



Susana Martinez, Governor  
Sidonie Squier, Secretary  
Julie B. Weinberg, Director

September 22, 2014

**CORRECTION:** Please note the following correction on the Human Services Department (HSD) letter dated September 14, 2014 regarding the Proposed Mi Via Home and Community-Based Services Waiver Settings Transition Plan in response to the Centers for Medicare and Medicaid Services (CMS) Final Rule. The last date for submission for written and recorded comments is incorrectly noted on page one (1) of the letter as October 14, 2014. HSD will accept written comments up to **5:00 pm Mountain Daylight Time on October 15, 2014** as indicated on page three (3) of the letter.




**HUMAN SERVICES**  
DEPARTMENT

Susana Martinez, Governor  
Sidonie Squier, Secretary  
Julie B. Weinberg, Director

DATE: September 14, 2014

TO: All Interested Parties

FROM:  Julie B. Weinberg, Director

CC: Cathy Stevenson, Director, Department of Health (DOH), Developmental Disabilities and Supports Division (DDSD)  
Roberta Duran, Bureau Chief, DOH/DDSD  
Angela Medrano, Bureau Chief, HSD/MAD, Exempt Services and Program (ESPB)  
Melanie Buenviaje, Staff Manager, HSD/MAD/ESPB  
Christine Wester, Mi Via Program Manager, DOH/DDSD

RE: Proposed Mi Via Home and Community-Based Services Waiver Settings Transition Plan in Response to the Centers for Medicare and Medicaid Services (CMS) Final Rule 2249-F/2296-F

The State of New Mexico Human Services Department (HSD) through the Medical Assistance Division (MAD) is accepting written and recorded comments for a period of 30 calendar days ending **October 14, 2014** regarding the proposed Mi Via Home and Community-Based Services (HCBS) Waiver Settings Transition Plan to bring the Mi Via Program into compliance with the CMS Final Rule 2249-F/2296-F. A public hearing is scheduled for October 14, 2014 to accept public testimony.

### **Background<sup>1</sup>**

The CMS Final Rule 2249-F/2296-F addresses several sections of the Social Security Act and makes changes to the 1915(c) HCBS waiver programs. CMS published this final rule on January 16, 2014 with an effective date of March 17, 2014. The Mi Via HCBS Waiver is a Medicaid 1915(c) HCBS self-directed waiver. The final rule provides New Mexico the option to combine existing waiver targeting groups. The final rule also established requirements for HCBS settings under the 1915(c), 1915(i) and 1915(k) Medicaid authorities, and person-centered planning requirements for Medicaid HCBS participants under 1915(c) and 1915(i). In addition, it clarifies the timing of amendments and public input requirements when states propose modifications to HCBS waiver programs.

The final rule requires that all HCBS settings meet certain qualifications<sup>2</sup>, including that the setting:

- is integrated in and supports access to the greater community;
- is selected by the individual from among all settings options;
- ensures individual rights of privacy, dignity and respect, and freedom from coercion and restraint;
- optimizes autonomy and independence in making life choices, and,

<sup>1</sup> CMS Fact Sheet: Summary of Key Provisions of the 1915(c) Home and Community-Based Services Waivers Final Rule. January 10, 2014.

<sup>2</sup> CMS Fact Sheet: Summary of Key Provisions of the Home and Community-Based Services Settings Final Rule. January 10, 2014.

- facilitates choice regarding services and who provides them.

### **Proposed Modifications to the Mi Via Waiver**

HSD/MAD along with the Department of Health (DOH) completed assessments of Mi Via services, settings, and person-centered planning to determine compliance with the CMS Final Rule 2249-F/2296-F. The two departments determined that Customized Community Group Supports services (CCGS) will require modification.

CCGS services, which are non-residential/non-institutional services, are designed to offer Mi Via participants flexible supports in integrated community settings. These supports can include participation in community day programs and centers that offer functional meaningful activities that assist with acquisition, retention or improvement in self-help, socialization and adaptive skills. CCGS may include Adult Day Habilitation, Adult Day Health, and other adult day support models.

HSD will address the following three areas which will be included in its proposed Mi Via HCBS Transition Plan:

1. HSD will expand the definition of CCGS in the Mi Via Service Standards to include information that CCGS services are provided in an integrated setting that supports opportunities for participants to access community resources and activities with others in their community.  
**Impact:** *HSD does not anticipate a service or financial impact to Mi Via participants or their healthcare providers with the additional requirements for CCGS services.*
2. HSD will revise provider packets for CCGS to include an attestation that services and supports provided will be delivered in a community-based integrated setting.  
**Impact:** *HSD does not anticipate a service or financial impact to Mi Via participants or their healthcare providers with the additional requirements for CCGS service.*
3. HSD will train consultant providers on the revised CCGS standards and monitor implementation through service and support plan development and the participant quarterly review form. Consultant provider responsibilities include monitoring the implementation of Mi Via services through service plan development. Therefore, adding the revised CCGS standards will pose no additional financial impact to Mi Via participants or the program. Currently there are 80 participants accessing this service and there will be no interruption in their services or their providers with the change in the definition.  
**Impact:** *HSD does not anticipate a service or financial impact to Mi Via participants or their healthcare providers with the additional requirements for CCGS services.*

### **Public Comment and Testimony Opportunities**

HSD has issued this public notice to accept written and recorded comments and public testimony regarding the proposed Mi Via Transition Plan. This notice, the proposed Transition Plan and other information can be found on the HSD webpage at:

<http://www.hsd.state.nm.us/public-notices-proposed-rule-and-waiver-changes-and-opportunities-to-comment.aspx>.

The State of New Mexico Human Services Department (HSD) through the Medical Assistance Division (MAD) is accepting written and recorded comments for a period of 30 calendar days ending **October 15, 2014** regarding the proposed Mi Via Home and Community-Based Services (HCBS) Waiver Settings Transition Plan to bring the Mi Via Program into compliance with the CMS Final Rule 2249-F/2296-F. A public hearing is scheduled for October 14, 2014 to accept public testimony.

HSD will address the following three areas which will be included in its proposed Mi Via HCBS Transition Plan:

1. HSD will expand the definition of CCGS in the Mi Via Service Standards to include information that CCGS services are provided provided in an integrated setting that supports opportunities for participants to access community resources and activities with others in their community.
2. HSD will revise provider packets for CCGS to include an attestation that services and supports provided will be delivered in a community-based integrated setting.
3. HSD will train consultant providers on the revised CCGS standards and monitor implementation through service and suport plan development and the participant quarterly review form. Consultant provider responsibilities include monitoring the implementation of Mi Via services through service plan development therefore adding the revised CCGS standards will pose no additional financial impact to Mi Via participants or the program. Currently there are 80 participants accessing this service and there will be no interruption in their services or their providers with the change in the definition.

**Impact:** *HSD does not anticipate a service or financial impact to Mi Via participates or their healthcare providers with the additional requirements for CCGS services.*

#### **Public Comment and Testimony Opportunities**

Further information can be found on the HSD webpage at:

<http://www.hsd.state.nm.us/public-notice-proposed-rule-and-waiver-changes-and-opportunities-to-comment.aspx>.

**Written comments must be submitted by 5:00 p.m. Mountain Daylight Time on October 14, 2014** by mail, recorded message, or email to: Jenn Chavez, Human Services Department, Medical Assisatnce Division, Program Policy & Integrity Bureau, P.O. Box 2348, Santa Fe, New Mexico 87504. Recorded messages may be left at (505) 827-3118 or toll free at (888) 997-2583 asking for extension 7-3118. Emails may be directed to: [JenniferL.Chavez1@state.nm.us](mailto:JenniferL.Chavez1@state.nm.us).

**A public hearing on the proposed Mi Via Transition Plan is scheduled to be held at the New Mexico State Records and Archives, in 2027 Pinon Room (Law Library), Santa Fe, New Mexico on October 14, 2014 @ 10:30 a.m.**

## **BACKGROUND**

On January 16, 2014, the Centers for Medicare and Medicaid (CMS) published Final Rule 2249-F/2296-F which addresses several sections of the Social Security Act and makes changes to the 1915(c) Home and Community-Based Services (HCBS) waiver program. It provides states the option to combine existing waiver targeting groups. The rule also establishes requirements for HCBS settings under the 1915(c), 1915(i) and 1915(k) Medicaid authorities, and person-centered planning requirements for Medicaid HCBS participants under 1915(c) and 1915(i). In addition, it clarifies the timing of amendments and public input requirements when states propose modifications to HCBS waiver programs.

The final rule requires that all HCBS settings meet certain qualifications<sup>1</sup>, including that the setting:

- Is integrated in and supports access to the greater community, including opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community, to the same degree of access as individuals not receiving Medicaid HCBS;
- Is selected by the individual from among all settings options that are identified and documented in the person-centered service plan and are based on the individual's needs and preferences;
- Ensures individual rights of privacy, dignity and respect, and freedom from coercion and restraint;
- Optimizes autonomy and independence in making life choices, and,
- Facilitates choice regarding services and who provides them.

The person-centered planning process was developed to ensure that individuals receiving long-term services and supports through HCBS programs under Medicaid waivers have full access to their community and to assure the plan addresses the health and long-term services and supports needs that are reflected in the participant's preferences and goals. The resulting person-centered plan will assist the participant in achieving personally defined outcomes and ensures that waiver services are provided in qualified HCB settings.

## **MI VIA WAIVER PROGRAM**

New Mexico has been at the forefront of HCBS self-direction waivers with the implementation of the Mi Via waiver in 2006. This waiver was originally designed and developed with person-centered planning at its core which is reflected in our current 1915 (c) HCBS Waiver (NM.0448),

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<sup>1</sup> *CMS Fact Sheet: Summary of Key Provisions of the Home and Community-Based Services Settings Final Rule.* January 10, 2014.



Mi Via Service Standards, and the New Mexico Administrative Code (NMAC) at 8.314.6 *Mi Via HCBS Waiver*. As such, Mi Via Service and Support Plans (SSPs) are developed through the person-centered planning process which guide the participant's selection of services that achieve personally defined outcomes in the most integrated community setting. The State will submit its request to renew the Mi Via waiver for another 5-year waiver period from October 1, 2014 through September 30, 2019. Renewal for the waiver must include the state's plans for implementing the Final Rule 2249-F/2296-F.

### **MI VIA ASSESSMENTS**

The Human Services Department/Medical Assistance Division (HSD/MAD) along with the Department of Health/Developmental Disabilities Division (DOH/DDSD) completed an initial assessment of the Mi Via Home and Community-Based Services (HCBS) settings by analyzing our current 1915 (c) HCBS waiver (NM. 0448), Mi Via Service Standards, and NMAC 8.314.6 (See **Table 1**). Secondly, the Departments assessed the Mi Via person-centered planning process (See **Table 2**). Thirdly, the Departments completed a detailed assessment of Mi Via service settings utilizing CMS-defined qualifications (See **Table 3, a-d**).

### **PERSON-CENTERED PLANNING**

Mi Via recognizes the essential role of participants in planning and purchasing services and supports. Consultants and Support Guides, who are well-versed in the philosophy and practice of self-direction, assist participants in the person-centered planning process during the development of the SSP. The Mi Via philosophy of self-direction reflects a strong commitment throughout the planning process to being sensitive to the person's preferences, responsibilities and arrangements when reducing any identified risks.

The State's assessment of the person-centered process evaluated the key provisions that must be reflected in the participant's plan. The SSP template, used to create the participant's SSP, meets the CMS requirements for person-centered planning. The following key provisions<sup>2</sup> are reflected in the Mi Via SSP:<sup>3</sup>

- Individual's strengths and preferences
- Clinical and support needs

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<sup>2</sup> *Informational Review of GHSC Clients, Medicaid Home and Community-Based Services New Rules*. Mercer Government Human Services Consulting. June 27, 2014. p 11.

<sup>3</sup> *Mi Via Self-Directed Waiver Program Service Standards. Appendix B: Service and Support Plan (SSP) Template*. New Mexico Department of Health. April 25, 2011

- Goal and desired outcomes
- Providers of services/supports, including unpaid supports provided in lieu of waiver or State Plan HCBS
- Risk factors and measures in place to minimize risk
- Individualized backup plans and strategies when needed

### **HOME AND COMMUNITY-BASED SETTINGS**

The State conducted its assessment of Mi Via services (which are provided in non-residential/non-institutional settings) to ensure compliance with CMS HCBS qualifications. The State, during its review of Mi Via waiver services and settings, determined that the Customized Community Group Supports (CCGS) service requires modifications to achieve compliance with the federal HCBS settings requirements.

As of August 2014, approximately 80 Mi Via participants have CCGS on their SSP. CCGS services, which are non-residential/non-institutional services, are designed to offer Mi Via participants flexible supports in integrated community settings. These supports can include participation in community day programs and centers that offer functional meaningful activities that assist with acquisition, retention, or improvement in self-help, socialization and adaptive skills. CCGS may include Adult Day Habilitation, Adult Day Health, and other adult day support models.

### **COMPLIANCE ACTIVITIES AND TIMELINES**

The State expects to achieve compliance with the new Federal Rule by July 1, 2015 by addressing the following three (3) areas for CCGS:

1. Expand the definition of CCGS in the Mi Via Service Standards to include information that CCGS services are provided in an integrated community setting that supports opportunities for participants to access community resources and activities with others in their community. Revised Service Standards will be released in March 2015.
2. Revise CCGS provider packets to include an attestation that the services and supports provided will be delivered in a community-based integrated setting. Revised CCGS provider packets will be implemented in March 2015. Current CCGS providers will be required to submit a completed attestation to ensure compliance with the revised standards. The State will send a notice to each CCGS enrolled provider to submit the required attestation. In addition, the State will inform participants and Consultants of the attestation via the Mi Via newsletter.

3. Train Consultants on the new CCGS service standards and monitor implementation through SSP development and the Participant Quarterly Review Form. DOH/DDSD will train Consultants beginning March 1, 2015.

Moving forward from submission of the Mi Via waiver renewal, the State will continue to monitor compliance with federal HCB settings requirements through:

- State oversight and monitoring of SSP development by Consultants.
- State oversight and monitoring of Mi Via service definitions and service standards.
- Verification of the CCGS attestation in provider enrollment packets.

At the time of the development of this Transition Plan, CMS had not released guidance to states for evaluating HCB non-residential settings. Should there be a need to make further changes to this Transition Plan as a result of additional CMS guidance, the State will initiate public input to inform and invite feedback from the public.



**Table 1:**  
**Assessment of Waiver, Service Standards, New Mexico Administrative Code (NMAC) Rules**

CMS RULE	APPROVED WAIVER NM.0448	SERVICE STANDARDS 02.2012	NMAC 8.314.6
<b>SUB CATEGORY</b> <b>HCBS SETTING REQUIREMENTS</b>			
Is integrated in and supports full access of individual receiving Medicaid HCBS to the greater community	Application: 2. Brief Waiver Description; Appendix D: Service Plan Development	p. 4, B-C	NMAC 8.314.6.9 Mi Via Home and Community Based Services Waiver: Section A.
Provides opportunities to seek employment and work in competitive integrated settings, engage in community life, control personal resources	Appendix C: Employment Supports; Appendix E -1: Participant Direction of Services	Appendix A: p 35-41	NMAC 8.314.6.15 F (2)
Ensures the individual receives services in the community, to the same degree of access as individuals not receiving Medicaid HCBS	Application: 2. Brief Waiver Description; Appendix C; Appendix E - 1: Participant Direction of Services	p. 4, B-C; 7	NMAC 8.314.6.9 A
The setting is selected by the individual from among setting options including non-disability specific settings and an option for a private unit in a residential setting	Application: 2. Brief Waiver Description; Appendix C; Appendix E - 1: Participant Direction of Services	p.11	NMAC 8.314.6.7 (U); NMAC 8.314.6.15 A
The setting options are identified and documented in the person-centered service plan and are based on the individual's needs, preferences, and, for residential settings, resources available for room and board	Application: 2. Brief Waiver Description; Appendix C; Appendix E - 1: Participant Direction of Services	p. 18-20	NMAC 8.314.6.15 C, D; NMAC 8.314.6.17 A (3-4); NMAC 8.314.6.17 C
Ensures an individual's rights of privacy, dignity and respect, and freedom from coercion and restraint	Appendix F; Appendix G	p. 6	NMAC 8.314.6.15 G (1) (d) (v)
Optimizes, but does not regiment, individual initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact	Appendix D; Appendix E-1	p. 4, B-C	NMAC 8.314.6.15 G (1); NMAC 8.314.6.15 G (1)(b); NMAC 8.314.6.15 G (5)(a)(iv)
Facilitates individual choice regarding services and supports, and who provides them	Application: 2. Brief Waiver Description; Appendix C; Appendix E - 1: Participant Direction of Services	p. 4, B-C, 11, 18-20; Appendix B	NMAC 8.314.6.7 H; NMAC 8.314.6.14 D; NMAC 8.314.6.15; NMAC 8.314.6.15 B; NMAC 8.314.6.15 G (3); NMAC 8.314.6.17 (2)

**Table 1:**  
**Assessment of Waiver, Service Standards, New Mexico Administrative Code (NMAC) Rules**

CMS RULE	APPROVED WAIVER NM.0448	SERVICE STANDARDS 02.2012	NMAC 8.314.6
<b>SUB CATEGORY</b> <b>PERSON CENTERED PLANNING</b>			
The person-centered planning process is driven by the individual	Appendix C: C1-C3: Case Management; Appendix D, Appendix E	p. 4 B-C; p. 14 C; p. 18 A; Appendix A: p.29 I; Appendix A p. 35 I;	NMAC 8.314.6.7 H; NMAC 8.314.6.14 D; NMAC 8.314.6.15; NMAC 8.314.6.15 B; NMAC 8.314.6.15 G (3); NMAC 8.314.6.17
Includes people chosen by the individual	Appendix C: C1-C3: Case Management; Appendix D, Appendix E	p. 18 A, B	NMAC 8.314.6.17 A (2)
Provides necessary information and support to the individual to ensure that the individual directs the process to the maximum extent possible	Appendix C: C1-C3: Case Management; Appendix D, Appendix E	p. 14 -15; p. 18 A; Appendix A: p. 5, 10-11	NMAC 8.314.6.10 A; NMAC 8.314.6.15 B-DNMAC 8.314.6.17;
Is timely and occurs at times/locations of convenience to the individual	Appendix C: C1-C3: Case Management; Appendix D, Appendix E	Appendix A: p. 5, 10-11	NMAC 8.314.6.17 A
Reflects cultural considerations/uses plain language	Appendix C: C1-C3: Case Management; Appendix D, Appendix E	p. 5; Appendix A p. 59	NMAC 8.314.6.15 G (1)(h)
Includes strategies for solving resolutions	Appendix D, Appendix F	p. 5, 20	NMAC 8.314.6.22
Offers choices to the individual regarding services and supports the individual receives and from who	Appendix C: C1-C3: Case Management; Appendix D, Appendix E	p. 4, B-C	NMAC 8.314.6.7 H; NMAC 8.314.6.14 D; NMAC 8.314.6.15; NMAC 8.314.6.15 B; NMAC 8.314.6.15 G (3); NMAC 8.314.6.17 (2)
Provides methods to request updates	Appendix C: C1-C3: Case Management; Appendix D, Appendix E	p. 15; Appendix A: p. 14	NMAC 8.314.6.17 F



**Table 1:**  
**Assessment of Waiver, Service Standards, New Mexico Administrative Code (NMAC) Rules**

CMS RULE	APPROVED WAIVER NIM.0448	SERVICE STANDARDS 02.2012	NMAC 8.314.6
Conducted to reflect what is important to the individual to ensure delivery of services in a manner reflecting personal preferences and ensuring health and welfare	Appendix C: C1-C3: Case Management; Appendix D, Appendix E	p. 11, 18-20, Appendix B	NMAC 8.314.6.17; NMAC 8.314.6.15 C
Identifies the strength, preferences, needs (clinical and support), and desired outcomes of the individual	Appendix C: C1-C3: Case Management; Appendix D, Appendix E	p. 11, 18-20, Appendix B	NMAC 8.314.6.17; NMAC 8.314.6.15 C
May include whether and what services are self-directed	Appendix C: C1-C3: Case Management; Appendix D, Appendix E	p. 11, 18-20, Appendix B	NMAC 8.314.6.15 G
<b>SUB CATEGORY WRITTEN PLAN REFLECTS</b>			
Setting is chosen by the individual and is integrated, and supports full access to the greater community	Appendix C: C1-C3: Case Management; Appendix D, Appendix E	p. 11, 18-20, Appendix B	NMAC 8.314.6.17; NMAC 8.314.6.15 C
Opportunities to seek employment and work in a competitive integrated setting	Appendix C: Employment Supports; Appendix E -1: Participant Direction of Services	Appendix A: p 35-41	NMAC 8.314.6.15 F (2)
Opportunity to engage in community life, control personal resources, and receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS	Application: 2. Brief Waiver Description; Appendix C; Appendix E - 1: Participant Direction of Services	p. 4, B-C; 7; Appendix A: p 35-41	NMAC 8.314.6.15 F (2); NMAC 8.314.6.9 A
Includes individually identified goals and preferences related to relationships, community participation, employment, income and savings, healthcare and wellness, education and others	Appendix C: Employment Supports; Appendix E -1: Participant Direction of Services	p. 11, 18-20, Appendix B	NMAC 8.314.6.17; NMAC 8.314.6.15 C
Includes risk factors and plans to minimize them	Appendix F; Appendix G	p. 15; Appendix A p.12	NMAC 8.314.6.14 E; NMAC 8.314.6.17 A (3)(h); NMAC 8.314.6.17 F; NMAC 8.314.6.15 (3)

**Table 1:**  
**Assessment of Waiver, Service Standards, New Mexico Administrative Code (NMAC) Rules**

CMS RULE	APPROVED WAIVER NM.0448	SERVICE STANDARDS 02.2012	NMAC 8.314.6
Distributed to the individual and others involved in the plan	Appendix D	Appendix A	NMAC 8.314.6.15 D(1)(d)
Includes purchase/control of self-directed services	Appendix D; Appendix E-1	p. 11, 18-20, Appendix B	NMAC 8.314.6.17; NMAC 8.314.6.15 C
Excludes unnecessary or inappropriate services and supports	Not applicable	p. 22	NMAC 8.314.6.16
<b>SUB CATEGORY</b>			
<b>ASSESS WAIVER AND STATE PLAN SERVICE DEFINITIONS</b>			
Case management	Appendix C	Appendix A: p. 5	NMAC 8.314.6.15 C
Personal plan facilitation	Appendix C	Appendix A: p. 50	NMAC 8.314.6.15 D
Homemaker/direct support services	Appendix C	Appendix A: P. 46	NMAC 8.314.6.15 E (1)
Home health aide services	Appendix C	Appendix A: p. 44	NMAC 8.314.6.15 E (2)
Community direct support	Appendix C	Appendix A: p. 26	NMAC 8.314.6.15 F (1)
Employment supports	Appendix C	Appendix A: p. 35	NMAC 8.314.6.15 F (2)
Customized community direct support	Appendix C	Appendix A: p. 29	NMAC 8.314.6.15 F (3)
In-home living supports	Appendix C	Appendix A: p. 31	NMAC 8.314.6.15 F (4)
Physical therapy	Appendix C	Appendix A: p. 64	NMAC 8.314.6.15 G (1)(a)
Occupational therapy	Appendix C	Appendix A: p. 64	NMAC 8.314.6.15 G (1)(b)
Speech and language pathology	Appendix C	Appendix A: p. 64	NMAC 8.314.6.15 G (1)(c)
Behavior support consultation	Appendix C	Appendix A: p. 63	NMAC 8.314.6.15 G (1)(d)
Nutritional counseling	Appendix C	Appendix A: p. 63	NMAC 8.314.6.15 G (1)(e)
Private duty nursing for adults	Appendix C	Appendix A: p. 53	NMAC 8.314.6.15 G (1)(f)
Acupuncture	Appendix C	Appendix A: p. 60	NMAC 8.314.6.15 G (2)(a)

**Table 1:**  
**Assessment of Waiver, Service Standards, New Mexico Administrative Code (NMAC) Rules**

CMS RULE	APPROVED WAIVER NM.0448	SERVICE STANDARDS 02.2012	NMAC 8.314.6
Acupuncture	Appendix C	Appendix A: p. 60	NMAC 8.314.6.15 G (2)(a)
Biofeedback	Appendix C	Appendix A: p. 60	NMAC 8.314.6.15 G (2)(b)
Chiropractic	Appendix C	Appendix A: p. 60	NMAC 8.314.6.15 G (2)(c)
Cognitive rehabilitation therapy	Appendix C	Appendix A: p. 61	NMAC 8.314.6.15 G (2)(d)
Hippotherapy	Appendix C	Appendix A: p. 61	NMAC 8.314.6.15 G (2)(e)
Massage therapy	Appendix C	Appendix A: p. 61	NMAC 8.314.6.15 G (2)(f)
Naprapathy	Appendix C	Appendix A: p. 61	NMAC 8.314.6.15 G (2)(g)
Native American healers	Appendix C	Appendix A: p. 62	NMAC 8.314.6.15 G (2)(h)
Play therapy	Appendix C	Appendix A: p. 62	NMAC 8.314.6.15 G (2)(i)
Transportation	Appendix C	Appendix A: p. 63	NMAC 8.314.6.15 H (1)
Emergency response service	Appendix C	Appendix A: p. 34	NMAC 8.314.6.15 H (2)
Respite	Appendix C	Appendix A: p. 56	NMAC 8.314.6.15 H (3)
Related goods	Appendix C	Appendix A: p. 55	NMAC 8.314.6.15 H (4)
Environmental modifications	Appendix C	Appendix A: p .42	NMAC 8.314.6.15 H (5)



**Table 2:**  
**Person Centered Planning Process**

<i>Written plan must reflect the following:</i>	
<i>Key Provisions of HCBSS Final Rule for Person-Centered Service Plan/Planning<sup>1</sup></i>	<i>Mi Via Service and Support Plan (SSP) Process/Planning*</i>
<b>Setting is chosen by the individual and is integrated in and supports full access to the greater community</b>	<b>Yes</b>
<b>Opportunities to seek employment and work in competitive integrated settings</b>	<b>Yes</b>
<b>Opportunity to engage in community life, control personal resources, and receive services in the community to the same degree of access as individuals not receiving Medicaid HCBS</b>	<b>Yes</b>
<b>Individual's strengths and preferences</b>	<b>Yes</b>
<b>Clinical and support needs</b>	<b>Yes</b>
<b>Goals and desired outcomes</b>	<b>Yes</b>
<b>Providers of services/supports, including unpaid supports provided voluntarily in lieu of waiver or State Plan HCBS</b>	<b>Yes</b>
<b>Risk Factors and measures in place to minimize risk</b>	<b>Yes</b>
<b>Individualized backup plans and strategies, when needed</b>	<b>Yes</b>

*\*supported by documentation found in the current 1915 (c) Home and Community-Based Services Waiver (NM. 0448), Mi Via Service Standards, and the New Mexico Administrative Code (NMAC) Rules*

<sup>1</sup> *Informational Review of GHSC Clients, Medicaid Home and Community-Based Services New Rules. Mercer Government Human Services Consulting. June 27, 2014. p 11.*



**Tables 3a-d:**  
**Mi Via Home and Community Based (HCB) Settings Assessment**

**Table 3a: Consultant Services**

	Settings: Consultant Services	
<i>Federal HCB Settings Requirements</i>	Consultant Services	Personal Plan Facilitation
Is setting integrated in and supports full access to the greater community?	yes	yes
Is setting selected by the individual from among setting options?	yes	yes
Does service ensure individual rights of privacy, dignity and respect, and freedom from coercion and restraint?	yes	yes
Is autonomy and independence in making life choices optimized?	yes	yes
Is choice regarding services and who provides them facilitated?	yes	yes
Is the planning process driven by the individual?	yes	yes
Are providers chosen by the individual?	yes	yes
Are the service, times and locations convenient to the individual?	yes	yes
Do the regulations and standards reflect cultural consideration and use plain language?	yes	yes
Are there protocols, strategies, or a complaint system available for participants to register grievances or complaints concerning the services they are receiving under the Mi Via program?	yes	yes

## Tables 3a-d:

### Mi Via Home and Community Based (HCB) Settings Assessment

**Table 3b: Living Supports and Other Supports**

	Settings: Living Supports & Other Supports			
<i>Federal HCB Settings Requirements</i>	In-home Living Supports	Homemaker/Direct support	Home Health Aide Service	Respite
Is setting integrated in and supports full access to the greater community?	yes	yes	yes	yes
Is setting selected by the individual from among setting options?	yes	yes	yes	yes
Does service ensure individual rights of privacy, dignity and respect, and freedom from coercion and restraint?	yes	yes	yes	yes
Is autonomy and independence in making life choices optimized?	yes	yes	yes	yes
Is choice regarding services and who provides them facilitated?	yes	yes	yes	yes
Is the planning process driven by the individual?	yes	yes	yes	yes
Are providers chosen by the individual?	yes	yes	yes	yes
Are the service, times and locations convenient to the individual?	yes	yes	yes	yes
Do the regulations and standards reflect cultural consideration and use plain language?	yes	yes	yes	yes
Are there protocols, strategies, or a complaint system available for participants to register grievances or complaints concerning the services they are receiving under the Mi Via program?	yes	yes	yes	yes

## Tables 3a-d:

### Mi Via Home and Community Based (HCB) Settings Assessment

**Table 3c: Community Membership Supports**

	Settings: Community Membership Supports		
<i>Federal HCB Settings Requirements</i>	Community Direct Supports	Customized Community Group Supports	Employment Supports
Is setting integrated in and supports full access to the greater community?	yes	no *	yes
Is setting selected by the individual from among setting options?	yes	yes	yes
Does service ensure individual rights of privacy, dignity and respect, and freedom from coercion and restraint?	yes	yes	yes
Is autonomy and independence in making life choices optimized?	yes	yes	yes
Is choice regarding services and who provides them facilitated?	yes	yes	yes
Is the planning process driven by the individual?	yes	yes	yes
Are providers chosen by the individual?	yes	yes	yes
Are the service, times and locations convenient to the individual?	yes	yes	yes
Do the regulations and standards reflect cultural consideration and use plain language?	yes	yes	yes
Are there protocols, strategies, or a complaint system available for participants to register grievances or complaints concerning the services they are receiving under the Mi Via program?	yes	yes	yes

*\*Need for expansion of the definition of CCGS in the Mi Via Service Standards to include information that CCGS services are provided in an integrated community setting that supports opportunities for participants to access community resources and activities with others in their community. Revised Service Standards to be released by March 1, 2015.*



**Tables 3a-d:**

**Mi Via Home and Community Based (HCB) Settings Assessment**

**Table 3d: Health and Wellness Supports**

	Setting: Health & Wellness Supports				
<i>Federal HCB Settings Requirements</i>	Behavioral Support	Nutritional Counseling	Private Duty Nurse	Specialized Therapies Services*	Therapies**
Is setting integrated in and supports full access to the greater community?	yes	yes	yes	yes	yes
Is setting selected by the individual from among setting options?	yes	yes	yes	yes	yes
Does service ensure individual rights of privacy, dignity and respect, and freedom from coercion and restraint?	yes	yes	yes	yes	yes
Is autonomy and independence in making life choices optimized?	yes	yes	yes	yes	yes
Is choice regarding services and who provides them facilitated?	yes	yes	yes	yes	yes
Is the planning process driven by the individual?	yes	yes	yes	yes	yes
Are providers chosen by the individual?	yes	yes	yes	yes	yes
Are the service, times and locations convenient to the individual?	yes	yes	yes	yes	yes
Do the regulations and standards reflect cultural consideration and use plain language?	yes	yes	yes	yes	yes
Are there protocols, strategies, or a complaint system available for participants to register grievances or complaints concerning the services they are receiving under the Mi Via program?	yes	yes	yes	yes	yes

*\*acupuncture, biofeedback, chiropractic, cognitive rehabilitation therapy, hippotherapy, massage therapy, naprapathy, Native American healing therapies, and play therapy*

*\*\*physical therapy, occupational therapy, speech language and pathology*