

***Federal Fiscal Year 2001
FRAMEWORK FOR ANNUAL REPORT
OF STATE CHILDREN'S HEALTH INSURANCE PLANS
UNDER TITLE XXI OF THE SOCIAL SECURITY ACT***

Preamble

Section 2108(a) of the Act provides that the State must assess the operation of the State child health plan in each fiscal year, and report to the Secretary, by January 1 following the end of the fiscal year, on the results of the assessment. In addition, this section of the Act provides that the State must assess the progress made in reducing the number of uncovered, low-income children.

To assist states in complying with the statute, the National Academy for State Health Policy (NASHP), with funding from the David and Lucile Packard Foundation, has coordinated an effort with states to develop a framework for the Title XXI annual reports.

The framework is designed to:

- ❖ Recognize the *diversity* of State approaches to SCHIP and allow States *flexibility* to highlight key accomplishments and progress of their SCHIP programs, **AND**
- ❖ Provide *consistency* across States in the structure, content, and format of the report, **AND**
- ❖ Build on data *already collected* by CMS quarterly enrollment and expenditure reports, **AND**
- ❖ Enhance *accessibility* of information to stakeholders on the achievements under Title XXI.

SECTION 1. DESCRIPTION OF PROGRAM CHANGES AND PROGRESS

This sections has been designed to allow you to report on your SCHIP program changes and progress during Federal fiscal year 2001 (September 30, 2000 to October 1, 2001).

1.1 Please explain changes your State has made in your SCHIP program since September 30, 2000 in the following areas and explain the reason(s) the changes were implemented.

Note: If no new policies or procedures have been implemented since September 30, 2000, please enter "NC" for no change. If you explored the possibility of changing/implementing a new or different policy or procedure but did not, please explain the reason(s) for that decision as well.

- A. Program eligibility - Effective July 1, 2001, children who already have health insurance, or children whose health insurance was voluntarily dropped are eligible for SCHIP coverage. The 12-month waiting period for voluntarily dropping health insurance coverage no longer applies. This change in eligibility was made after the Health Care Financing Administration/Center for Medicare and Medicaid Services adopted final regulations directing Medicaid expansion SCHIP states to adhere to Title XIX of the Social Security Act (State Children's Health Insurance Program Final Rule, HCFA – 2006 – FC).
- B. Enrollment process – Effective July 1, 2001, face-to-face interviews were no longer required, and applications with verification of income could be mailed in.
- C. Presumptive eligibility - *NC*
- D. Continuous eligibility - *NC*
- E. Outreach/marketing campaigns - *NC*
- F. Eligibility determination process - Effective July 1, 2001, face-to-face interviews were no longer required, and applications with verification of income could be mailed in.
- G. Eligibility redetermination process - Effective July 1, 2001, face-to-face interviews were no longer required, and applications with verification of income could be mailed in.
- H. Benefit structure - *NC*
- I. Cost-sharing policies - *NC*
- J. Crowd-out policies – Effective July 1, 2001, children who already have health insurance, or children whose health insurance was voluntarily dropped are eligible for SCHIP coverage, and no longer have a 12-month waiting period.
- K. Delivery system - *NC*

- L. Coordination with other programs (especially private insurance and Medicaid) – Effective July 1, 2001, children who already have health insurance, or children whose health insurance was voluntarily dropped are eligible for SCHIP coverage, and no longer have a 12-month waiting period.
- M. Screen and enroll process - Effective July 1, 2001, face-to-face interviews were no longer required, and applications with verification of income could be mailed in.
- N. Application – A new simplified application was designed and introduced to combine both the regular application and Presumptive Eligibility on the same form. Effective July 1, 2001, face-to-face interviews were no longer required, and applications with verification of income could be mailed in.
- O. Other

1.2 Please report how much progress has been made during FFY 2001 in reducing the number of uncovered low-income children.

- A. Please report the changes that have occurred to the number or rate of uninsured, low-income children in your State during FFY 2001. Describe the data source and method used to derive this information.
- B. How many children have been enrolled in Medicaid as a result of SCHIP outreach activities and enrollment simplification? Describe the data source and method used to derive this information.
- C. Please present any other evidence of progress toward reducing the number of uninsured, low-income children in your State.
- D. Has your State changed its baseline of uncovered, low-income children from the number reported in your March 2000 Evaluation?

No, skip to 1.3

Yes, what is the new baseline?

What are the data source(s) and methodology used to make this estimate?

What was the justification for adopting a different methodology?

What is the State's assessment of the reliability of the estimate? What are the limitations of the data or estimation methodology? (Please provide a numerical range or confidence intervals if available.)

Had your state not changed its baseline, how much progress would have been made in reducing the number of low-income, uninsured children?

1.3 Complete Table 1.3 to show what progress has been made during FFY 2001 toward achieving your State’s strategic objectives and performance goals (as specified in your State Plan).

In Table 1.3, summarize your State’s strategic objectives, performance goals, performance measures and progress towards meeting goals, as specified in your SCHIP State Plan. Be as specific and detailed as possible. Use additional pages as necessary. The table should be completed as follows:

- Column 1: List your State’s strategic objectives for your SCHIP program, as specified in your State Plan.
- Column 2: List the performance goals for each strategic objective.
- Column 3: For each performance goal, indicate how performance is being measured, and progress towards meeting the goal. Specify data sources, methodology, and specific measurement approaches (e.g., numerator and denominator). Please attach additional narrative if necessary.

Note: If no new data are available or no new studies have been conducted since what was reported in the March 2000 Evaluation, please complete columns 1 and 2 and enter “NC” (for no change) in column 3.

Table 1.3

(1) Strategic Objectives (as specified in Title XXI State Plan and listed in Your March Evaluation)	(2) Performance Goals for each Strategic Objective	(3) Performance Measures and Progress (Specify Data Sources, methodology, time period, etc.)
Objectives related to Reducing the Number of Uninsured Children		
	The estimated baseline for the number of children not insured is 100,000.	Data Sources: Bureau of the Census Current Population Survey 1997 Methodology: Progress Summary: Since January 1998, an estimated 54,402 additional children have been covered. Based on estimates made in 1997 on the number of uninsured low-income children in New Mexico, the number of additional children added to the Medicaid and SCHIP rolls represents over 54% of the estimated 100,000 low-income uninsured children (This figure represents <u>all</u> Medicaid Categories and SCHIP).

(1) Strategic Objectives (as specified in Title XXI State Plan and listed in Your March Evaluation)	(2) Performance Goals for each Strategic Objective	(3) Performance Measures and Progress (Specify Data Sources, methodology, time period, etc.)
Objectives Related to SCHIP Enrollment		
SCHIP Enrollment Objectives	Enroll 5,500 – the number identified as being the number of children uninsured between 185% and 235% of Federal Poverty Level.	Data Sources: 1997 Bureau of the Census Current Population Survey. Methodology: Progress Summary: New Mexico surpassed its goal in October of 2000, the first month of the reporting period. The number of children enrolled at the close of this fiscal year is 7,734.
Objectives Related to Increasing Medicaid Enrollment		
		Data Sources: Methodology: Progress Summary:
Objectives Related to Increasing Access to Care (Usual Source of Care, Unmet Need)		
Number of Uninsured Children	1997 Bureau of the Census Current Population Survey estimates that New Mexico had 100,000 low-income uninsured children.	Data Sources: 1997 Bureau of the Census Current Population Survey. Methodology: Progress Summary: Since January 1998, an estimated 54,402 additional children have been covered. This figure represents over 54% of the estimated 100,000 low-income uninsured children (This figure represents <u>all</u> Medicaid Categories and SCHIP).
Objectives Related to Use of Preventative Care (Immunizations, Well Child Care)		
		Data Sources: Methodology: Progress Summary:
Other Objectives		
		Data Sources: Methodology: Progress Summary:

SECTION 2. AREAS OF SPECIAL INTEREST

This section has been designed to allow you to address topics of current interest to stakeholders, including; states, federal officials, and child advocates.

2.1 Family coverage:

- A. If your State offers family coverage, please provide a brief narrative about requirements for participation in this program and how this program is coordinated with other program(s). Include in the narrative information about eligibility, enrollment and redetermination, cost sharing and crowd-out. [N/A](#)
- B. How many children and adults were ever enrolled in your SCHIP family coverage program during FFY 2001 (10/1/00 - 9/30/01)?
_____ Number of adults
[13,422](#) Number of children
- C. How do you monitor cost-effectiveness of family coverage? [N/A](#)

2.2 Employer-sponsored insurance buy-in:

- A. If your State has a buy-in program, please provide a brief narrative about requirements for participation in this program and how this program is coordinated with other SCHIP program(s). [N/A](#)
- B. How many children and adults were ever enrolled in your SCHIP ESI buy-in program during FFY 2001? [N/A](#)
_____ Number of adults
_____ Number of children

2.3 Crowd-out:

- A. How do you define crowd-out in your SCHIP program? [New Mexico defines crowd-out as the voluntary dropping of a child's health insurance coverage in the twelve months preceding an application for SCHIP. It is important to note that New Mexico is a Medicaid expansion SCHIP state. According to interim rules adopted by HCFA/CMS in January of 2001, and final rules issued June 25, 2001, states operating a Medicaid expansion SCHIP must adhere to all Title XIX provisions. To comply with these rules, New Mexico removed the crowd-out provisions from its policies effective July 1, 2001.](#)
- B. How do you monitor and measure whether crowd-out is occurring? [We continue to track at application those families whose children are insured, or have dropped insurance coverage, to determine if crowd-out is occurring.](#)
- C. What have been the results of your analyses? Please summarize and attach any available reports or other documentation. [2% of the new enrollees \(0.27% of all enrollees\) between July 1, 2001 \(effective date of the repeal of anti-crowd-out measures\) and September 30, 2001 had dropped health insurance coverage. An additional 229 new enrollees had insurance coverage at the time of their enrollment in SCHIP.](#)

- D. Which anti-crowd-out policies have been most effective in discouraging the substitution of public coverage for private coverage in your SCHIP program? Describe the data source and method used to derive this information. During the period when New Mexico had anti-crowd-out provisions in its SCHIP policies, no one who had insurance was permitted to enroll. Additionally, those whose insurance was voluntarily dropped had a twelve-month waiting period.

New Mexico plans on submitting an 1115 waiver to the Centers for Medicare and Medicaid Services (CMS) to reinstate crowd-out provisions. New Mexico's proposal will render ineligible for SCHIP any individual who possesses health insurance, and will require a six-month waiting period (as opposed to the original twelve months) for those whose insurance was voluntarily dropped.

2.4 Outreach:

- A. What activities have you found most effective in reaching low-income, uninsured children? How have you measured effectiveness? Based on calls to the statewide toll free number, television advertising generates the major share of the Medicaid for Children/SCHIP related calls, followed by newspaper advertising in communities around the state.
- B. Have any of the outreach activities been more successful in reaching certain populations (e.g., minorities, immigrants, and children living in rural areas)? How have you measured effectiveness? New Mexico has not specifically tracked effectiveness of specific outreach methods for certain populations.
- C. Which methods best reached which populations? How have you measured effectiveness? N/A

2.5 Retention:

- A. What steps are your State taking to ensure that eligible children stay enrolled in Medicaid and SCHIP?
By no longer requiring face to face interviews for re-enrolling, households can maintain eligibility without ever having to set foot in a "welfare office".
- B. What special measures are being taken to reenroll children in SCHIP who disenroll, but are still eligible?
- Follow-up by caseworkers/outreach workers
 - Renewal reminder notices to all families
 - Targeted mailing to selected populations, specify - During the previous Federal Fiscal Year a special mailing to lower income households based on a match with tax records was conducted. Though the mailer was not repeated this year, we continue to receive inquiries into Children's Medicaid and SCHIP from the letter (according to the Intellicenter Reports).
 - Information campaigns
 - Simplification of re-enrollment process, please describe – Face-to-face interviews are no longer required, mail in applications are now available. Shorter application forms are now being used as well.
 - Surveys or focus groups with disenrollees to learn more about reasons for disenrollment, please describe Covering Kids, a non-profit advocacy group, is conducting focus group

studies among disenrollees to identify barriers to re-enrollment and reasons for not re-enrolling. They will make the results available to the Department upon completion of the study. The study will offer an independent evaluation of barriers to re-enrollment.

X Other, please explain Health Fairs at local community centers and community events. Presumptive Eligibility and Medicaid On-Site Application Assistance (PE/MOSAA). Reenrollment through the PE/MOSAA process is permitted. Thus, families never have to set foot in a state office.

- C. Are the same measures being used in Medicaid as well? If not, please describe the differences. The same measures are applied to Medicaid as well as SCHIP.
- D. Which measures have you found to be most effective at ensuring that eligible children stay enrolled? No study has been undertaken to determine which of the six methods is most effective, and more than one method is employed at any given time (for example, simplification of the application.). Therefore no data is available, and due to no real way of separating the methods – it would be nearly impossible to accurately determine which singular method is most effective in retaining enrollees.
- E. What do you know about insurance coverage of those who disenroll or do not reenroll in SCHIP (e.g., how many obtain other public or private coverage, how many remain uninsured?) Describe the data source and method used to derive this information. No survey has been conducted.

2.6 Coordination between SCHIP and Medicaid:

- A. Do you use common application and redetermination procedures (e.g., the same verification and interview requirements) for Medicaid and SCHIP? Please explain. Medicaid and SCHIP use common application verification methodologies.
- B. Explain how children are transferred between Medicaid and SCHIP when a child's eligibility status changes. The new poverty figures become effective every April 1. Those children enrolled in SCHIP whose household incomes fall below the Medicaid for Children figure after the revision of the Federal Poverty Guidelines are moved from SCHIP into Medicaid for Children. Children in the Medicaid for Children category remain in that category under the 12 months continuous eligibility policy. At reapplication time, children may be moved into the SCHIP category if the household income is at the SCHIP level.
- C. Are the same delivery systems (including provider networks) used in Medicaid and SCHIP? Please explain. Yes. New Mexico SCHIP is a Medicaid expansion. Thus all Medicaid providers and Managed Care Organizations are SCHIP providers as well as Medicaid providers. The only difference between the two programs is that SCHIP requires small co-payments for services, which New Mexico is able to require via an 1115 waiver.

2.7 Cost Sharing:

- A. Has your State undertaken any assessment of the effects of premiums/enrollment fees on participation in SCHIP? If so, what have you found? **New Mexico is conducting a review to determine the effects of cost sharing in accessing care. New Mexico's 1115 waiver hypothesizes that the cost sharing will not hinder access to care. Data for asthma and otitis media, two common childhood ailments, will be analyzed, and SCHIP and Medicaid data will be compared. Because the only differences between SCHIP and Medicaid are the co-payments, this study should be helpful in determining the effects of cost sharing on utilization.**
- B. Has your State undertaken any assessment of the effects of cost-sharing on utilization of health service under SCHIP? If so, what have you found? **Yes. The assessment is currently underway. Results will be reported upon completion of the study.**

2.8 Assessment and Monitoring of Quality of Care:

- A. What information is currently available on the quality of care received by SCHIP enrollees? Please summarize results. **SCHIP enrollees receive care from the same networks as Medicaid enrollees. Based on the lack of customer complaints, as well as the fact that the care is from the same networks, it is fair to hypothesize that the quality of care is at least as good as Medicaid.**
- B. What processes are you using to monitor and assess quality of care received by SCHIP enrollees, particularly with respect to well-baby care, well-child care, immunizations, mental health, substance abuse counseling and treatment and dental and vision care? **Encounter data is reported to the Medicaid Quality Assurance Bureau. The Quality Assurance Bureau has oversight responsibility for Quality Assurance in all Medicaid Categories. Because SCHIP in New Mexico is a Medicaid Expansion, Quality Assurance for SCHIP is the same as other Medicaid Categories. Clients have the same fair hearings rights and mechanisms available for SCHIP as for Medicaid. Additionally, as a condition of renewal of New Mexico's 1915 waiver to operate a Medicaid Managed Care program (which includes SCHIP), the Department has hired a Behavioral Health Ombudsman to resolve Behavioral Health issues.**
- C. What plans does your SCHIP program have for future monitoring/assessment of quality of care received by SCHIP enrollees? When will data be available? **At this point, no special, SCHIP specific, quality assurance assessments are planned, and SCHIP will continue to undergo the same quality assurance oversight as Medicaid.**

SECTION 3. SUCCESSES AND BARRIERS

This section has been designed to allow you to report on successes in program design, planning, and implementation of your State plan, to identify barriers to program development and implementation, and to describe your approach to overcoming these barriers.

3.1 Please highlight successes and barriers you encountered during FFY 2001 in the following areas. Please report the approaches used to overcome barriers. Be as detailed and specific as possible.

Note: If there is nothing to highlight as a success or barrier, Please enter "NA" for not applicable.

- A. Eligibility – The most significant change in eligibility was removing the anti-crowd out provisions for New Mexico SCHIP. Based on preliminary results, it appears there is no significant substitution of private coverage with SCHIP.
- B. Outreach – Overall, the outreach efforts have been highly successful. Major increases in both Medicaid and SCHIP enrollments tend to correlate with outreach efforts. Television advertising continues to generate the most inquiries into the call center.
- C. Enrollment – New Mexico exceeded its enrollment goal at the beginning of the fiscal year. Except for the month of April, enrollment has steadily increased. In April, a sharp drop in enrollment triggered concern. Further investigation revealed that the reduction in SCHIP enrollment coincided with a sharp increase in Medicaid for Children enrollment. New poverty figures go into effect each April 1. It was hypothesized that the poverty level revisions resulted in a number of children enrolled in SCHIP becoming eligible for Medicaid as the dollar amount for the income ceiling for Medicaid increased. Further research indicated that as the poverty figures were revised, the children were indeed moved from SCHIP to Medicaid. Systems contractors were also consulted, and they indicated that the eligibility programming was in place to move the children into Medicaid as the poverty figures were adjusted.
- D. Retention/disenrollment – N/A
- E. Benefit structure – N/A
- F. Cost-sharing – N/A
- G. Delivery system – N/A
- H. Coordination with other programs – N/A
- I. Crowd-out – HCFA/CMS final rules issued July 25, 2001 (HCFA-2006-F & HCFA-2006-ICF) contain provisions that require states operating a Medicaid expansion to adhere to all provisions of Title XIX of the Social Security Act. New Mexico implemented state policies July 1, 2001 to remove the crowd-out provisions. New Mexico is, however,

reviewing options to reinstate the crowd-out measures and is drafting a waiver proposal from to reinstate the measures.

J. Other

SECTION 4: PROGRAM FINANCING

This section has been designed to collect program costs and anticipated expenditures.

- 4.1 **Please complete Table 4.1 to provide your budget for FFY 2001, your current fiscal year budget, and FFY 2002-projected budget. Please describe in narrative any details of your planned use of funds.**

Note: Federal Fiscal Year 2000 starts 10/1/99 and ends 9/30/00).

	Federal Fiscal Year 2001 costs	Federal Fiscal Year 2002	Federal Fiscal Year 2003
Benefit Costs			
Insurance payments			
Managed care			
per member/per month rate X # of eligibles			
Fee for Service			
Total Benefit Costs	\$8,299,410	\$17,843,772	20,716,560.00
(Offsetting beneficiary cost sharing payments)	0.00		
Net Benefit Costs	8,299,410	17,843,772	20,716,560
Administration Costs			
Personnel	158,600.00	158,600.00	158,600.00
General administration			
Contractors/Brokers (e.g., enrollment contractors)	211,500.00	211,500.00	211,500.00
Claims Processing			
Outreach/marketing costs	105,800.00	105,800.00	105,800.00
Other	52,900.00	52,900.00	52,900.00
Total Administration Costs	528,800.00	528,800.00	528,800.00
10% Administrative Cost Ceiling	922,156.67	1,982,641.33	2,301,840.00
Federal Share (multiplied by enhanced FMAP rate)	7,150,850.10	14,881,783.32	17,208,741.60
State Share	1,677,359.90	3,490,788.68	4,036,618.40
TOTAL PROGRAM COSTS	8,828,210.00	18,372,572.00	21,245,360.00

4.2 Please identify the total State expenditures for family coverage during Federal fiscal year 2001. N/A

4.3 What were the non-Federal sources of funds spent on your SCHIP program during FFY 2001?

- State appropriations
- County/local funds
- Employer contributions
- Foundation grants
- Private donations (such as United Way, sponsorship)
- Other (specify)

A. Do you anticipate any changes in the sources of the non-Federal share of plan expenditures. No changes anticipated.

SECTION 5: SCHIP PROGRAM AT-A-GLANCE

This section has been designed to give the reader of your annual report some context and a quick glimpse of your SCHIP program.

5.1 To provide a summary at-a-glance of your SCHIP program characteristics, please provide the following information. If you do not have a particular policy in-place and would like to comment why, please do. (Please report on initial application process/rules)

Table 5.1	Medicaid Expansion SCHIP program	Separate SCHIP program
Program Name	State Children's Health Insurance Program (SCHIP)	
Provides presumptive eligibility for children	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, for whom and how long? For children under 19 up to the end of the month following the month of application (potentially 60 days)	<input type="checkbox"/> No <input type="checkbox"/> Yes, for whom and how long?
Provides retroactive eligibility	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, for whom and how long? Up to 3 months prior to date of application.	<input type="checkbox"/> No <input type="checkbox"/> Yes, for whom and how long?
Makes eligibility determination	<input type="checkbox"/> State Medicaid eligibility staff <input type="checkbox"/> Contractor <input type="checkbox"/> Community-based organizations <input type="checkbox"/> Insurance agents <input type="checkbox"/> MCO staff <input checked="" type="checkbox"/> Other (specify) Income Support Division of the State Human Services Department	<input type="checkbox"/> State Medicaid eligibility staff <input type="checkbox"/> Contractor <input type="checkbox"/> Community-based organizations <input type="checkbox"/> Insurance agents <input type="checkbox"/> MCO staff <input type="checkbox"/> Other (specify)
Average length of stay on program	Specify months	Specify months
Has joint application for Medicaid and SCHIP	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Has a mail-in application	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Can apply for program over phone	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Can apply for program over internet	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Requires face-to-face interview during initial application	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Requires child to be uninsured for a minimum amount of time prior to enrollment	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, specify number of months What exemptions do you provide?	<input type="checkbox"/> No <input type="checkbox"/> Yes, specify number of months What exemptions do you provide?

Table 5.1	Medicaid Expansion SCHIP program	Separate SCHIP program
Provides period of continuous coverage <u>regardless of income changes</u>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes, specify number of months Explain circumstances when a child would lose eligibility during the time period – A child receives continuous eligibility for 12 months. A child, however, could be placed in regular Medicaid if the income in his/her household goes down, or if the annual revision of the poverty figures results in a child becoming eligible for regular Medicaid. A child only loses coverage if he/she ages out of the program or moves out of the state.	<input type="checkbox"/> No <input type="checkbox"/> Yes, specify number of months Explain circumstances when a child would lose eligibility during the time period
Imposes premiums or enrollment fees	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, how much? Who Can Pay? <input type="checkbox"/> Employer <input type="checkbox"/> Family <input type="checkbox"/> Absent parent <input type="checkbox"/> Private donations/sponsorship <input type="checkbox"/> Other (specify)	<input type="checkbox"/> No <input type="checkbox"/> Yes, how much? Who Can Pay? <input type="checkbox"/> Employer <input type="checkbox"/> Family <input type="checkbox"/> Absent parent <input type="checkbox"/> Private donations/sponsorship <input type="checkbox"/> Other (specify)
Imposes copayments or coinsurance	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
Provides preprinted redetermination process	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, we send out form to family with their information precompleted and: <input type="checkbox"/> ask for a signed confirmation that information is still correct <input type="checkbox"/> do not request response unless income or other circumstances have changed	<input type="checkbox"/> No <input type="checkbox"/> Yes, we send out form to family with their information and: <input type="checkbox"/> ask for a signed confirmation that information is still correct <input type="checkbox"/> do not request response unless income or other circumstances have changed

5.2 Please explain how the redetermination process differs from the initial application process.
Redetermination does not differ from initial application.

SECTION 6: INCOME ELIGIBILITY

This section is designed to capture income eligibility information for your SCHIP program.

- 6.1 As of September 30, 2001, what was the income standard or threshold, as a percentage of the Federal poverty level, for countable income for each group?**
If the threshold varies by the child's age (or date of birth), then report each threshold for each age group separately. Please report the threshold after application of income disregards.

**Title XIX Child Poverty-related Groups or
Section 1931-whichever category is higher**

185 % of FPL for children under age 19
____ % of FPL for children aged _____
____ % of FPL for children aged _____

Medicaid SCHIP Expansion

235 % of FPL for children aged under 19
____ % of FPL for children aged _____
____ % of FPL for children aged _____

Separate SCHIP Program

____ % of FPL for children aged _____
____ % of FPL for children aged _____
____ % of FPL for children aged _____

- 6.2 As of September 30, 2001, what types and amounts of disregards and deductions does each program use to arrive at total countable income?** *Please indicate the amount of disregard or deduction used when determining eligibility for each program. If not applicable, enter "NA".*

Do rules differ for applicants and recipients (or between initial enrollment and redetermination)

____ Yes X No

If yes, please report rules for applicants (initial enrollment).

Table 6.2			
	Title XIX Child Poverty-related Groups	Medicaid SCHIP Expansion	Separate SCHIP Program
Earnings	\$90	\$ 90	\$
Self-employment expenses	\$ Schedule C and food stamp regulations	\$ Schedule C and food stamp regulations	\$
Alimony payments Received	\$	\$	\$
Paid	\$	\$	\$
Child support payments Received	\$50	\$ 50	\$
Paid	\$	\$ 0	\$
Child care expenses	\$200 for children under 2; \$175 for children 2 or older	\$ 200 for children under 2; \$175 for children 2 or older	\$
Medical care expenses	\$	\$	\$
Gifts	\$	\$	\$
Other types of disregards/deductions (specify)	\$	\$	\$

6.3 For each program, do you use an asset test?

Title XIX Poverty-related Groups

No Yes, specify countable or allowable level of asset test _____

Medicaid SCHIP Expansion program

No Yes, specify countable or allowable level of asset test _____

Separate SCHIP program N/A

No Yes, specify countable or allowable level of asset test _____

Other SCHIP program _____ N/A

No Yes, specify countable or allowable level of asset test _____

6.4 Have any of the eligibility rules changed since September 30, 2000?

Yes No Effective July 1, 2001, New Mexico removed crowd-out provisions per HCFA-2006-IFC which directs that States operating a Medicaid expansion SCHIP must adhere to Title XIX.

SECTION 7: FUTURE PROGRAM CHANGES

This section has been designed to allow you to share recent or anticipated changes in your SCHIP program.

7.1 What changes have you made or are planning to make in your SCHIP program during FFY 2001(10/1/00 through 9/30/01)? Please comment on why the changes are planned.

- A. Family coverage
- B. Employer sponsored insurance buy-in
- C. 1115 waiver - On December 1, 2000, New Mexico submitted a proposal for an 1115 waiver to allow the use of SCHIP funds to cover wrap-around services. These services cover home visiting for newborns, and behavioral health respite care. New Mexico sought to use SCHIP funds to cover these services for children in Medicaid as well as children in SCHIP. New Mexico hypothesizes that these additional health initiatives will result in healthier children in New Mexico. The disposition of the waiver proposal is pending.

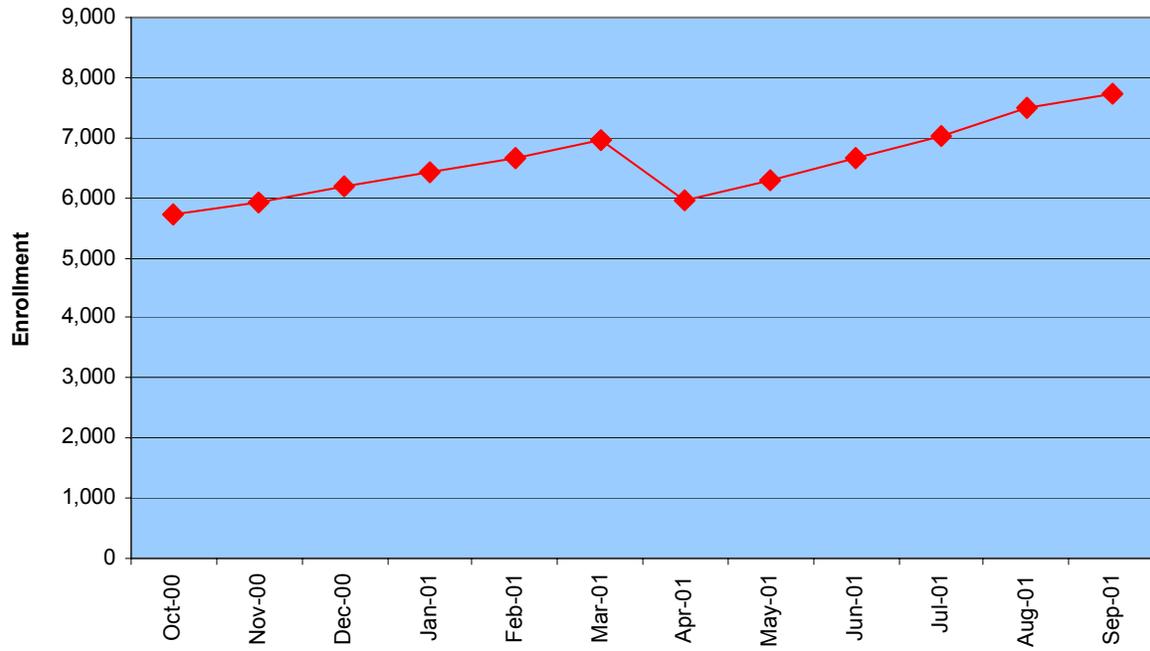
New Mexico intends to submit an 1115 waiver to reinstate anti-crowd-out provisions. New Mexico has the highest poverty rate in the United States (Census Bureau, <http://www.census.gov/hhes/poverty/poverty99/povstate99.html>). A substantial number of employer insured people fall between 185% and 235% of Federal Poverty Level, which is the SCHIP income standard in New Mexico. New Mexico does not wish to pursue a policy that encourages people to voluntarily drop health insurance coverage for their children. Therefore, New Mexico intends to pursue this waiver for its Medicaid expansion SCHIP.

- D. Eligibility including presumptive and continuous eligibility – Effective July 1, 2001, New Mexico, in compliance with final rule HCFA-2006-FC, removed the 12-month waiting period for those families voluntarily dropping health insurance coverage. Additionally, those children with health insurance were permitted to enroll in SCHIP, if they met all other eligibility requirements.
- E. Outreach
- F. Enrollment/redetermination process
- G. Contracting
- H. Other – On July 1, 2001, the New Mexico Medical Assistance Division made changes in issuance of Medicaid cards, switching from a paper card which was mailed to the household each month, to the single issuance of a “swipe card” for each individual. Those on Presumptive Eligibility also receive a swipe card.

Appendix A.

SCHIP Statewide Enrollment Trends

SCHIP Statewide Enrollment Trends



	Oct-00	Nov-00	Dec-00	Jan-01	Feb-01	Mar-01	Apr-01	May-01	Jun-01	Jul-01	Aug-01	Sep-01
Series1	5,705	5,925	6,175	6,425	6,669	6,948	5,971	6,295	6,646	7,026	7,507	7,734

MONTH

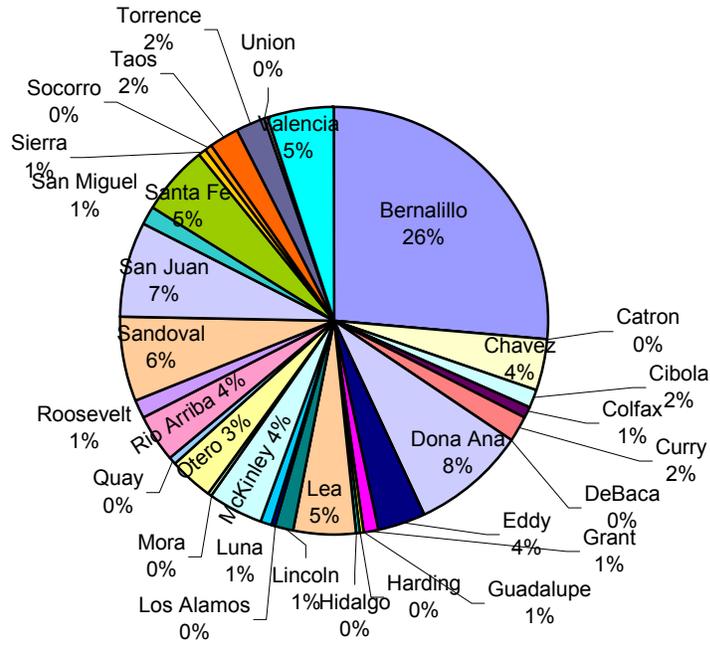
Appendix B.

SCHIP Enrollment: Individual County Trends

Appendix C

SCHIP Enrollment Distribution By County

SCHIP Enrollment Distribution by County



Appendix D

Call Center Statistics

Call Center Report

October 01-31 2000	10/02/00- 10/06/00	10/10/00- 10/13/00	10/16/00- 10/20/00	10/23/00- 10/31/00	Monthly Totals/Avg.
Total Calls Received	2,502	1,645	1,776	2,458	8,381
Total Calls Answered	2,397	1,599	1,707	2,409	8,112
Total Calls Abandoned	92	37	57	46	232
% of Received Calls Answered	95.8	97.2	96.1	98	96.8
% of Received Calls Abandoned	3.7	2.2	3.2	1.9	2.8
Avg. Time On Answered Calls (min/sec)	1:48	1:37	1:53	1:50	1:47
Avg. Wait On Abandoned Calls (min/sec)	0:42	0:56	0:53	0:30	0:45
Avg. Speed of Answer (min/sec)	0:15	0:12	0:14	0:07	0:12

November 01-30 2000	11/01/00- 11/09/00	11/13/00- 11/17/00	11/20/00- 11/22/00	11/27/00- 11/30/00	Monthly Totals/Avg.
Total Calls Received	2,834	1,928	930	1,476	7,168
Total Calls Answered	2,782	1,888	925	1,460	7,055
Total Calls Abandoned	50	35	5	16	106
% of Received Calls Answered	98.2	97.9	99.5	98.9	98.5
% of Received Calls Abandoned	1.8	1.8	0.5	1.1	1.5
Avg. Time On Answered Calls (min/sec)	1:52	1:53	1:48	1:42	1:49
Avg. Wait On Abandoned Calls (min/sec)	0:30	0:25	0:28	0:17	0:26
Avg. Speed of Answer (min/sec)	0:08	0:10	0:06	0:06	0:08

December 01-31 2000	12/01/00- 12/08/00	12/11/00- 12/15/00	12/18/00- 12/22/00	12/27/00- 12/29/00	Monthly Totals/Avg.
Total Calls Received	2,262	1,550	1,076	814	5,702
Total Calls Answered	2,216	1,523	1,056	799	5,594
Total Calls Abandoned	42	23	18	15	98
% of Received Calls Answered	98	98.3	98.1	98.2	98.3
% of Received Calls Abandoned	1.9	1.5	1.7	1.8	1.7
Avg. Time On Answered Calls (min/sec)	1:51	1:41	1:42	1:41	1:44
Avg. Wait On Abandoned Calls (min/sec)	0:30	0:24	0:36	0:24	0:29
Avg. Speed of Answer (min/sec)	0:08	0:07	0:07	0:09	0:08

January 01-31 2001	01/02/01- 01/05/01	01/08/01- 01/12/01	01/16/01- 01/19/01	01/22/01- 01/31/01	Monthly Totals/Avg.
Total Calls Received	2,072	2,610	2,520	3,910	11,112
Total Calls Answered	2,018	2,545	2,417	3,815	10,795
Total Calls Abandoned	54	65	103	95	317
% of Received Calls Answered	97.4	97.5	95.7	97.6	97.1
% of Received Calls Abandoned	2.6	2.5	4.1	2.4	2.9
Avg. Time on Answered Calls (min/sec)	1:44	1:44	1:40	1:43	1:43
Avg. Wait on Abandoned Calls (min/sec)	0:35	0:36	0:40	0:35	0:37
Avg. Speed of Answer (min/sec)	0:12	0:11	0:15	0:09	0:12

February 01-28 2001	02/01/01- 02/09/01	02/12/01- 02/16/01	02/19/01- 02/23/01	02/26/01- 02/28/01	Monthly Totals/Avg.
Total Calls Received	3,343	1,958	1,774	1,299	8,374
Total Calls Answered	3,260	1,921	1,746	1,267	8,194

Total Calls Abandoned	83	37	28	32	180
% of Received Calls Answered	97.5	98.1	98.4	97.5	97.9
% of Received Calls Abandoned	2.5	1.9	1.6	2.5	2.1
Avg. Time on Answered Calls (min/sec)	1:47	1:45	1:43	1:46	1:46
Avg. Wait on Abandoned Calls (min/sec)	0:30	0:42	0:22	0:25	0:31
Avg. Speed of Answer (min/sec)	0:10	0:09	0:08	0:10	0:10

March 01-31 2001	03/01/01-03/09/01	03/12/01-03/16/01	03/19/01-03/23/01	03/26/01-03/30/01	Monthly Totals/Avg.
Total Calls Received	3,599	2,736	2,475	2,400	11,210
Total Calls Answered	3,518	2,661	2,424	2,328	10,931
Total Calls Abandoned	81	75	51	72	279
% of Received Calls Answered	97.8	97.3	97.9	96.9	97.4
% of Received Calls Abandoned	2.2	2.7	2.1	3.1	2.6
Avg. Time on Answered Calls (min/sec)	1:45	1:43	1:37	1:40	1:41
Avg. Wait on Abandoned Calls (min/sec)	0:42	0:39	0:34	0:25	0:35
Avg. Speed of Answer (min/sec)	0:10	0:10	0:09	0:10	0:10

April 01-30 2001	04/02/01-04/06/01	04/09/01-04/13/01	04/16/01-04/20/01	04/23/01-04/30/01	Monthly Totals/Avg.
Total Calls Received	2,736	2,221	2,150	2,917	10,024
Total Calls Answered	2,696	2,170	2,106	2,842	9,814
Total Calls Abandoned	40	51	44	75	210
% of Received Calls Answered	98.5	97.7	98.0	97.4	97.9
% of Received Calls Abandoned	1.5	2.3	2.0	2.6	2.1
Avg. Time on Answered Calls (min/sec)	1:35	1:35	1:34	1:34	1:35
Avg. Wait on Abandoned Calls (min/sec)	0:24	0:28	0:24	0:21	0:24
Avg. Speed of Answer (min/sec)	0:08	0:09	0:10	0:09	0:09

May 01-31 2001	05/01/01-05/04/01	05/07/01-05/11/01	05/14/01-05/18/01	05/21/01-05/31/01	Monthly Totals/Avg.
Total Calls Received	2,151	2,292	1,985	3,139	9,567
Total Calls Answered	2,093	2,253	1,957	3,087	9,390
Total Calls Abandoned	58	39	28	52	177
% of Received Calls Answered	97.3	98.3	98.6	98.3	98.2
% of Received Calls Abandoned	2.7	1.7	1.4	1.7	1.8
Avg. Time on Answered Calls (min/sec)	1:37	1:35	1:37	1:40	1:37
Avg. Wait on Abandoned Calls (min/sec)	0:34	0:24	0:31	0:28	0:29
Avg. Speed of Answer (min/sec)	0:09	0:09	0:07	0:08	0:08

June 01-30 2001	06/01/01-06/08/01	06/11/01-06/15/01	06/18/01-06/22/01	06/25/01-06/29/01	Monthly Totals/Avg.
Total Calls Received	3,020	2,202	2,153	3,085	10,460
Total Calls Answered	2,940	2,158	2,121	2,972	10,191
Total Calls Abandoned	80	44	32	113	269
% of Received Calls Answered	97.4	98	98.5	96.3	97.4
% of Received Calls Abandoned	2.6	2.0	1.5	3.7	2.6
Avg. Time on Answered Calls (min/sec)	1:36	1:33	1:34	1:36	1:35
Avg. Wait on Abandoned Calls (min/sec)	0:29	0:22	0:25	0:34	0:28

Avg. Speed of Answer (min/sec)	0:09	0:07	0:08	0:14	0:10
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July 01-31 2001	07/02/01-07/06/01	07/09/01-07/13/01	07/16/01-07/20/01	07/23/01-07/31/01	Monthly Totals/Avg.
Total Calls Received	3,120	3,797	3,414	5,151	15,482
Total Calls Answered	2,835	3,653	3,294	4,875	14,657
Total Calls Abandoned	285	144	120	276	825
% of Received Calls Answered	90.9	96.2	96.5	94.4	94.7
% of Received Calls Abandoned	9.1	3.8	3.5	5.3	5.3
Avg. Time on Answered Calls (min/sec)	1:42	1:51	1:43	1:43	1:45
Avg. Wait on Abandoned Calls (min/sec)	0:50	0:35	0:29	0:48	0:41
Avg. Speed of Answer (min/sec)	0:32	0:16	0:15	0:19	0:21

August 01-31 2001	08/01/01-08/10/01	08/13/01-08/17/01	08/20/01-08/24/01	08/27/01-08/31/01	Monthly Totals/Avg.
Total Calls Received	5,410	3,595	3,157	2,982	15,144
Total Calls Answered	5,203	3,469	3,069	2,902	14,643
Total Calls Abandoned	207	126	88	80	501
% of Received Calls Answered	96.2	96.5	97.2	97.3	96.7
% of Received Calls Abandoned	3.8	3.5	2.8	2.7	3.3
Avg. Time on Answered Calls (min/sec)	1:41	1:35	1:35	1:33	1:36
Avg. Wait on Abandoned Calls (min/sec)	0:37	0:33	0:37	0:38	0:36
Avg. Speed of Answer (min/sec)	0:15	0:14	0:11	0:12	0:13

September 01-30 2001	09/04/01-09/07/01	09/10/01-09/14/01	09/17/01-09/21/01	09/24/01-09/28/01	Monthly Totals/Avg.
Total Calls Received	2,931	2,788	3,061	3,183	11,963
Total Calls Answered	2,804	2,739	2,997	3,060	11,600
Total Calls Abandoned	127	49	64	123	363
% of Received Calls Answered	95.7	98.2	97.9	96.1	97
% of Received Calls Abandoned	4.3	1.8	2.1	3.9	3.0
Avg. Time on Answered Calls (min/sec)	1:30	1:33	1:24	1:27	1:29
Avg. Wait on Abandoned Calls (min/sec)	0:35	0:30	0:26	0:36	0:32
Avg. Speed of Answer (min/sec)	0:20	0:09	0:11	0:16	0:14

October 2000 Calls

Call Category	Primary	Secondary	Total
Medicaid Verificatio	469	8	477
Medicaid Eligibility	605	18	623
MC-General Questions	1411	40	1451
MC-Pres ?s/Referrals	164	1	165
MC-LCHP ?s/Referrals	90	0	90
MC-CHP ?s/Referrals	69	2	71
MC-Doral Dental	77	2	79
MC-MCO Switches (OV)	26	3	29
MC-MCO Switches (OE)	189	4	193
MC-NA Opt-Out Req.	31	0	31
MC-NA Opt-In Req.	5	0	5
MC-New Enrollment	24	0	24
MC-Exemption Req.	4	1	5
MC-Pres Complaints	30	0	30
MC-Lovelace Complain	8	0	8
MC-Cimarron Complain	6	0	6
MC-Transportation	31	0	31
Behav Health MC/FFS	3	0	3
FFS-Hospital/PCP	6	0	6
FFS-Dental Questions	67	2	69
FFS-Family Planning	71	1	72
FFS-Pharmacy Ques	29	0	29
FFS-Ref/Prio Author	11	1	12
FFS-Third Party Ques	74	3	77
FFS-Transportation	33	2	35
FFS-Vision Questions	15	0	15
FFS-Other Questions	91	3	94
FFS-Personal Care	16	0	16
Wrong Number	28	0	28
Not Medicaid Related	24	0	24
Disconnected	104	3	107
Other Agency Transfe	44	3	47
MAD-Staff Transfer	589	19	608
MAD-QMB/SLIMB	71	2	73
MAD-Medicare Exempt	5	0	5
Consultec-Provider	72	2	74
Medicaid Card Issues	117	0	117
SSA Referral/Con/Inf	136	4	140
ISD Referral/Con/Inf	879	9	888
New Mex-Hosp/Dr/Clin	26	0	26
New Mexikids-Mail	13	0	13
New Mexikids-Radio	22	0	22
New Mex-Newspaper	10	0	10

October 2000 Calls

Call Category	Primary	Secondary	Total
New Mex-Television	173	6	179
New Mex-School	20	0	20

New Mex-Govt. Agency	9	0	9
New Mexikids-Friend	81	1	82
New Mexikids-Other	104	3	107
New Mex-Tax and Rev	1328	31	1359
Bernalillo	13	774	787
Catron	0	21	21
Chaves	1	63	64
Cibola	0	61	61
Colfax	0	24	24
Curry	0	58	58
De Baca	0	9	9
Dona Ana	3	214	217
Eddy	3	47	50
Grant	0	42	42
Guadalupe	0	9	9
Hidalgo	0	7	7
Lea	0	46	46
Lincoln	0	17	17
Los Alamos	0	2	2
Luna	0	34	34
McKinley	0	64	64
Mora	0	10	10
Otero	0	45	45
Quay	1	22	23
Rio Arriba	0	120	120
Roosevelt	5	24	29
San Juan	0	101	101
San Miguel	1	32	33
Sandoval	0	110	110
Santa Fe	4	241	245
Sierra	1	13	14
Socorro	1	15	16
Taos	460	55	515
Torrance	1	24	25
Union	0	1	1
Valencia	1	96	97
Out-of-State	1	18	19
Invalid Codes	33	5	38
Total	8039	2598	10637

November 2000 Calls

Call Category	Primary	Secondary	Total
Medicaid Verificatio	505	9	514
Medicaid Eligibility	957	36	993
MC-General Questions	823	29	852
MC-Pres ?s/Referrals	158	2	160
MC-LCHP ?s/Referrals	96	2	98
MC-CHP ?s/Referrals	56	2	58
MC-Doral Dental	59	2	61
MC-MCO Switches (OV)	54	0	54
MC-MCO Switches (OE)	208	5	213
MC-NA Opt-Out Req.	13	0	13
MC-NA Opt-In Req.	10	0	10
MC-New Enrollment	17	2	19
MC-Exemption Req.	5	0	5
MC-Pres Complaints	47	0	47
MC-Lovelace Complain	45	0	45
MC-Cimarron Complain	21	0	21
MC-Transportation	34	0	34
Behav Health MC/FFS	0	1	1
FFS-Hospital/PCP	3	0	3
FFS-Dental Questions	77	1	78
FFS-Family Planning	49	2	51
FFS-Pharmacy Ques	25	2	27
FFS-Ref/Prio Author	6	0	6
FFS-Third Party Ques	74	5	79
FFS-Transportation	42	0	42
FFS-Vision Questions	19	0	19
FFS-Other Questions	118	4	122
FFS-Personal Care	28	1	29
Wrong Number	30	1	31
Not Medicaid Related	19	0	19
Disconnected	77	5	82
Other Agency Transfe	71	2	73
MAD-Staff Transfer	437	16	453
MAD-QMB/SLIMB	81	0	81
MAD-Medicare Exempt	9	0	9
Consultec-Provider	78	1	79
Medicaid Card Issues	116	1	117
SSA Referral/Con/Inf	118	1	119
ISD Referral/Con/Inf	908	7	915
New Mex-Hosp/Dr/Clin	18	0	18
New Mexikids-Mail	10	0	10
New Mexikids-Radio	10	0	10
New Mex-Newspaper	3	0	3
New Mex-Television	65	3	68

November 2000 Calls

Call Category	Primary	Secondary	Total
New Mex-School	8	0	8
New Mex-Health Fair	3	0	3

New Mex-Govt. Agency	6	0	6
New Mexikids-Friend	57	1	58
New Mexikids-Other	251	6	257
New Mex-Tax and Rev	519	10	529
Bernalillo	11	622	633
Catron	0	16	16
Chaves	0	39	39
Cibola	0	36	36
Colfax	0	20	20
Curry	0	47	47
De Baca	1	5	6
Dona Ana	3	152	155
Eddy	1	43	44
Grant	1	20	21
Guadalupe	0	3	3
Harding	0	1	1
Hidalgo	0	9	9
Lea	0	31	31
Lincoln	0	14	14
Los Alamos	0	4	4
Luna	1	35	36
McKinley	0	29	29
Mora	0	2	2
Otero	0	17	17
Quay	0	9	9
Rio Arriba	0	83	83
Roosevelt	3	12	15
San Juan	0	62	62
San Miguel	0	29	29
Sandoval	1	56	57
Santa Fe	1	140	141
Sierra	4	11	15
Socorro	1	17	18
Taos	477	31	508
Torrance	0	14	14
Union	0	1	1
Valencia	0	61	61
Out-of-State	1	16	17
Invalid Codes	17	4	21
Total	6966	1850	8816

December 2000 Calls

Call Category	Primary	Secondary	Total
Medicaid Verificatio	513	13	526
Medicaid Eligibility	854	30	884
MC-General Questions	816	24	840
MC-Pres ?s/Referrals	122	4	126
MC-LCHP ?s/Referrals	71	2	73
MC-CHP ?s/Referrals	53	1	54
MC-Doral Dental	35	0	35
MC-MCO Switches (OV)	68	1	69
MC-MCO Switches (OE)	179	6	185
MC-NA Opt-Out Req.	9	0	9
MC-NA Opt-In Req.	7	0	7
MC-New Enrollment	17	0	17
MC-Exemption Req.	4	0	4
MC-Pres Complaints	3	0	3
MC-Lovelace Complain	2	0	2
MC-Cimarron Complain	2	0	2
MC-Transportation	17	0	17
Behav Health MC/FFS	3	0	3
FFS-Dental Questions	43	2	45
FFS-Family Planning	40	1	41
FFS-Pharmacy Ques	26	0	26
FFS-Ref/Prio Author	11	1	12
FFS-Third Party Ques	72	2	74
FFS-Transportation	33	1	34
FFS-Vision Questions	14	0	14
FFS-Other Questions	72	4	76
FFS-Personal Care	31	1	32
Wrong Number	33	0	33
Not Medicaid Related	14	1	15
Disconnected	72	2	74
Other Agency Referr	18	1	19
MAD-Staff Transfer	403	23	426
MAD-QMB/SLIMB	56	0	56
MAD-Medicare Exempt	8	0	8
Consultec-Provider	56	0	56
Swipe Card Questions	141	2	143
SSA Referral/Con/Inf	146	1	147
ISD Referral/Con/Inf	838	4	842
New Mex-Hosp/Dr/Clin	17	0	17
New Mexikids-Mail	9	0	9
New Mexikids-Radio	3	0	3
New Mex-Newspaper	2	0	2
New Mex-Television	16	1	17
New Mex-School	8	0	8

December 2000 Calls

Call Category	Primary	Secondary	Total
New Mex-Health Fair	5	0	5
New Mex-Govt. Agency	6	0	6

New Mexikids-Friend	59	1	60
New Mexikids-Other	77	1	78
New Mex-Tax and Rev	252	3	255
Bernalillo	9	558	567
Catron	0	18	18
Chaves	0	33	33
Cibola	1	24	25
Colfax	0	20	20
Curry	0	27	27
De Baca	0	9	9
Dona Ana	0	133	133
Eddy	0	18	18
Grant	0	14	14
Guadalupe	0	6	6
Harding	0	1	1
Lea	0	33	33
Lincoln	0	12	12
Luna	0	29	29
McKinley	0	18	18
Mora	0	1	1
Otero	0	20	20
Quay	0	11	11
Rio Arriba	0	68	68
Roosevelt	3	8	11
San Juan	0	49	49
San Miguel	0	22	22
Sandoval	0	67	67
Santa Fe	2	151	153
Sierra	2	9	11
Socorro	1	11	12
Taos	229	37	266
Torrance	0	24	24
Union	0	2	2
Valencia	0	49	49
Out-of-State	0	20	20
Invalid Codes	12	6	18
Total	5615	1641	7256

January 2001 Calls

Call Category	Primary	Secondary	Total
Medicaid Verification	612	2	614
Medicaid Eligibility	1186	28	1214
MC-General Questions	1627	89	1716
MC-Pres ?s/Referrals	265	0	265
MC-LCHP ?s/Referrals	175	1	176
MC-CHP ?s/Referrals	118	4	122
MC-Doral Dental	123	1	124
MC-MCO Switches (OV)	123	6	129
MC-MCO Switches (OE)	272	4	276
MC-NA Opt-Out Req.	19	0	19
MC-NA Opt-In Req.	8	0	8
MC-New Enrollment	16	0	16
MC-Exemption Req.	5	0	5
MC-Pres Complaints	3	0	3
MC-Lovelace Complain	2	0	2
MC-Cimarron Complain	2	0	2
MC-Transportation	42	0	42
Behav Health MC/FFS	223	4	227
FFS-Hospital/PCP	1	0	1
FFS-Dental Questions	112	4	116
FFS-Family Planning	83	1	84
FFS-Pharmacy Ques	55	1	56
FFS-Ref/Prio Author	14	1	15
FFS-Third Party Ques	137	1	138
FFS-Transportation	59	0	59
FFS-Vision Questions	34	1	35
FFS-Other Questions	155	2	157
FFS-Personal Care	75	1	76
Wrong Number	29	1	30
Not Medicaid Related	31	1	32
Disconnected	142	10	152
Other Agency Transfe	36	0	36
MAD-Staff Transfer	741	29	770
MAD-QMB/SLIMB	120	1	121
MAD-Medicare Exempt	10	2	12
Consultec-Provider	107	1	108
Medicaid Card Issues	240	1	241
SSA Referral/Con/Inf	174	3	177
ISD Referral/Con/Inf	1173	21	1194
New Mex-Hosp/Dr/Clin	22	1	23
New Mexikids-Mail	14	2	16
New Mexikids-Radio	14	0	14
New Mex-Newspaper	1	0	1
New Mex-Television	17	0	17

January 2001 Calls

Call Category	Primary	Secondary	Total
New Mex-School	8	0	8
New Mex-Health Fair	1	1	2

New Mex-Govt. Agency	5	0	5
New Mexikids-Friend	104	0	104
New Mexikids-Other	132	4	136
New Mex-Tax and Rev	1903	29	1932
Bernalillo	11	923	934
Catron	0	28	28
Chaves	1	59	60
Cibola	0	48	48
Colfax	0	20	20
Curry	0	78	78
De Baca	0	7	7
Dona Ana	1	258	259
Eddy	0	53	53
Grant	0	39	39
Guadalupe	0	8	8
Harding	0	1	1
Hidalgo	0	2	2
Lea	0	70	70
Lincoln	0	13	13
Los Alamos	0	5	5
Luna	0	47	47
McKinley	0	56	56
Mora	0	4	4
Otero	0	37	37
Quay	1	12	13
Rio Arriba	2	104	106
Roosevelt	0	9	9
San Juan	0	116	116
San Miguel	0	36	36
Sandoval	0	96	96
Santa Fe	1	246	247
Sierra	0	18	18
Socorro	0	15	15
Taos	64	50	114
Torrance	0	26	26
Union	0	3	3
Valencia	1	92	93
Out-of-State	0	36	36
Invalid Codes	240	13	253
Total	10892	2886	13778

February 2001 Calls

Call Category	Primary	Secondary	Total
BH-Client/Ans by PB	21	1	22
BH-CL/Ref MAD Staff	5	0	5
BH-Prov/Ans by PB	10	0	10
BH-Prov/MAD Staff	4	1	5
BH-Prov/Ref to BC/BS	4	0	4
BH-Prov/Ref to Ctec	1	1	2
BH-Prov/Ref to MCO	21	0	21
Medicaid Verification	772	31	803
Medicaid Eligibility	864	27	891
MC-General Questions	837	27	864
MC-Pres ?s/Referrals	241	4	245
MC-LCHP ?s/Referrals	122	1	123
MC-CHP ?s/Referrals	123	1	124
MC-Doral Dental	104	1	105
MC-MCO Switches (OV)	97	4	101
MC-MCO Switches (OE)	225	4	229
MC-NA Opt-Out Req.	12	0	12
MC-NA Opt-In Req.	5	0	5
MC-New Enrollment	20	1	21
MC-Exemption Req.	7	0	7
MC-Pres Complaints	1	0	1
MC-Lovelace Complain	1	0	1
MC-Transportation	31	1	32
Behav Health MC/FFS	4	0	4
FFS-Hospital/PCP	2	0	2
FFS-Dental Questions	113	5	118
FFS-Family Planning	116	0	116
FFS-Pharmacy Ques	54	0	54
FFS-Ref/Prio Author	23	0	23
FFS-Third Party Ques	159	7	166
FFS-Transportation	54	1	55
FFS-Vision Questions	26	0	26
FFS-Other Questions	163	6	169
FFS-Personal Care	58	1	59
Wrong Number	59	1	60
Not Medicaid Related	26	3	29
Disconnected	94	7	101
Other Agency Transfe	44	2	46
MAD-Staff Transfer	705	34	739
MAD-QMB/SLIMB	150	0	150
MAD-Medicare Exempt	8	1	9
Consultec-Provider	123	1	124
Medicaid Card Issues	173	2	175
SSA Referral/Con/Inf	152	3	155

February 2001 Calls

Call Category	Primary	Secondary	Total
ISD Referral/Con/Inf	962	10	972
New Mex-Hosp/Dr/Clin	10	0	10

New Mexikids-Mail	12	5	17
New Mexikids-Radio	7	2	9
New Mex-Newspaper	1	0	1
New Mex-Television	6	0	6
New Mex-School	3	0	3
New Mex-Health Fair	2	3	5
New Mex-Govt. Agency	8	0	8
New Mexikids-Friend	54	0	54
New Mexikids-Other	75	3	78
New Mex-Tax and Rev	1028	42	1070
Bernalillo	1	645	646
Catron	2	20	22
Chaves	0	56	56
Cibola	0	30	30
Colfax	0	19	19
Curry	0	45	45
De Baca	0	15	15
Dona Ana	2	174	176
Eddy	0	45	45
Grant	0	46	46
Guadalupe	0	3	3
Hidalgo	1	1	2
Lea	0	48	48
Lincoln	0	6	6
Los Alamos	0	4	4
Luna	0	39	39
McKinley	2	32	34
Mora	0	1	1
Otero	0	33	33
Quay	0	5	5
Rio Arriba	0	85	85
Roosevelt	0	9	9
San Juan	0	75	75
San Miguel	0	21	21
Sandoval	0	78	78
Santa Fe	2	124	126
Sierra	1	7	8
Socorro	0	4	4
Taos	16	30	46
Torrance	0	17	17
Union	0	5	5
Valencia	1	74	75
Out-of-State	0	56	56

February 2001 Calls

Call Category	Primary	Secondary	Total
Invalid Codes	24	5	29
Total	8054	2101	10155

March 2001 Calls

Call Category	Primary	Secondary	Total
BH-Client/Ans by PB	100	4	104
BH-CL/Ref MAD Staff	8	1	9
BH-Client/Ref to MCO	6	0	6
BH-Prov/Ans by PB	7	0	7
BH-Prov/Ref to MCO	11	0	11
Medicaid Verificatio	1063	53	1116
Medicaid Eligibility	843	14	857
MC-General Questions	1274	32	1306
MC-Pres ?s/Referrals	342	5	347
MC-LCHP ?s/Referrals	191	2	193
MC-CHP ?s/Referrals	151	1	152
MC-Doral Dental	154	2	156
MC-MCO Switches (OV)	107	2	109
MC-MCO Switches (OE)	325	3	328
MC-NA Opt-Out Req.	14	0	14
MC-NA Opt-In Req.	9	0	9
MC-New Enrollment	27	1	28
MC-Exemption Req.	3	0	3
MC-Transportation	45	0	45
FFS-Hospital/PCP	1	0	1
FFS-Dental Questions	146	9	155
FFS-Family Planning	157	1	158
FFS-Pharmacy Ques	80	1	81
FFS-Ref/Prio Author	30	0	30
FFS-Third Party Ques	161	5	166
FFS-Transportation	67	0	67
FFS-Vision Questions	48	0	48
FFS-Other Questions	153	9	162
FFS-Personal Care	83	0	83
Wrong Number	58	1	59
Not Medicaid Related	36	0	36
Disconnected	163	2	165
Other Agency Transfe	64	2	66
MAD-Staff Transfer	868	27	895
MAD-QMB/SLIMB	141	0	141
MAD-Medicare Exempt	7	0	7
Consultec-Provider	125	3	128
Medicaid Card Issues	272	8	280
SSA Referral/Con/Inf	133	3	136
ISD Referral/Con/Inf	1048	13	1061
New Mex-Hosp/Dr/Clin	22	1	23
New Mexikids-Mail	18	1	19
New Mexikids-Radio	40	1	41
New Mex-Newspaper	75	3	78

March 2001 Calls

Call Category	Primary	Secondary	Total
New Mex-Television	979	16	995
New Mex-School	9	0	9

New Mex-Health Fair	4	0	4
New Mex-Govt. Agency	5	0	5
New Mexikids-Friend	106	0	106
New Mexikids-Other	189	5	194
New Mex-Tax and Rev	766	21	787
Bernalillo	3	699	702
Catron	0	24	24
Chaves	0	46	46
Cibola	0	40	40
Colfax	0	21	21
Curry	0	31	31
De Baca	0	8	8
Dona Ana	0	176	176
Eddy	0	39	39
Grant	1	28	29
Guadalupe	0	4	4
Harding	0	1	1
Hidalgo	0	2	2
Lea	0	39	39
Lincoln	0	9	9
Los Alamos	0	3	3
Luna	0	43	43
McKinley	0	27	27
Mora	0	1	1
Otero	0	20	20
Quay	0	6	6
Rio Arriba	0	68	68
Roosevelt	0	6	6
San Juan	0	71	71
San Miguel	0	24	24
Sandoval	1	52	53
Santa Fe	0	135	135
Sierra	0	5	5
Socorro	1	3	4
Taos	12	30	42
Torrance	0	18	18
Union	1	0	1
Valencia	0	50	50
Out-of-State	1	53	54
Invalid Codes	37	5	42
Total	10791	2039	12830

April 2001 Calls

Call Category	Primary	Secondary	Total
BH-Client/Ans by PB	32	0	32
BH-CL/Ref MAD Staff	4	0	4
BH-Client/Ref to MCO	4	0	4
BH-Prov/MAD Staff	1	0	1
BH-Prov/Ref to MCO	3	0	3
Medicaid Verificatio	1290	77	1367
Medicaid Eligibility	725	16	741
MC-General Questions	904	34	938
MC-Pres ?s/Referrals	302	1	303
MC-LCHP ?s/Referrals	167	2	169
MC-CHP ?s/Referrals	116	3	119
MC-Doral Dental	120	2	122
MC-MCO Switches (OV)	98	0	98
MC-MCO Switches (OE)	252	8	260
MC-NA Opt-Out Req.	20	0	20
MC-NA Opt-In Req.	7	0	7
MC-New Enrollment	15	0	15
MC-Exemption Req.	3	1	4
MC-Pres Complaints	1	0	1
MC-Lovelace Complain	1	0	1
MC-Cimarron Complain	2	0	2
MC-Transportation	44	0	44
FFS-Hospital/PCP	3	0	3
FFS-Dental Questions	94	5	99
FFS-Family Planning	117	0	117
FFS-Pharmacy Ques	70	0	70
FFS-Ref/Prio Author	33	0	33
FFS-Third Party Ques	131	2	133
FFS-Transportation	36	1	37
FFS-Vision Questions	39	0	39
FFS-Other Questions	178	1	179
FFS-Personal Care	65	1	66
Wrong Number	65	2	67
Not Medicaid Related	41	2	43
Disconnected	138	5	143
Other Agency Referr	47	0	47
MAD-Staff Transfer	732	25	757
MAD-QMB/SLIMB	117	0	117
MAD-Medicare Exempt	8	0	8
Consultec-Provider	148	2	150
Medicaid Card Issues	373	9	382
SSA Referral/Con/Inf	104	1	105
ISD Referral/Con/Inf	1035	15	1050
New Mex-Hosp/Dr/Clin	18	0	18

April 2001 Calls

Call Category	Primary	Secondary	Total
New Mexikids-Mail	17	0	17
New Mexikids-Radio	54	1	55

New Mex-Newspaper	26	1	27
New Mex-Television	1575	35	1610
New Mex-School	7	0	7
New Mex-Health Fair	16	1	17
New Mex-Govt. Agency	5	0	5
New Mexikids-Friend	42	1	43
New Mexikids-Other	125	7	132
New Mex-Tax and Rev	34	1	35
Bernalillo	18	313	331
Catron	1	7	8
Chaves	0	33	33
Cibola	0	11	11
Colfax	0	7	7
Curry	1	12	13
De Baca	0	2	2
Dona Ana	7	85	92
Eddy	0	18	18
Grant	0	7	7
Guadalupe	0	2	2
Hidalgo	0	1	1
Lea	1	18	19
Lincoln	0	8	8
Los Alamos	0	1	1
Luna	1	15	16
McKinley	0	21	21
Mora	0	2	2
Otero	0	15	15
Quay	0	6	6
Rio Arriba	2	20	22
Roosevelt	0	9	9
San Juan	2	41	43
San Miguel	0	4	4
Sandoval	1	36	37
Santa Fe	5	70	75
Sierra	0	4	4
Socorro	1	6	7
Taos	10	15	25
Torrance	0	15	15
Union	0	2	2
Valencia	0	41	41
Out-of-State	0	55	55
Invalid Codes	36	9	45
Total	9690	1173	10863

May 2001 Calls

Call Category	Primary	Secondary	Total
Medicaid Eligibility	1007	20	1027
MC-General Questions	827	34	861
MC-Pres ?s/Referrals	383	16	399
MC-LCHP ?s/Referrals	150	3	153
MC-CHP ?s/Referrals	115	4	119
MC-Doral Dental	125	0	125

MC-MCO Switches (OV)	71	0	71
MC-MCO Switches (OE)	147	3	150
MC-NA Opt-Out Req.	28	0	28
MC-NA Opt-In Req.	22	0	22
MC-New Enrollment	117	3	120
MC-Exemption Req.	6	0	6
MC-Pres Complaints	15	0	15
MC-Lovelace Complain	6	0	6
MC-Cimarron Complain	4	0	4
FFS-Hospital/PCP	6	0	6
FFS-Dental Questions	59	4	63
FFS-Family Planning	53	1	54
FFS-Pharmacy Ques	47	1	48
FFS-Ref/Prio Author	6	0	6
FFS-Third Party Ques	66	1	67
FFS-Transportation	19	0	19
FFS-Vision Questions	11	0	11
FFS-Other Questions	147	3	150
Not Medicaid Related	68	5	73
Disconnected	98	2	100
Other Agency Transfe	57	1	58
MAD-Staff Transfer	687	25	712
MAD-QMB/SLIMB	10	0	10
MAD-Medicare Exempt	16	0	16
Consultec-Provider	93	1	94
Medicaid Card Issues	106	1	107
SSA Referral/Con/Inf	98	1	99
ISD Referral/Con/Inf	629	7	636
New Mex-Hosp/Dr/Clin	37	0	37
New Mexikids-Mail	24	4	28
New Mexikids-Radio	29	0	29
New Mex-Newspaper	7	0	7
New Mex-Television	133	1	134
New Mex-School	17	1	18
New Mex-Health Fair	6	0	6
New Mex-Govt. Agency	21	0	21
New Mexikids-Friend	143	2	145
New Mexikids-Other	42	0	42
New Mex-Deacon Juan	4	0	4

May 2001 Calls

Call Category	Primary	Secondary	Total
Bernalillo	10	1012	1022
Catron	0	9	9
Chaves	2	70	72
Cibola	0	54	54
Colfax	0	15	15
Curry	0	67	67
De Baca	0	8	8
Dona Ana	1	219	220
Eddy	0	66	66
Grant	0	50	50

Guadalupe	1	23	24
Harding	0	1	1
Hidalgo	1	7	8
Lea	1	72	73
Lincoln	0	17	17
Los Alamos	0	12	12
Luna	0	57	57
McKinley	1	73	74
Mora	0	6	6
Otero	0	52	52
Quay	0	23	23
Rio Arriba	1	100	101
Roosevelt	0	32	32
San Juan	0	143	143
San Miguel	0	42	42
Sandoval	0	72	72
Santa Fe	3	398	401
Sierra	0	18	18
Socorro	1	14	15
Taos	1	40	41
Torrance	1	26	27
Union	0	7	7
Valencia	1	69	70
Out-of-State	1	31	32
Invalid Codes	25	14	39
Total	5813	3063	8876

June 2001 Calls

Call Category	Primary	Secondary	Total
BH-Client/Ans by PB	36	0	36
BH-CL/Ref MAD Staff	3	0	3
BH-Prov/Ans by PB	1	0	1
BH-Prov/Ref to MCO	2	0	2
Medicaid Verificatio	1195	56	1251
Medicaid Eligibility	684	11	695
MC-General Questions	1310	27	1337
MC-Pres ?s/Referrals	279	1	280
MC-LCHP ?s/Referrals	134	4	138
MC-CHP ?s/Referrals	138	2	140
MC-Doral Dental	129	2	131
MC-MCO Switches (OV)	20	0	20
MC-MCO Switches (OE)	293	4	297
MC-NA Opt-Out Req.	25	2	27
MC-NA Opt-In Req.	9	0	9
MC-New Enrollment	44	1	45
MC-Exemption Req.	4	0	4
MC-Pres Complaints	2	0	2
MC-Transportation	55	1	56
FFS-Hospital/PCP	2	0	2
FFS-Dental Questions	115	2	117
FFS-Family Planning	153	1	154
FFS-Pharmacy Ques	45	0	45
FFS-Ref/Prio Author	40	0	40
FFS-Third Party Ques	135	1	136
FFS-Transportation	46	2	48
FFS-Vision Questions	35	1	36
FFS-Other Questions	212	3	215
FFS-Personal Care	106	2	108
Wrong Number	40	2	42
Not Medicaid Related	25	0	25
Disconnected	135	5	140
Other Agency Referr	38	2	40
MAD-Staff Transfer	807	22	829
MAD-QMB/SLIMB	149	0	149
MAD-Medicare Exempt	5	0	5
Consultec-Provider	149	4	153
Swipe Card Questions	700	11	711
SSA Referral/Con/Inf	126	0	126
ISD Referral/Con/Inf	1061	10	1071
Swipe Crd Rep Issued	56	1	57
New Mex-Hosp/Dr/Clin	17	0	17
New Mexikids-Mail	2	1	3
New Mexikids-Radio	26	0	26

June 2001 Calls

Call Category	Primary	Secondary	Total
New Mex-Newspaper	10	0	10
New Mex-Television	832	26	858

New Mex-School	2	0	2
New Mex-Govt. Agency	2	0	2
New Mexikids-Friend	98	0	98
New Mexikids-Other	129	1	130
New Mex-Tax and Rev	7	0	7
Bernalillo	14	641	655
Catron	0	11	11
Chaves	1	53	54
Cibola	0	42	42
Colfax	0	16	16
Curry	0	39	39
De Baca	0	3	3
Dona Ana	4	169	173
Eddy	0	32	32
Grant	0	21	21
Guadalupe	0	11	11
Harding	0	2	2
Hidalgo	0	3	3
Lea	2	27	29
Lincoln	0	12	12
Los Alamos	0	2	2
Luna	0	22	22
McKinley	0	41	41
Mora	0	4	4
Otero	0	14	14
Quay	0	9	9
Rio Arriba	1	75	76
Roosevelt	0	9	9
San Juan	0	64	64
San Miguel	0	18	18
Sandoval	1	64	65
Santa Fe	5	132	137
Sierra	0	2	2
Socorro	0	10	10
Taos	2	36	38
Torrance	0	23	23
Union	0	2	2
Valencia	2	52	54
Out-of-State	1	74	75
Used BH Line Code	362	2	364
Invalid Codes	27	1	28
Total	10090	1946	12036

July 2001 Calls

Call Category	Primary	Secondary	Total
BH-Client/Ans by PB	11	0	11
BH-CL/Ref MAD Staff	1	0	1
BH-Client/Ref to MCO	2	0	2
BH-Prov/Ans by PB	1	0	1
BH-Prov/MAD Staff	1	0	1
BH-Prov/Ref to MCO	1	0	1

Medicaid Verificatio	2423	133	2556
Medicaid Eligibility	763	16	779
MC-General Questions	1567	49	1616
MC-Pres ?s/Referrals	348	5	353
MC-LCHP ?s/Referrals	209	0	209
MC-CHP ?s/Referrals	212	7	219
MC-Doral Dental	125	2	127
MC-MCO Switches (OV)	15	0	15
MC-MCO Switches (OE)	448	7	455
MC-NA Opt-Out Req.	32	2	34
MC-NA Opt-In Req.	12	0	12
MC-New Enrollment	41	0	41
MC-Exemption Req.	3	0	3
MC-Pres Complaints	2	0	2
MC-Lovelace Complain	2	0	2
MC-Cimarron Complain	2	0	2
MC-Transportation	77	0	77
FFS-Hospital/PCP	1	0	1
FFS-Dental Questions	60	1	61
FFS-Family Planning	118	1	119
FFS-Pharmacy Ques	42	0	42
FFS-Ref/Prio Author	51	1	52
FFS-Third Party Ques	112	1	113
FFS-Transportation	42	0	42
FFS-Vision Questions	46	1	47
FFS-Other Questions	252	4	256
FFS-Personal Care	94	1	95
Wrong Number	46	1	47
Not Medicaid Related	42	0	42
Disconnected	221	7	228
Other Agency Referr	38	1	39
MAD-Staff Transfer	836	22	858
MAD-QMB/SLIMB	149	3	152
MAD-Medicare Exempt	4	1	5
Consultec-Provider	197	2	199
Swipe Card Questions	894	29	923
SSA Referral/Con/Inf	124	0	124
ISD Referral/Con/Inf	898	11	909
Swipe Crd Rep Issued	1670	32	1702

July 2001 Calls

Call Category	Primary	Secondary	Total
New Mex-Hosp/Dr/Clin	10	0	10
New Mexikids-Mail	10	1	11
New Mexikids-Radio	17	1	18
New Mex-Newspaper	3	1	4
New Mex-Television	1353	38	1391
New Mex-School	4	0	4
New Mex-Health Fair	10	0	10
New Mex-Govt. Agency	1	1	2
New Mexikids-Friend	81	1	82
New Mexikids-Other	234	2	236

New Mex-Tax and Rev	7	0	7
Bernalillo	0	390	390
Catron	0	12	12
Chaves	0	32	32
Cibola	0	27	27
Colfax	0	11	11
Curry	0	19	19
De Baca	0	6	6
Dona Ana	0	158	158
Eddy	0	35	35
Grant	0	11	11
Harding	0	1	1
Hidalgo	0	1	1
Lea	0	22	22
Lincoln	0	8	8
Los Alamos	0	1	1
Luna	0	22	22
McKinley	0	17	17
Otero	0	17	17
Quay	0	7	7
Rio Arriba	2	40	42
Roosevelt	0	7	7
San Juan	0	31	31
San Miguel	0	14	14
Sandoval	2	36	38
Santa Fe	0	56	56
Sierra	0	7	7
Socorro	0	7	7
Taos	2	18	20
Torrance	0	15	15
Union	0	1	1
Valencia	0	38	38
Out-of-State	1	61	62
CL-Auth Reductions	2	0	2
CL-Answer By PB	12	1	13

July 2001 Calls

Call Category	Primary	Secondary	Total
CL-Ref to Pres VO	4	0	4
CL-Ref to Lvce Cigna	1	1	2
CL-Ref to Cimarron	2	0	2
Prov-Ref PresPrv Svc	1	0	1
Prov-Ref LvcProv Svc	1	0	1
NewMexSalud Rel Call	342	5	347
Invalid Codes	34	5	39
Totals	14371	1525	15896

August 2001 Calls

Call Category	Primary	Secondary	Total
BH-Client/Ans by PB	5	0	5
BH-Client/Ref to MCO	1	0	1
BH-Prov/MAD Staff	2	0	2
BH-Prov/Ref to BC/BS	1	0	1
BH-Prov/Ref to Ctec	1	0	1
BH-Prov/Ref to MCO	1	0	1
Medicaid Verificatio	2849	122	2971
Medicaid Eligibility	541	10	551
MC-General Questions	1593	48	1641
MC-Pres ?s/Referrals	260	1	261
MC-LCHP ?s/Referrals	119	2	121
MC-CHP ?s/Referrals	131	2	133
MC-Doral Dental	102	0	102
MC-MCO Switches (OV)	14	1	15
MC-MCO Switches (OE)	388	10	398
MC-NA Opt-Out Req.	16	0	16
MC-NA Opt-In Req.	5	0	5
MC-New Enrollment	53	2	55
MC-Exemption Req.	2	0	2
MC-Pres Complaints	1	0	1
MC-Lovelace Complain	1	0	1
MC-Cimarron Complain	1	0	1
MC-Transportation	54	0	54
FFS-Dental Questions	38	1	39
FFS-Family Planning	98	1	99
FFS-Pharmacy Ques	56	1	57
FFS-Ref/Prio Author	39	1	40
FFS-Third Party Ques	93	2	95
FFS-Transportation	49	0	49
FFS-Vision Questions	26	0	26
FFS-Other Questions	224	9	233
FFS-Personal Care	168	2	170
Wrong Number	42	2	44
Not Medicaid Related	38	2	40
Disconnected	201	4	205
Other Agency Referr	38	0	38
MAD-Staff Transfer	821	26	847
MAD-QMB/SLIMB	148	1	149
MAD-Medicare Exempt	2	0	2
Consultec-Provider	121	0	121
Swipe Card Questions	611	9	620
SSA Referral/Con/Inf	60	4	64
ISD Referral/Con/Inf	714	6	720
Swipe Crd Rep Issued	1257	27	1284

August 2001 Calls

Call Category	Primary	Secondary	Total
New Mex-Hosp/Dr/Clin	4	0	4
New Mexikids-Mail	4	0	4

New Mexikids-Radio	33	1	34
New Mex-Newspaper	412	7	419
New Mex-Television	2104	42	2146
New Mex-School	31	0	31
New Mex-Health Fair	170	0	170
New Mex-Govt. Agency	2	0	2
New Mexikids-Friend	67	0	67
New Mexikids-Other	239	6	245
New Mex-Tax and Rev	1	0	1
Bernalillo	1	427	428
Catron	0	15	15
Chaves	0	35	35
Cibola	0	36	36
Colfax	0	12	12
Curry	0	27	27
De Baca	0	3	3
Dona Ana	1	133	134
Eddy	0	28	28
Grant	0	20	20
Guadalupe	0	2	2
Hidalgo	0	2	2
Lea	0	19	19
Lincoln	0	10	10
Los Alamos	0	2	2
Luna	0	41	41
McKinley	0	18	18
Mora	0	2	2
Otero	0	16	16
Quay	0	12	12
Rio Arriba	0	53	53
Roosevelt	0	7	7
San Juan	0	38	38
San Miguel	0	23	23
Sandoval	0	38	38
Santa Fe	0	65	65
Sierra	0	2	2
Socorro	0	9	9
Taos	2	23	25
Torrance	0	10	10
Union	0	2	2
Valencia	0	36	36
Out-of-State	0	62	62
NewMexSalud Rel Call	320	5	325

August 2001 Calls

Call Category	Primary	Secondary	Total
Invalid Codes	44	2	46
Total	14420	1587	16007

September 2001 Calls

Call Category	Primary	Secondary	Total
BH-Client/Ans by PB	2	0	2
BH-Prov/Ref to MCO	1	0	1
Medicaid Verificatio	2480	89	2569
Medicaid Eligibility	589	12	601
MC-General Questions	1109	34	1143
MC-Pres ?s/Referrals	244	6	250
MC-LCHP ?s/Referrals	128	1	129
MC-CHP ?s/Referrals	156	0	156
MC-Doral Dental	70	2	72
MC-MCO Switches (OV)	7	0	7
MC-MCO Switches (OE)	338	5	343
MC-NA Opt-Out Req.	12	0	12
MC-NA Opt-In Req.	3	0	3
MC-New Enrollment	40	0	40
MC-Exemption Req.	3	0	3
MC-Pres Complaints	1	0	1
MC-Lovelace Complain	1	1	2
MC-Transportation	85	1	86
FFS-Hospital/PCP	3	0	3
FFS-Dental Questions	31	1	32
FFS-Family Planning	136	2	138
FFS-Pharmacy Ques	101	3	104
FFS-Ref/Prio Author	45	0	45
FFS-Third Party Ques	81	3	84
FFS-Transportation	41	0	41
FFS-Vision Questions	48	0	48
FFS-Other Questions	138	6	144
FFS-Personal Care	184	8	192
Wrong Number	16	0	16
Not Medicaid Related	16	0	16
Disconnected	163	7	170
Other Agency Referr	29	0	29
MAD-Staff Transfer	1230	29	1259
MAD-QMB/SLIMB	219	1	220
MAD-Medicare Exempt	1	0	1
Consultec-Provider	187	1	188
Swipe Card Questions	405	15	420
SSA Referral/Con/Inf	38	0	38
ISD Referral/Con/Inf	706	8	714
Swipe Crd Rep Issued	950	17	967
New Mex-Hosp/Dr/Clin	2	0	2
New Mexikids-Mail	14	0	14
New Mexikids-Radio	6	0	6
New Mex-Newspaper	377	12	389

September 2001 Calls

Call Category	Primary	Secondary	Total
New Mex-Television	308	1	309
New Mex-School	26	1	27

New Mex-Health Fair	117	1	118
New Mex-Govt. Agency	3	0	3
New Mexikids-Friend	54	4	58
New Mexikids-Other	242	0	242
New Mex-Tax and Rev	3	0	3
Bernalillo	5	278	283
Catron	1	9	10
Chaves	0	27	27
Cibola	0	14	14
Colfax	0	1	1
Curry	0	20	20
De Baca	0	3	3
Dona Ana	1	93	94
Eddy	0	32	32
Grant	0	13	13
Guadalupe	0	1	1
Harding	0	1	1
Hidalgo	0	1	1
Lea	0	25	25
Lincoln	0	10	10
Luna	0	31	31
McKinley	0	28	28
Mora	0	1	1
Otero	0	24	24
Quay	0	5	5
Rio Arriba	0	31	31
Roosevelt	0	6	6
San Juan	0	29	29
San Miguel	0	20	20
Sandoval	0	25	25
Santa Fe	0	46	46
Socorro	0	7	7
Taos	1	13	14
Torrance	0	6	6
Valencia	0	22	22
Out-of-State	0	62	62
Used BH Line Code	177	1	178
Invalid Codes	51	5	56
Total	11425	1161	12586