November 4, 2013

Senator Nancy Rodriguez, Chair
Disability Concerns Subcommittee

Senator William Soules
Sponsor, Senate Memorial 20

Dear Senators Rodriguez and Soules:

On behalf of the Senate Memorial 20 Taskforce, I am pleased to provide a consensus report with recommendations. The Taskforce was convened as a subcommittee of the Department of Health, Advisory Council on Quality. Doris Husted, Policy Director for the Arc of New Mexico and Jennifer Thorne-Lehman, Deputy Director, Developmental Disabilities Supports Division served as co-chairs.

DOH convened and provided support to the Taskforce in order to comply with the intent of SM20. I would like to thank and commend the members for their hard work and commitment. Those who participated honored the integrity of the process, which was to arrive at a set of consensus recommendations that represented input from diverse partners. These recommendations include action plans and identify strategies to measure success.

I would like to provide a DOH perspective on the recommendations for your consideration.

Recommendation 1: Expansion of the Developmental Disabilities Home and Community Based Waiver

The Taskforce was charged with determining the actions required to reduce the time between applying for the waiver and being offered waiver services to no more than three years by July 1, 2017. According to this timeline, 3900 additional people would have to be added to the program. This approach is not feasible given the lack of system capacity to provide necessary services in a manner that supports quality and assures health and safety.

A more measured approach of adding 300 and 500 people to the system each fiscal year would reduce the wait time and allow for the successful growth of the service system. This strategy requires annual appropriations to bring additional people into the program and allow for the effective management of the program by DOH and the Human Services Department. In partnership with the legislature, a more aggressive approach to waiver allocations is in process. In FY13, three hundred and twenty eight (328) people were allocated and in FY14, an additional four hundred and sixty five (465) will be moved off the waiting list and into services.

I am also including with this letter an explanation of the FY13 waiver reversion (Attached). A portion of the reversion will be used to serve additional people in FY14; however, funds from "ramp up" of newly allocated individuals will be needed to support them as their utilization increases in FY14 and FY15. The fact that funds revert each year does not mean that new funding will not be required if we are to reduce the wait and add significantly more people to the program over time.

DEVELOPMENTAL DISABILITIES SUPPORTS DIVISION
810 San Mateo, Suite 204 • P.O. Box 26110 • Santa Fe, New Mexico • 87502-6110
(505) 476-8973 • FAX: (505) 476-8845 • http://www.nmhealth.org

Recommendation 2: Increase Attractiveness of Mi Via Home and Community-Based Medicaid Waiver

DOH agrees that improved marketing and adding a Peer-to-Peer Support program may be effective in increasing the number of waiver participants who initially choose or transfer and remain in the Mi Via Program. This program has proven effective in meeting the needs of many people at an average annual cost that is approximately half that of the traditional DD Waiver. Increased selection of Mi Via in FY13 has already supported the allocation of additional individuals for FY14.

Recommendation 3: Improve Intake, Information and Referral and Community Navigation

Consistent with this recommendation, the DOH, DDSD Intake and Eligibility Unit and Community Programs Bureau is currently taking steps to improve internal processes. The FY15 Executive Budget request does not include FTE expansion for this purpose. We will maximize current staff and information technology resources before considering a request for additional FTE in FY16.

DOH is working with HSD/Income Support Division to address issues that have historically slowed down Medicaid eligibility determination. When the new ASPEN system is fully operational at HSD/ISD, it will support more efficient eligibility determination.

If funding is appropriated to contract for Community Navigation, DOH believes the result would be greater use of generic resources and natural supports. Accessing these supports, in combination with paid waiver services, increases integration and promotes better outcomes than either approach in isolation.

Recommendation 4: Expand and Redesign State General Fund Program Into a Flexible Supports Model

DOH has experience through the previous state funded Self Directed Family Support Program with successful alternatives to Medicaid Waiver services. This recommendation would expand on that concept to meet the needs of those waiting without the cost of the comprehensive DD Waiver or Mi Via Programs. DOH would welcome the opportunity to develop a pilot program related to this recommendation.

If you have questions or need additional information on the SM20 Task Force Report, please contact Jennifer Thorne-Lehman (Jennifer.thorne-lehman@state.nm.us) or Doris Husted (dhusted@nmarc.org). If you want additional information on current DOH programs and services for individuals with developmental disabilities, please contact Jennifer or me (cathy.stevenson@state.nm.us). Thank you for your ongoing support of New Mexicans with disabilities and the programs that support them.

Sincerely,

Cathy Stevenson

Cathy Stevenson, Director
Developmental Disabilities Supports Division

Xc: Retta Ward, Cabinet Secretary
Brad McGrath, Chief Deputy Secretary
Lyn Gallagher, Deputy Secretary
Doris Husted, Policy Director, Arc of New Mexico
Senate Memorial 20 Taskforce
LHHS Disabilities Concerns Subcommittee