

DONA ANA COUNTY RESOLUTION NO. 2023 -68

**RESOLUTION AMENDING HEALTHCARE ASSISTANCE PROGRAM
CRITERIA AND PROCEDURES**

WHEREAS, Dona Ana County is the responsible agency for ambulance transportation, hospital care, and health care of indigent patients domiciled in Dona Ana County, as determined by resolution of the board of county commissioners, in addition to providing support for the State’s Medicaid Program (NMSA 27-5-2A); and

WHEREAS, the law of the State of New Mexico defines indigent patients as persons who can normally support themselves and their dependents on present income and liquid assets available to them but, taking into consideration this income and those assets and their requirement for other necessities of life for themselves and their dependents, are unable to pay the cost of the ambulance transportation or medical care, or both (NMSA 27-5-4 C); and

WHEREAS, it is in the best interests of Dona Ana County to ensure that moneys dedicated to the health care of the County's indigent residents are used in accordance with state law and criteria established by the Board of County Commissioners for Dona Ana County;

THEREFORE, BE IT RESOLVED that Dona Ana County Resolution #2018-47 is hereby superseded;

IT IS HEREBY RESOLVED that Dona Ana County shall be the payer of last resort. Those individuals eligible for any other health coverage shall not be covered by the county's assistance program for the same type of care: and

IT IS FURTHER RESOLVED that the Board of County Commissioners hereby directs staff to develop policies and procedures consistent with the following:

I. Dona Ana County Healthcare Assistance Program (Indigent) Criteria:

A. Identification: An applicant must provide one of the following forms of photo identification:

1. U.S. Passport;
2. Government Issued ID;
3. School ID;
4. Dependents age 17 and younger, or age 18 and enrolled in high school, may use the parent/guardian declaration of identity in lieu of a photo ID: or



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RESOLUTION
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Deputy: Edward Krmer
Amanda López Askin, County Clerk, Dona Ana, NM

5. Individuals may use the healthcare provider declaration of identity in lieu of a photo ID.

B. Residency: To qualify for indigent care, an applicant shall reside in Dona Ana County. To establish residency, an applicant shall produce at least one of the following documents:

1. Rental, Lease, Dorm, or Residential Agreement;
2. Property Tax Statement;
3. Residential Utility Bill;
4. Affidavit from Community of Hope; or Gospel Rescue Mission
5. Current Government Issued ID such as Driver's License;
6. Bank or Credit Card Statement;
7. Pay Stub;
8. Local Property Tax Statement;
9. Mortgage Statement;
10. Insurance Bill, Card, or Binder.

C. Annual Income: To qualify for indigent care, an applicant (or parent/guardian) shall not have annual household income that is fifty percent (50%) greater than the per capita personal income for New Mexico for the most recent year as published by the U.S. Department of Commerce. To establish annual income, the applicant must produce one of the following:

1. Latest Federal or State Income Tax Return (for the most recent tax return for the immediate preceding tax year);
2. Calculate based on current monthly income only if applicant is not required to file income taxes;
3. Annual Form SSA-1099 of previous year only if applicant is not required to file income taxes.

D. Current Income: To establish current income, an applicant shall produce most recent document(s) of any or all of the following:

1. Pay stub or pay voucher from employer;
2. Self-employment record or CRS Forms;
3. Personal wage record;
4. Workers compensation statement;
5. Short term or long term disability statement;

6. Retirement income statement;
7. SSA/SSI statement
8. Student financial aid statement;
9. Temporary Assistance for Needy Families statement;
10. Unemployment benefits statement; or
11. Child support or alimony checks or statements;
12. Department of Defense income statement.

E. Payer of Last Resort: If it is determined by the contractor that the individual is not eligible for other coverage or; is excluded from the New Mexico Health Insurance Exchange, the County's Healthcare Assistance will be considered the payer of last resort. The contractor must document one of the following circumstances as part of the enrollment process allowing people to qualify for the county's program:

1. Hardship Exemptions;
 - a. Being homeless.
 - b. Having been evicted in the previous six (6) months or were facing eviction or foreclosure.
 - c. Received a shut-off notice from a utility company.
 - d. Experienced domestic violence.
 - e. Experienced the death of a close family member.
 - f. Experienced a fire, flood, or other natural or human-caused disaster that caused substantial damage to your property.
 - g. Filed for bankruptcy in the last six (6) months.
 - h. Had medical expenses they couldn't pay in the last 24 months.
 - i. Experienced unexpected increases in necessary expenses due to caring for an ill, disabled, or aging family member.
2. Other Exemptions; or
 - a. Those for whom the premiums for the lowest-priced coverage would cost more than 8% of household income.
 - b. Those who have been uninsured for less than three (3) months a within year due to changes in coverage status.
 - c. Members of a federally recognized tribe.
 - d. Members of a recognized health-care sharing ministry.
 - e. Members of a recognized religious sect with religious objections to insurance, including Social Security and Medicare.

3. Excluded from Health Exchange or Other Coverage
 - a. People who have not worked (and/or whose spouses have not worked) an adequate number of quarters.
 - b. Legal immigrants who have been in the United States for less than five (5) years.
 - c. Undocumented Immigrants.
4. Exclusions related to immigration status allow people to qualify for the program; however, immigration status will not be documented or retained as part of the enrollment process.

F. False/Incorrect Information/Documentation: If an applicant provides false or incorrect information as to identification/residency/income, the application shall be denied for one (1) year from the date of discovery.

II. Process

- A. The county shall contract with healthcare providers for the delivery of services. Services included as part of the program are: 1) primary care, 2) oral health, 3) behavioral health, 4) end-of-life, 6) physical therapy, and 5) long-COVID treatment.
- B. Healthcare providers with whom the County has contracted for the healthcare assistance program shall use the County's designated enrollment system to enter data indicating the applicant has satisfied the criteria and provided the documentation in I. above.
- C. Once the healthcare provider has entered the data based on the appropriate documentation, the enrollment system will issue an approval letter or denial letter on behalf of the Board and contractor.
- D. Healthcare providers with whom the County has contracted for the healthcare assistance program shall require the following audit analysis:
 1. At least once a fiscal year, the healthcare provider shall contract with a third party, professionally licensed, audit firm to conduct an alternative assessment of a random and statistically valid representative group of applications to verify compliance with the indigent criteria and documentation thereof.
 2. The independent audit firm shall report to the County the findings of the alternative assessment.
 3. If the findings indicate an error/non-compliance rate exceeding 2%, the County shall issue a 30-day cure notice.
 4. Once the 30-day cure notice is issued, the healthcare provider shall have its independent audit firm perform another alternative assessment to report limited assurances that the healthcare provider's error rate is not exceeding 2%.

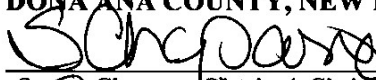
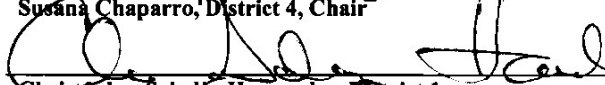
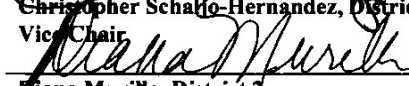
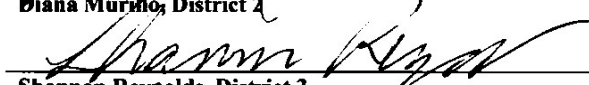
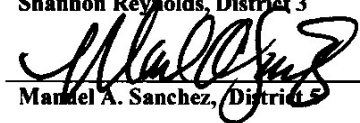
E. The County's Health and Human Services Department shall continue to pay claims from out- of-county hospitals and the associated physician groups; and, air ambulance providers, that provide medically necessary care that is not available through in-county Safety Net Care Pool qualifying hospitals and with whom the County does not have a contract. Those claims that comply with the indigent criteria shall be paid up to a cumulative cap of \$50,000.00 per person, per fiscal year at 36.1% of the current New Mexico Medicaid rate.

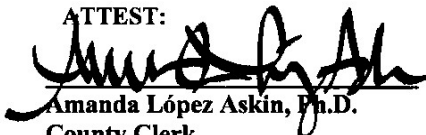
F. The County's Health and Human Services Department shall contract with cancer treatment providers in Dona Ana County to provide treatment for patients who qualify. Those claims that comply with the indigent criteria shall be paid up to a cumulative cap of \$50,000 per person, per fiscal year at the rate defined in the contracts, but not to exceed New Mexico Medicaid rate.

RESOLVED this 22nd day of August 2023.



**BOARD OF COUNTY COMMISSIONERS OF
DONA ANA COUNTY, NEW MEXICO**

	_____	<input checked="" type="radio"/> For/Against
Susana Chaparro, District 4, Chair		
	_____	<input checked="" type="radio"/> For/Against
Christopher Schaffo-Hernandez, District 1, Vice Chair		
	_____	<input checked="" type="radio"/> For/Against
Diana Murillo, District 2		
	_____	<input checked="" type="radio"/> For/Against
Shannon Reynolds, District 3		
	_____	<input checked="" type="radio"/> For/Against
Mandel A. Sanchez, District 5		

ATTEST:

Amanda López Askin, Ph.D.
County Clerk

