Comagine Health

New Mexico Medicaid Checklist
Alternative Benefit Plan (ABP) Exemption

Comagine Health, Third-Party Assessor (TPA), is responsible for determining whether a Medicaid fee-for-service (FFS) recipient in the Other Adult Group Medicaid category of eligibility (COE 100)/Alternative Benefit Plan (ABP) meets Medically Frail criteria for ABP exemption. This checklist provides guidance for requesting an ABP exemption and the two types of services submissions below.

Requesting facility to provide the following to Comagine Health:

☐ The recipient and/or provider must have a documented, qualifying medical condition diagnosis. Please fax to 888-562-2755.
Note: The entire medical record is not needed. A written statement from a licensed provider attesting to the medical diagnosis will suffice. The New Mexico Health Care Authority (HCA) Medically Frail Condition List is below.

OR

☐ Comagine Health can obtain a diagnosis over the phone from a licensed provider if a written statement is not available. Please call 866-962-2180.

Medically Frail Condition List

In order for a Category of Eligibility (COE) 100 (Other Adult Group) Medicaid recipient to be exempt from the Alternative Benefit Plan (ABP), the recipient must have a documented medical diagnosis of one of the conditions or services listed below.

- Acquired immune deficiency syndrome (AIDS)
- ALS (Lou Gehrig's disease)
- Angina pectoris
- Arteriosclerosis obliterans
- Artificial heart valve
- Ascites
- Blindness
- Cancer (current diagnosis/treatment, within five years)
- Cardiomyopathy
- Chronic substance use disorder
  Refer to the Chronic Substance Dependency (CSD) Criteria Checklist effective July 1, 2010 (or subsequent replacement version).
- Cirrhosis of the liver
- Compromised immune system
- Coronary insufficiency
- Coronary occlusion
- Crohn's disease
- Cystic fibrosis
- Dermatomayositis
- Diabetes (insulin dependent)
- Disability: A physical, intellectual or developmental disability that significantly impairs the ability to perform **one** or more Activities of Daily Living (ADLs).
  Refer to the Nursing Facility Level of Care (NF LOC) Supplement effective Jan. 1, 2014 (or subsequent replacement version).
- Friedreich's disease
- Hemophilia

- Hepatitis C (active)
- HIV+
- Hodgkin's disease
- Huntington's chorea
- Hydrocephalus
- Intermittent claudication
- Juvenile diabetes
- Kidney failure
- Lead poisoning with cerebral involvement
- Leukemia
- Lupus erythematosus disseminate
- Malignant tumor (if treated/occurred within previous five years)
- Metastatic Cancer
- Motor or sensory aphasia
- Multiple or disseminated sclerosis
- Muscular atrophy or dystrophy
- Myasthenia gravis
- Myotonia
- Open heart surgery
- Organ transplant
- Paraplegia or quadriplegia
- Parkinson's disease
- Peripheral arteriosclerosis (if treated within previous three years)
- Polyarteritis (periarteritis nodosa)
- Polycystic kidney
- Posterolateral sclerosis
- Renal failure
- Serious mental illness
  Refer to the Serious Mental Illness (SMI) Criteria Checklist effective July 27, 2010 (or subsequent replacement version).
- Sickle cell anemia
- Silicosis
- Splenic anemia (True Banti's syndrome)
- Still's disease
- Stroke (CVA)
- Syringomyelia
- Tabes dorsalis (locomotor ataxia)
- Terminal illness requiring hospice care
- Thalessemia (Cooley's or Mediterranean anemia)
- Topectomy and lobotomy
- Wilson's disease

Note

The recipient remains enrolled in the ABP Services Package until Comagine Health has confirmed the eligibility for ABP exempt and the recipient has declared their choice to receive the ABP Exempt Benefits Package.