HOUSE MEMORIAL 71

52ND LEGISLATURE - STATE OF NEW MEXICO - SECOND SESSION, 2016

INTRODUCED BY

Idalia Lechuga-Tena

A MEMORIAL

REQUESTING THE HUMAN SERVICES DEPARTMENT TO CONVENE A WORKING GROUP TO RECOMMEND MEASURES TO VERIFY DELIVERY OF SERVICES TO PREVENT MEDICAID FRAUD AND ABUSE.

WHEREAS, more than eight hundred thousand New Mexicans receive medicaid benefits, with medicaid enrollment at its highest point in the state's history; and

WHEREAS, medicaid fraud and abuse is of vital concern to the state, as it impacts significant levels of federal and state funding; and

WHEREAS, federal law requires medicaid agencies to have a method for verifying with recipients whether services billed by providers were received; and

WHEREAS, it does not appear that an explanation of benefits is being provided to every medicaid recipient in New .202904.1

Mexico, nor are other mechanisms mandated to ensure that billed services are actually received by the recipient; and

WHEREAS, privately insured individuals receive explanations of benefits from their health insurers explaining what services were paid for on their behalf, including the date and description of the service; and

WHEREAS, individuals with chronic illnesses or behavioral or developmental disabilities or who receive home health care may be unable to personally verify that services were provided, and in such instances, an explanation of benefits may not be the most effective means to verify the delivery of services; and

WHEREAS, technology-based verification of services is a valuable tool used by many states to detect medicaid fraud and abuse; and

WHEREAS, Texas requires a provider agency to use an electronic visit verification system to record service delivery in the home or in the community; and

WHEREAS, Missouri has implemented an electronic telephone tracking system, known as "telephony", for the purpose of reporting and verifying the delivery of services;

NOW, THEREFORE, BE IT RESOLVED BY THE HOUSE OF REPRESENTATIVES OF THE STATE OF NEW MEXICO that the human services department be requested to convene a working group of stakeholders to address measures, including explanation of

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benefits and electronic or telephonic verification systems, to verify that medicaid recipients, in particular those with chronic illnesses or behavioral or developmental disabilities or who receive home health care, are in fact receiving the services that are billed; and

BE IT FURTHER RESOLVED that the working group be composed of experts in the field of medicaid fraud prevention, in addition to an equal number of medicaid recipients, or family members or guardians of recipients, who receive home health care, behavioral health services or services for people with disabilities; and

BE IT FURTHER RESOLVED that the working group report its findings and recommendations, including an estimate of the costs associated with implementation of such recommendations, to the legislative health and human services committee by no later than August 1, 2016; and

BE IT FURTHER RESOLVED that copies of this memorial be transmitted to the secretary of human services, the director of the medical assistance division of the human services department and the chair and vice chair of the legislative health and human services committee.

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