



**SANDOVAL COUNTY INDIGENT HOSPITAL AND HEALTH CARE
ORDINANCE NO. 09-11-19.7A**

SECTION 1. REPEAL

AN ORDINANCE REPEALING ORDINANCE NO. 05-04-12.A, THE SANDOVAL COUNTY INDIGENT HOSPITAL CLAIMS AND COUNTY HEALTH CARE ORDINANCE, AND ESTABLISHING THE RULES AND REGULATIONS GOVERNING THE SANDOVAL COUNTY MEDICAL ASSISTANCE PROGRAM AS AMENDED OR REVISED BY PRIOR BOARD ACTION.

SECTION 2. TITLE

Be it ordained by the Board of County Commissioners, the Governing Body of the County of Sandoval, herein after "County", that the Indigent Hospital and Health Care Ordinance establishing the County's Indigent Program Policy is hereby established.

SECTION 3. PURPOSE

Pursuant to Chapter 27, Article 5 NMSA 1978, the Indigent Hospital and County Health Care Act, as amended, the County recognizes it is responsible for ambulance transportation, inpatient hospital care and the provision of health care to indigent patients domiciled in the County for at least ninety (90) days; and by the previous enactment of County Gross Receipts Tax Ordinance No. 56623 effective January 1, 1991, imposing an excise tax of one eighth of one percent (1/8%) of the gross receipts [NMSA 1978 §7-20.E.9, as amended] establishing the Indigent Fund to provide a means to discharge this Act's obligations; and pursuant to Article 10 of the Statewide Health Care Act [NMSA 1978 §27-10-1 et.seq, as amended] enacted by Ordinance No. 82477 effective December 2, 1995 the County hereby dedicates to the County-supported Medicaid fund an amount equal to a gross receipts tax rate of one sixteenth of one percent (1/16%) applied to the taxable gross receipts reported during the prior fiscal year by persons engaging in business in the County and upon certification by the Tax and Revenue Department, transfer the one sixteenth of one percent (1/16%) in four (4) quarterly increments of one sixty-fourth of one percent (1/64%) by the last day of March, June, September and December of each year.

SECTION 4. DEFINITION OF TERMS

As used in this Ordinance all terms shall be consistent with the definitions set forth in NMSA, 1978 §27-5-4 Definitions, as amended, with the supplementation of the following terms. In order to discharge its responsibilities of the Indigent Hospital and County

Health Care Act and the Statewide Health Care Act the terms shall in all cases be interpreted to accomplish the purposes of the Acts.

1. **Act or Acts** means the Indigent Hospital and Health Care Act, NMSA 1978 §27-5-1, as amended, et. seq., and/or the Statewide Health Care Act, NMSA 1978 §27-10-1, as amended, et. seq.
2. **Applicant** means the patient or an interested party applying on behalf of the applicant, who may be the patient, the patient's spouse, parent/guardian, if the patient is a minor, or the guarantor of the health care service. In the event of the patient's death, the executor, administrator, personal representative, any relative or person responsible for the patient's hospital/ambulance bill or an interested party providing information on behalf of the deceased may be an applicant.
3. **Board** means the Board of County Commissioners of Sandoval County acting in their capacity to discharge its responsibilities pursuant to the Acts.
4. **Cost** means all allowable ambulance costs, medical costs or the costs of providing health care services, to the extent determined by action of the Board, for an indigent patient. Allowable costs shall be based on Medicaid fee-for-service reimbursement rates for hospitals, licensed medical doctors and osteopathic physicians, but shall not include the cost of servicing long-term indebtedness of a hospital, health care provider or ambulance service.
5. **County** means the County of Sandoval, New Mexico.
6. **County Assistance** means the financial assistance provided by the County to qualifying indigent patients by this ordinance and pertinent policy and/or the indigent hospital and health care operating manual as adopted by the Board.
7. **Community Services Director** means the Community Services Director.
8. **Documentation** means the records used to establish income, residency, assets, household composition or documents from a State or Federal agency that fulfill the County's Indigent Health Care Programs application eligibility process.
9. **Domiciled** means the permanent, fixed, and established dwelling, within the County, where the indigent patient resides continually for a minimum of ninety (90) consecutive calendar days.
10. **Dwelling** means a person's actual place of shelter lived in, a place of residence, abode or home.
11. **Fund** means the County Indigent-Special Revenue Fund established by the Board and maintained by the County Treasurer, consisting of the revenues generated from the one-eighth indigent gross receipts tax.
12. **Family/Household Income** means household earnings whose income to be included are those members who are financially dependent on each other. All sources of income, earned or unearned, by member of the household may be considered to assess income eligibility.
13. **Health Care Services** means treatment and services designed to promote improved health in the County indigent population, including primary care, prenatal care, dental care, provision of prescription medications, preventive care or health outreach, to the extent approved by the Board in the County's annual budget.

14. **Income Guidelines** means one hundred and eighty-five percent (185%) of the most recently published Federal Poverty Level or as adopted by the Board in the County budget.
15. **Health Care Assistance Program** means the program established by the County to accomplish the purpose of the Ordinance and to comply with the Acts.
16. **Indigent Person** means a person as defined pursuant to NMSA 1978 §27-5-4.C.
17. **Legal Custody** means a court order declaring a person solely responsible for the welfare of a minor or incompetent person.
18. **Licensed Funeral Home** means Licensed in the State of New Mexico.
19. **Ordinance** means Ordinance No. _____ adopted or amended by the Board.

SECTION 5. ADMINISTRATION

1. The Board shall, in its annual budget, set the Health Care Assistance Program's annual appropriation; including funds for County Supported Medicaid Fund, administrative and planning functions. By the first meeting of the new fiscal year the Board will adopt by resolution the Program's income guidelines, a listing of the Program's Health Care Services and, the criteria and cost limitation for medical care to be provided by both licensed in-state and out-of-state providers by the Program. The Board shall act on claims that are placed on the published agenda by the County Manager at a regular or special Board meeting. Rejection or disapproval of claims must be in writing.
2. The Board will authorize the County Manager to render a decision on behalf of the County Commission on any appeals claims.
3. The Board may contract with ambulance providers, hospitals or health care providers for the provision of health care services; review, verify and approve sole community hospitals, non-sole community provider hospitals and take other actions to comply with the Acts.
4. The County Manager shall appoint and supervise a Community Services Director who shall administer the Ordinance and abide by the Board's adopted Health Care Assistance Program's budget, policies, procedures and/or operating manual.
5. The Director shall prepare for the Board's action the Annual Report on all indigent health care funding, eligibility criteria, services provided by the Program, conditions for reimbursement and on other information required in the form provided by the New Mexico Policy Commission by October 1st of each year.
6. The Director is responsible to review the Federal Poverty Guidelines, the Program's reimbursement and service guidelines, the Fund's balance and projected revenue to determine if the Program's standard for indigence needs to be modified and submit her recommendations to the County Manager for presentation to the Board for their action.
7. The Director shall prepare an annual report on the Health Care Assistance Program.

SECTION 6. INDIGENT FUND

The County Indigent Fund, as established by the County Treasurer, shall consist of the revenue generated solely from the one-eighth of one percent gross receipts tax for Indigent Care, and shall not in any circumstance exceed the amount dedicated by the Board in the approved annual budget. Any remaining balance at the close of the fiscal year shall remain in the Fund. No funds shall be transferred out of the Fund; however transfers "in" to the Fund can be made if approved by the Board. All payments for indigent hospital and health care services shall be made from the Fund.

1. The Fund shall be used to:
 - a. Meet the County's contribution for support of sole community provider payments as calculated by the Tax and Revenue Department.
 - b. Pay for expenses of burial or cremation of an indigent person.
 - c. Pay all claims that have been approved by the Board that are not matched with Federal funds under the Medicaid program.
2. The Fund may be used to meet the County's obligation under NMSA 1978 §27-10-4, as amended.
3. The Fund shall be audited in the manner that all County funds are audited, and all records of payments and verified statements of qualifications upon which payments were made from the fund shall be public record.

SECTION 7. ELIGIBLE HEALTH CARE PROVIDER RESPONSIBILITIES

Data required by any in-state or out-of-state hospitals, ambulance services and health care providers shall be sent to the Director for presentation to the Board.

1. An ambulance service, hospital or health care provider in New Mexico or licensed out-of-state hospital, prior to filing a claim shall have placed on file with the County:
2. Current data, statistics, schedules and information deemed necessary by the Program to determine the cost for all patients in that hospital or cared for by that health care provider or tariff rates or charges of an ambulance service.
3. Proof that the hospital, ambulance service or health care provider is licensed under the laws of this State or the state in which the hospital operates.
4. Other information or data deemed necessary by the Program.
5. If the County is granted funding for sole community provider hospital(s) the hospital requesting or receiving Medicaid sole community provider payments shall:
 - a. Accept indigent patients and request reimbursement for those patients through the Health Care Assistance Program. The Program, upon approval of the Board, shall inform the hospital of the Board's action.
 - b. Confirm the amount of payment authorized by the Program for the previous fiscal year by September 30th of each year.
 - c. Negotiate with the Program the amount of indigent hospital payments anticipated for the following fiscal year by December 31st of each year.

- d. Provide the Human Services Department, prior to January 15th of each year, the amount of the authorized indigent payments anticipated for the following fiscal year after an agreement has been reached with the County and such other information as the Department may request.

SECTION 8. PAYMENT OF CLAIMS

A hospital, ambulance service or health care provider filing a claim with the Program shall:

1. File a claim for each patient separately with a detail itemized statement of the total cost.
2. File with the claim a verified applicant statement of qualification for ambulance service, indigent hospital care or care from a health care provider signed by the patient or by the parent or person having custody to the effect that he qualifies under the provision of the Act. The statement shall constitute an oath of the person signing it, and any false statements made knowingly constitute a felony.
3. The Program will notify the patient or responsible party in writing of their reason for denying a claim and provide an Administrative appeal process where the patient/responsible party or representative can provide records/documentation that the Program's reason for recommending denial was made in error.
4. Any hospital, health care provider or ambulance service aggrieved by any decision of the Board may appeal to the District Court pursuant to the provisions of NMSA 1978 §39-3-1.1.
5. All claims made to the Program shall not expire or become invalid due to the lack of money in the Fund during any fiscal year, but shall be carried over into the ensuing fiscal year and paid upon approval of the next year's budget.
6. The payment of any claim to an ambulance service, a hospital or health care provider on behalf of an indigent patient creates a preferred claim in favor of the Fund against the estate of the indigent patient. Proceeds recovered from such claims will be deposited in the Fund. Any lien created by the payment of a claim shall be released due to the lapse of time after fourteen (14) years has passed.

SECTION 9. SOLE COMMUNITY PROVIDERS

The Board upon authorizing payments to a Sole Community Provider hospital shall:

1. Determine eligibility for benefits and determine an amount payable on each claim for services to indigent patients.
2. Notify the sole community provider hospital of its decision on each request for payment while not actually reimbursing the hospital for the services that are reimbursed with Federal funds under the Medicaid program.

3. Confirm the amount of the sole community provider hospital payments authorized for each hospital for the past fiscal year by September 30 of the current fiscal year based on a report prepared by the hospital using a format prescribed by the Program.
4. Negotiate agreements with each sole community provider hospital providing services for County residents on the anticipated amount of the payments for the following fiscal year.
5. Provide the Human Services Department by January 15 of each year with the budgeted amount of sole community provider, by hospital, for the following fiscal year.

SECTION 10. EFFECTIVE DATE

As enacted by the Board of County Commissioners of Sandoval County on November 19, 2009, the effective date of Ordinance No. 09-11-19.7A shall be December 19, 2009. All prior and previous resolutions, rules, regulations and/or ordinances regarding Indigent Care are hereby repealed.

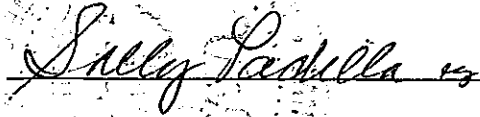
SECTION 11. SEVERABILITY

If the laws of the State of New Mexico or the Federal government regarding the subject matter of this Ordinance are amended, modified, repealed or changed in any manner that affects the provisions of this Ordinance, the provisions of this Ordinance shall be construed in such as manner as to achieve the intent of this Ordinance to the greatest extent permitted under the law.

If any section, paragraph, sentence, clause, word or phrase of this Ordinance is held to be invalid or unenforceable for any reason by any Court or Administrative Agency of competent jurisdiction, such holding shall not affect the validity of any other portion(s) of this Ordinance or any remaining provision(s) of this Ordinance.

The Board of County Commissioners of Sandoval County hereby declares it is the intent of the Board that this Ordinance be given the most liberal interpretation possible in order to achieve the intent of the Ordinance.

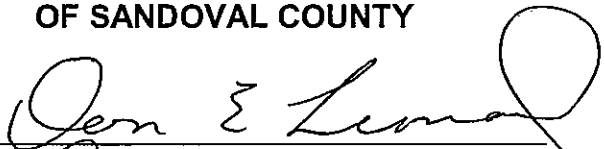
ATTEST:



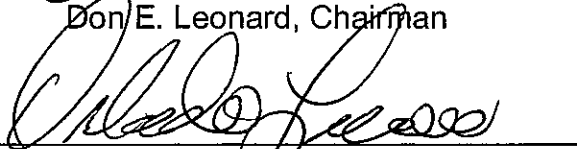
Sally Padilla
County Clerk



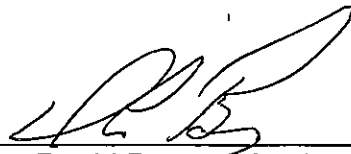
**BOARD OF COUNTY COMMISSIONERS
OF SANDOVAL COUNTY**



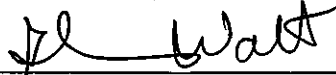
Don E. Leonard, Chairman



Orlando J. Lucero, Vice Chairman



David Beney, Member



Glenn Walters, Member

APPROVED AS TO FORM:

~~Darryl E. Mathews, Member~~
EXCUSED

David Mathews
County Attorney