

**TITLE 8 SOCIAL SERVICES**  
**CHAPTER 295 MEDICAID ELIGIBILITY - CHILDREN UNDER 19**  
**PART 400 RECIPIENT REQUIREMENTS**

**8.295.400.1 ISSUING AGENCY:** New Mexico Health Care Authority.  
[8.295.400.1 NMAC - Rp, 8.295.400.1 NMAC, 1/1/2014; A,7/1/2024]

**8.295.400.2 SCOPE:** The rule applies to the general public.  
[8.295.400.2 NMAC - Rp, 8.295.400.2 NMAC, 1/1/2014]

**8.295.400.3 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 and XXI of the Social Security Act as amended or by state statute. See Section 27-1-12 et seq. NMSA 1978. Section 9-8-1 et seq. NMSA 1978 establishes the health care authority (HCA) as a single, unified department to administer laws and exercise functions relating to health care facility licensure and health care purchasing and regulation.  
[8.295.400.3 NMAC - Rp, 8.295.400.3 NMAC, 1/1/2014; A,7/1/2024]

**8.295.400.4 DURATION:** Permanent.  
[8.295.400.4 NMAC - Rp, 8.295.400.4 NMAC, 1/1/2014]

**8.295.400.5 EFFECTIVE DATE:** January 1, 2014, unless a later date is cited at the end of a section.  
[8.295.400.5 NMAC - Rp, 8.295.400.5 NMAC, 1/1/2014]

**8.295.400.6 OBJECTIVE:** The objective of this rule is to provide eligibility guidelines when determining eligibility for the medical assistance division (MAD) medicaid program and other health care programs it administers. Processes for establishing and maintaining this category of eligibility are found in the affordable care general provision chapter located at 8.291.400 NMAC through 8.291.430 NMAC.  
[8.295.400.6 NMAC - Rp, 8.295.400.6 NMAC, 1/1/2014]

**8.295.400.7 DEFINITIONS:** Refer to 8.291.400.7 NMAC.  
[8.295.400.7 NMAC - Rp, 8.295.400.7 NMAC, 1/1/2014]

**8.295.400.8 MISSION:** To reduce the impact of poverty on people living in New Mexico by providing support services that help families break the cycle of dependency on public assistance.  
[8.295.400.8 NMAC - Rp, 8.295.400.8 NMAC, 1/1/2014]

**8.295.400.9 WHO CAN BE A RECIPIENT:** To be eligible, an applicant must meet specific medical assistance programs (MAP) requirements:

**A.** an individual under 19 years of age; and

**B.** an individual who meets Affordable Care Act (ACA) eligibility requirements pursuant to 8.291.400 through 2.291.430 NMAC.

[8.295.400.9 NMAC - Rp, 8.295.400.9 NMAC, 1/1/2014; A, 5/1/2015]

**8.295.400.10 BASIS FOR DEFINING THE ASSISTANCE UNIT AND BUDGET GROUP:** To be considered in a child assistance unit, an individual must apply and be determined eligible. Individuals living with the applicant who meet criteria in 8.291.430 NMAC are included in the budget group.  
[8.295.400.10 NMAC - Rp, 8.295.400.10 NMAC, 1/1/2014; A, 5/1/2015]

**8.295.400.11 CHILDRENS HEALTH INSURANCE PROGRAM (CHIP):**

**A.** A budget group that includes the applicant and has countable income between the following federal income poverty limits (FPL) is considered to be eligible for the CHIP:

**(1)** if the applicant in the assistance unit is under the age of six and the assistance unit and budget group's countable income is between two hundred-forty and three hundred percent of FPL for the countable household size; or

**(2)** if the assistance unit consists of the applicant age six or over and the assistance unit's and budget group's countable income is between one hundred-ninety and two hundred-forty percent of FPL for the

countable household size.

**B.** In order to be eligible for CHIP, the applicant in the assistance unit cannot have other qualified health plan (QHP) coverage. Individuals who have voluntarily dropped a QHP will be eligible for inclusion in the assistance unit in the month the individual no longer has a QHP.

[8.295.400.11 NMAC - Rp, 8.295.400.11 NMAC, 1/1/2014; A, 5/1/2015]

**HISTORY OF 8.295.400 NMAC:**

History of Repealed Material:

8.295.400 NMAC, Recipient Requirements, filed 9/17/2013 - Duration expired 12/31/2013.