8.200.510.5 EFFECTIVE DATE: February 1, 1995, unless a later date is cited at the end of a section.
[2-1-95; 8.200.510.5 NMAC - Rn, 8 NMAC 4.MAD.000.5, 1-1-01; A, 7-1-07]

8.200.510.6 OBJECTIVE: The objective of this rule is to provide eligibility policy and procedures for the medicaid program.
[8.200.510.6 NMAC - N, 1-1-01; A, 7-15-10]

8.200.510.7 DEFINITIONS [RESERVED]

8.200.510.8 [RESERVED]

8.200.510.9 GENERAL NEED DETERMINATION: To be eligible for medicaid benefits, an applicant/recipient must meet specific resource and income standards based on eligibility category.
[1-1-95, 8.200.510.9 NMAC - Rn, 8 NMAC 4.MAD.500, 1-1-01]

8.200.510.10 RESOURCE STANDARDS: For specific information on liquid, nonliquid, and countable resources, resource exclusions, deemed resources, resource transfers, or trusts see specific eligibility categories. Standards for community spouse resource allowance, medical care credit calculations, and average cost for nursing facility care are included in this section.
[1-1-95, 8.200.510.10 NMAC - Rn, 8 NMAC 4.MAD.510, 1-1-01]

8.200.510.11 COMMUNITY SPOUSE RESOURCE ALLOWANCE (CSRA): The CSRA standard varies based on when the applicant/recipient become institutionalized for a continuous period. The CSRA remains constant even if it was calculated prior to submission of a formal medicaid application. If institutionalization began:

- (A) Between September 30, 1989 and December 31, 1989, the state maximum CSRA is \$30,000 and the federal maximum CRSA is \$60,000.
- (B) On or after January 1, 1990, the state minimum is \$31,290 and the federal maximum CSRA is \$62,580.
- (C) On or after January 1, 1991, the state minimum is \$31,290 and the federal maximum CSRA is \$66,480.
- (D) On or before January 1, 1992, the state minimum is \$31,290 and the federal maximum CSRA is \$68,700.
- (E) On or after January 1, 1993, the state minimum is \$31,290 and the federal maximum CSRA is \$70,740.
- (F) On or after January 1, 1994, the state minimum is \$31,290 and the federal maximum CSRA is \$72,660.
- (G) On or after January 1, 1995, the state minimum is \$31,290 and the federal maximum CSRA is \$74,820.

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- (H) On or after January 1, 1996, the state minimum is \$31,290 and the federal maximum CSRA is \$76,740.
(I) On or after January 1, 1997, the state minimum is \$31,290 and the federal maximum CSRA is \$79,020.
(J) On or after January 1, 1998, the state minimum is \$31,290 and the federal maximum CSRA is \$80,760.
(K) On or after January 1, 1999, the state minimum is \$31,290 and the federal maximum CSRA is \$81,960.
(L) On or after January 1, 2000, the state minimum is \$31,290 and the federal maximum CSRA is \$84,120.
(M) On or after January 1, 2001, the state minimum is \$31,290 and the federal maximum CSRA is \$87,000.
(N) On or after January 1, 2002, the state minimum is \$31,290 and the federal maximum CSRA is \$89,280.
(O) On or after January 1, 2003, the state minimum is \$31,290 and the federal maximum CSRA is \$90,660.
(P) On or after January 1, 2004, the state minimum is \$31,290 and the federal maximum CSRA is \$92,760.
(Q) On or after January 1, 2005, the state minimum is \$31,290 and the federal maximum CSRA is \$95,100.
(R) On or after January 1, 2006, the state minimum is \$31,290 and the federal maximum CSRA is \$99,540.
(S) On or after January 1, 2007, the state minimum is \$31,290 and the federal maximum CSRA is \$101,640.
(T) On or after January 1, 2008, the state minimum is \$31,290 and the federal maximum CSRA is \$104,400.
(U) On or after January 1, 2009, the state minimum is \$31,290 and the federal maximum CSRA is \$109,560.
(V) On or after January 1, 2010, the state minimum is \$31,290 and the federal maximum CSRA remains \$109,560.
(W) On or after January 1, 2011, the state minimum is \$31,290 and the federal maximum CSRA remains \$109,560.
(X) On or after January 1, 2012, the state minimum is \$31,290 and the federal maximum CSRA is \$113,640.
(Y) On or after January 1, 2013, the state minimum is \$31,290 and the federal maximum CSRA is \$115,920.
(Z) On or after January 1, 2014, the state minimum is \$31,290 and the federal maximum CSRA is \$117,240.

[1-1-95, 7-1-95, 3-30-96, 8-31-96, 4-1-97, 6-30-97, 4-30-98, 6-30-98, 1-1-99, 7-1-99, 7-1-00; 8.200.510.11 NMAC - Rn, 8 NMAC 4.MAD.510.1 & A, 1-1-01; A, 1-1-02; A, 1-1-03; A, 1-1-04; A, 1-1-05; A, 1-1-06; A, 1-1-07; A, 1-1-08; A, 1-1-09; A, 1-15-10; A, 1-1-11; A, 1-1-12; A, 1-1-13; A, 2-14-14]

8.200.510.12 POST-ELIGIBILITY CALCULATION (MEDICAL CARE CREDIT): Apply applicable deductions in the order listed below when determining the medical care credit for an institutionalized spouse.

Table with 2 columns: DEDUCTION and AMOUNT. Rows include: A. Personal needs allowance for institutionalized spouse (\$68), B. Minimum monthly maintenance needs allowance (MMMNA) (\$1,939), C. The community spouse monthly income allowance (CSMIA) is calculated by subtracting the community spouse's gross income from the MMMNA: (1) If allowable shelter expenses of the community spouse exceed \$582 deduct an excess shelter allowance from community spouse's income that includes: expenses for rent; mortgage (including interest and principal); taxes and insurance; any maintenance charge for a condominium or cooperative; and an amount for utilities (if not part of maintenance charge above); use the standard utility allowance (SUA) deduction used in the food stamp program for the utility allowance. (2) Excess shelter allowance may not exceed a maximum of \$992. D. Any extra maintenance allowance ordered by a court of jurisdiction or a state administrative

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hearing officer.

E. Dependent family member income allowance (if applicable) calculated as follows: 1/3 X MMMNA - dependent member's income).

F. Non-covered medical expenses.

G. The maximum total of the community spouse monthly income allowance and excess shelter deduction may not exceed \$2,898.

[1-1-95, 7-1-95, 3-30-96, 8-31-96, 4-1-97, 6-30-97, 4-30-98, 6-30-98, 1-1-99, 7-1-99, 7-1-00; 8.200.510.12 NMAC - Rn, 8 NMAC 4.MAD.510.2 & A, 1-1-01, 7-1-01; A, 1-1-02; A, 7-1-02; A, 1-1-03; A, 7-1-03; A, 1-1-04; A, 7-1-04; A, 1-1-05; A, 7-1-05; A, 1-1-06; A, 7-1-06; A, 1-1-07; A, 7-1-07; A, 1-1-08; A, 7-1-08, A, 1-1-09, A, 4-1-09; A, 7-1-09; A, 7-1-11; A, 1-1-12; A, 7-1-12; A, 7-1-13; A, 2-14-14]

8.200.510.13 AVERAGE MONTHLY COST OF NURSING FACILITIES FOR PRIVATE PATIENTS

USED IN TRANSFER OF ASSET PROVISIONS: Costs of care are based on the date of application registration.

	DATE	AVERAGE COST PER MONTH
A.	July 1, 1988 - Dec. 31, 1989	\$ 1,726 per month
B.	Jan. 1, 1990 - Dec. 31, 1991	\$ 2,004 per month
C.	Jan. 1, 1992 - Dec. 31, 1992	\$ 2,217 per month
D.	Effective July 1, 1993, for application register on or after Jan. 1, 1993	\$ 2,377 per month
E.	Jan. 1, 1994 - Dec. 31, 1994	\$2,513 per month
F.	Jan. 1, 1995 - Dec. 31, 1995	\$2,592 per month
G.	Jan. 1, 1996 - Dec. 31, 1996	\$2,738 per month
H.	Jan. 1, 1997 - Dec. 31, 1997	\$2,889 per month
I.	Jan. 1, 1998 - Dec 31, 1998	\$3,119 per month
J.	Jan. 1, 1999 - Dec. 31, 1999	\$3,429 per month
K.	Jan. 1, 2000 - Dec. 31, 2000	\$3,494 per month
L.	Jan. 1, 2001 - Dec. 31, 2001	\$3,550 per month
M.	Jan. 1, 2002 - Dec. 31, 2002	\$3,643 per month
N.	Jan. 1, 2003 - Dec. 31, 2003	\$4,188 per month
O.	Jan. 1, 2004 - Dec. 31, 2004	\$3,899 per month
P.	Jan. 1, 2005 - Dec. 31, 2005	\$4,277 per month
Q.	Jan. 1, 2006 - Dec. 31, 2006	\$4,541 per month
R.	Jan. 1, 2007 - Dec. 31, 2007	\$4,551 per month
S.	Jan. 1, 2008 - Dec. 31, 2008	\$4,821 per month
T.	Jan. 1, 2009 - Dec. 31, 2009	\$5,037 per month
U.	Jan. 1, 2010 - Dec. 31, 2010	\$5,269 per month
V.	Jan. 1, 2011 - Dec. 31, 2011	\$5,774 per month
W.	Jan. 1, 2012 - Dec. 31, 2012	\$6,015 per month
X.	Jan. 1, 2013 - Dec. 31, 2013	\$6,291 per month
Y.	Jan. 1, 2014	\$6,229 per month

[1-1-95, 3-30-96, 4-1-97, 4-30-98, 1-1-99, 7-1-00; 8.200.510.13 NMAC - Rn, 8 NMAC 4.MAD.510.3 & A, 1-1-01; A, 1-1-02; A, 1-1-03; A, 1-1-04; A, 1-1-05; A, 1-1-06; A, 1-1-07; A, 1-1-08, A, 1-1-09; A, 1-15-10; A, 1-1-11; A, 1-1-12; A, 1-1-13; A, 2-14-14]

8.200.510.14 RESOURCE AMOUNTS FOR SUPPLEMENTAL SECURITY INCOME (SSI) RELATED

MEDICARE SAVINGS PROGRAMS (QMB, SLIMB/QH AND QD): The following resource standards are inclusive of the \$1,500 per person burial exclusion:

A. individual \$8,580 and

B. couple \$13,620.

[8.200.510.14 NMAC - N, 1-1-01; A, 1-1-02; 8.200.510.14 NMAC - N, 7-15-10; A, 1-1-11; A, 1-1-12; A, 1-1-13]

8.200.510.15 EXCESS HOME EQUITY AMOUNT FOR LONG-TERM CARE SERVICES:

A. Jan. 2014 \$814,000

B. Jan. 2013 \$802,000

C. Jan. 2012 \$786,000

D. Jan. 2011 \$758,000

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E. Jan. 2010 \$750,000
[8.200.510.15 NMAC - N, 1-11-11; A, 1-1-12; A, 1-1-13; A, 2-14-14]

HISTORY OF 8.200.510 NMAC: The material in this part was derived from that previously filed with the Commission of Public Records - State Records Center and Archives:

8 NMAC 4.MAD.500, Eligibility Policies, Income and Resource Standards; 12-30-94.

8 NMAC 4.MAD.500, Eligibility Policies, Income and Resource Standards; 6-20-95.

History of Repealed Material: [RESERVED]