### **NEW MEXICO HEALTH CARE AUTHORITY**

DIVISION OF HEALTH IMPROVEMENT - QUALITY MANAGEMENT BUREAU

## REQUEST FOR INFORMAL RECONSIDERATION OF FINDINGS (IRF)

Must use one page per disputed tag

Part A:		
Identifying Information		
Name of Provider:		Executive Director or Designee:
Date of QMB Survey:		Region/Location:
Services reviewed:		Contact Info:
DD Waiver Medically Fragile Waiver		
☐ Mi Via Wa	aiver Supports Waiver	
Part B:		
Tag #	Title of Standard / Regulation and Finding in Question	Rational for Dispute of Findings: (attachments must include all supporting evidence to be reviewed)
xecutive Director or Designee – Signature Date		
Date Received by IRF Chair:		

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# Instructions for completing the REQUEST FOR INFORMAL RECONSIDERATION OF FINDINGS (IRF) Form

- 1. Complete Part A, including agency information and QMB survey information
- 2. Complete Part B (Only use one form per disputed tag, if needed use additional forms)
  - Include the TAG NUMBER
  - Include the standard or regulation cited and the finding
  - Include the rational for disputing the finding
  - Include all supporting evidence to verify compliance with the required standard or regulation.
- 3. The Executive Director or Designee must sign and date the request form (electronic signature are acceptable).
- 4. The form must be received with all supporting evidence within 10 working days of receipt of the QMB final Report of Findings. Please note: no extension is granted for this process.
- 5. If you have questions about the IRF process, email the IRF Chairperson, IRF Chairperson, Valerie V. Valdez at valerie.valdez@hca.nm.gov for assistance.
- 6. Please submit your IRF forms and supporting evidence via mail to:

#### **ATTN: QMB Bureau Chief**

Request for Informal Reconsideration of Findings 5300 Homestead Road NE, Suite 200-211 Albuquerque, NM 87110 Attention: QMB IRF request

Note regarding the IRF Process:

The IRF process is informal and is provided as a courtesy to Providers. During the IRF process, providers must continue to implement their Plan of Correction. The IRF review is a desk review, and does not have a provision for a face-to-face meeting between the provider and the IRF Committee.

When the IRF request is received it will be processed and if approved it will be forwarded to the IRF Committee for review of the case.

The IRF Committee is comprised of 1 member from DHI, and 1 member from DDSD. The IRF Committee reviews each disputed tag / deficiency and will make a recommendation of Removal, Modification or may Uphold the disputed tag / deficiency.

Providers will be notified of the IRF outcome.

Failure to comply with requirements for filing an IRF (1 through 4 above) may stop the IRF from occurring.

QMB IRF form: v 1.0.7R 9/14; 9/2016; 9/2019;5/2025