



**ACQ Executive Committee Listening Session**  
**Meeting Summary Notes**  
**January 9, 2025**  
**ZOOM Meeting**  
**9:00AM to 10:00AM**

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**33 Participants**

**ACQ Executive Committee Attendees:** Scott Doan, *Deputy Director, Developmental Disabilities Supports Division (DDSD)*, Tracy Perry, *Co-Chair, ACQ Executive Committee and CEO, Direct Therapy Services*, Siri Guru Nam Khalsa, *Co-Chair, ACQ Executive Committee, Advocate and Nurse Educator*, Lisa Blue, *Special Education Consultant*, Daniel Ekman, *Advocate, Developmental Disabilities Council, Program Manager, Center for Self Advocacy*, Kelley Harvey, *ACQ Administrator*

**I. Welcome/Introductions**

- A. Tracy Perry welcomed participants

**II. Open Floor for Comments**

**A. Tracy Perry opened discussion on the following:**

1. How to improve the ACQ
2. Advice for DDSD
3. Other topics or questions

**B. Comments:**

1. Question was asked about ACQ's position regarding the Paid Family Leave Act or any concerns related to the legislation sessions for early 2025.
  - a) Tracy added that this has not been on the agenda for discussion and no position from the ACQ Executive Committee. Question was deferred to ACQ Board Members.
  - b) ACQ attendee said they would send an example of a legislation request related to the State of New Mexico to consider asking CMS for a separate waiver designed for individuals who are primarily diagnosed with a severe mental illness and substance abuse issues and whether this is a direction the State of New Mexico should or should not take.
    - (1) See attached document, reference number 1.
2. Related to comment 1, House Bill 11, it was recommended to review the bill. This bill does not exempt Medicaid fee-for-service providers from paying the employer contribution of the paid family medical leave for their employees. The employees would still be required to pay and the percentages have not changed from 2024. It's a 0.4% employer contribution and a 0.5% employee contribution. Providers would be expected to pay 0.4%, which equals approximately two million dollars out of their revenue to meet the employer contribution standard for the House

bill. The commenter noted that ACQ would have to consider the impact to the providers of services for the people we represent.

3. Commentor number 3 did not have dates on hand to provide follow-up requests, but wanted to flag there are two pending dates related to Individual Service Plan (ISP) being under review and feedback was requested on the waiver applications. Particularly for those who are providers should provide feedback to the Developmental Disabilities SupportsDivision (DDSD) and those who are participants.
  - a) Scott Doan followed up on the same date as of ACQ Listening Session 01.09.2024, that the ISP re-design deadline was 1/3/2025. However, it has been extended to close of business tomorrow, 1/10/2025 and if you have feedback, please send feedback directly to Claudia Rice at [claudia.rice@hca.gov](mailto:claudia.rice@hca.gov) and the provider application deadline is close to business 1/10/2025. If you have feedback, please send feedback directly to Angie Brooks at [angie.brooks@hca.nm.gov](mailto:angie.brooks@hca.nm.gov)
4. Referenced back to comment number 3 ISP, the redesign is intended to apply to all waivers. Currently, we have an ISP and traditional DD waiver and Mi Via there is a Service and Supports Plan (SSP) and the ISP is Individualized Service Plan. The ISP, there is a draft and it is more of a traditional version and it does not really apply to Mi Via the way it's being presented right now, despite others saying it's for all waivers. It seems there is a disconnect because based on what has been read, it does not address the Mi Via waiver.
5. Comment made on an issue about Legally Responsible Individual (LRI) approvals. An LRI is defined as a person who has a duty under State law to care for another person. This category typically includes: the parent (biological or adoptive) of a minor child; the guardian of a minor child who must provide care to the child; or the spouse of a member Note: this has nothing to do with guardianship or power of attorney. New Mexico has asked the Federal government to allow this for all waivers because of staffing shortages. Additionally, New Mexico has developed a form that applies to everyone for this, however – Conduent does not process these forms that allow the employee to work. Conduent has stated they have not received direction from New Mexico and participants are currently in a holding position. A response from Conduent: "We are aware that the form has been updated from the New Mexico Department of Health, or now it's the HCA. With the form being updated and new, we are still awaiting for direction from the state to implement this new form into our pre-hire process. If the participant is needing immediate care, we advise to seek alternative employees as a backup in the meantime, in order to provide services for the participant." This issue has been going on for months.
  - a) Scott Doan responded that New Mexico does not approve LRIs. There is an attestation form that must be completed to include a



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signature attesting that the LRI meets all criteria. He will follow up with the Community Programs Bureau to learn more about the disconnect between the State and Conduent in terms of not receiving the form.

- (1) Clarification made from the commenter, Conduent is not having issues with receiving the form. The issue is Conduent has stated they have no guidance on how to process it and what that means.
- 6. The commenter stated clear directives are needed as related to what commenter number 5 stated above. The waiver amendments that were submitted late last year were approved, but the community of providers, vendors, state clients on traditional waiver, participants on the Mi Via waiver have received no direction on how to implement them. Example, incentivized rates and rate changes for different types of therapy on Mi Via. Third party assessors reviewing budgets with the new rates are denying budgets due to being told that the rate needs to be requested as an exceptional rate, when within that approved waiver amendment is an appropriate rate. There has not been any information received on this.
- 7. Comment made on continuing to see problems with the Income Support Division with Medicaid. Example of seeing requests for denials that don't exist and it's holding up someone's Medicaid from being processed; for someone who is new to the waiver, this essentially creates a false delay of being able to access services. We're seeing things processed incorrectly by the county office or the local office instead of the institutional care waiver unit. On top of that, the hold times are increasing, and providers can't have this conversation with the institutional care and waiver unit like consultant agencies or case management agencies.
- 8. The commenter said there is an issue related to budgets. There was a memo that was sent out January 3rd, 2025 from the Medicaid Communication Updates that was shared between ADDCP members regarding people's budgets and impacts on the budgets related to revalidation of providers. Everything switched over to YES.NM.GOV and we all needed to shift over so we could revalidate. There was an issue with people who needed to revalidate in December and it caused a lot of problems. The issue impacts every provider on the budget, even if their provider ID is okay, the entire budget is being held and a provider is not able to bill. There was a notice sent to Medicaid providers stating that the State of New Mexico recently transitioned to the new enrollment system and some providers with licenses expiring in December received termination notices effective December 31st, 2024 and this impacted providers being shown as inactive in the new system. As of January 3rd,

2025, they began reinstating providers terminated between November 8th and December 31st. There has not been any communication about that and I know Alta Mira was one of the agencies that fell within that category. There's a lack of communication related to that and as of January 9th, 2025, I have not been able to revalidate and the Customer Care line cannot help you.

- a) Additional notes: there has been discussion in the provider community that Medicaid enrollment (NPI number) has been terminated in the YESNM system. Some case managers have reported receiving RFIs on any budget submissions with service lines for these affected providers, saying they cannot be processed due to the termed provider IDs. This impacts every provider on the budget even if their Provider ID is okay since the entire budget is held up by those that are not.
- b) A Notice to Medicaid Providers from Conduent went out on 1/03/2025 stating:

The State of New Mexico recently transitioned to a new provider enrollment system. Some Providers, with licenses that expired in December, received termination notices effective December 31, 2024. Impacted Providers are shown as inactive in the new system.

We understand that providing services to our Medicaid population is vital, and as of January 3, 2025, have begun reinstating all providers terminated between November 8, 2024 through December 31, 2024 for failure to recertify. We are working to complete all reinstatements no later than 5:00 pm on Sunday, January 5, 2025. Any claims impacted by the disenrollment will be automatically adjusted. For questions or concerns, please contact the Consolidated Customer Service Center at 1-800-299-7304.
- c) Scott Doan asked additional questions to the commenter if the issue had been resolved for them and whether they have been able to bill/receive reimbursement. The commenter stated they have not billed yet, but would find out at a later date. The commenter's information and others' who have been impacted by this issue, Scott will send their information to the Office of the Secretary (specifically Kathy Slater-Huff, Deputy Secretary) for follow-up.



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9. The commenter requested encouraging improvements in communication when situations like comment 7 and 8 occur. A proactive stance in notifications, updates and implementation would be helpful for all.
  - a) Scott Doan acknowledged feedback received and stated there are conversations occurring on this.
10. The commenter flagged there's an issue on the PCG Rate Study of 2023. Under the supported living category two, the current rate was \$258.69 and the recommended rate was \$258.69, which should show a 0% rate increase. In the PCG Rate Study, there is a typographical error that shows a 14% rate increase for supported living category two and on the HCA website, on the DD Waiver rate schedule, in red "Updated According to PCG Rate Study". Supported living category two shows a 14% rate increase and the rate being paid for supported living category two on the rate sheet is \$310.60. If that number has been added into Omnicaid, then providers are going to be recouped for that difference because the rate increase was not in the amendment that was sent to CMS. It has not been approved. An effort was made to contact Kyra Ochoa, but as of 1/08/2025, the amount is still showing \$310.60
  - a) Scott Doan acknowledged there is an error. The Medical Assistance Division and Deputy Secretary Ochoa are aware of the error. There has been a reissue of the PCG Rate Study report. Additionally, they are looking to update the fee schedule for support living category two at \$272.45, but the eta on this is unknown. Another update is on the DD Waiver Rate table – for community integrated employment intensive is listed twice and the codes are the same, but the rate is fine. There will be a revision on this.
11. Question was asked, why is there not a more formal celebratory communication about the CMS approval?
  - a) Scott Doan stated they're working with the HCA Communication Office to send out a formal notice.
12. Question was asked if there was a taxonomy issue occurring that needs to be discussed? This was the taxonomy code that was preventing people from billing appropriately.
  - a) Scott Doan stated unless there is different information, but that issue was resolved. The latest issue was not related to the taxonomy, but a change from the older system to a new system.
  - b) Tracy Perry added that the taxonomy codes have been addressed, but as a Development Disabilities (DD) Waiver and Electronic Visit Verification (EVV) Provider, back in October, the first time that billing was impacted, anybody for EVV was denied

and it has not been paid out. However, the EVV has been fixed, but those denials need to be reprocessed by Authenticare or Conduent because as providers we cannot go into that system. Jenni McNab, with DDSD is facilitating and leading on this effort.

13. Next commenter requested more information about the DDSD newsletter and emails that were promoting training for the EVV because the coding structure has been updated. They wanted more information on how to sign up for the training and location.

a) Scott Doan did not have additional information on this.

14. Question, is there any information on the DD Waiver and the Mi Via Waiver on how many participants are in supported living (family living and in-home living supports). How many people are choosing residential supports? This information would be important in seeking rate increase for our residential services, particularly the age group as well. It would be good to know and understand budget costs and prepare the legislature to know, including providers to understand the scale of support for the next 2-3 years.

a) Scott Doan confirmed we have that information and we can break it down by number of people in each service in terms of billing code, but it can also be by supported living, family living, and customized in-home support. We do include this information when we are developing our budgets and projections to both the legislature and the executive to anticipate new allocations and for current allocations that are going through the process to project for the next fiscal year. He would not recommend including this information in a newsletter and would talk to Chris Futey and Jen Rodriguez about this.

15. Question, do you have a breakdown by qualifying condition(s) to compare what's coming up to what we've got now to align ourselves to what's coming?

a) Scott Doan responded that it is more challenging.  
b) Another ACQ attendee asked why do you need to know what my child's condition is? You can't make comparisons because of a diagnosis and it doesn't conclude to say what they're going to need or what they're going to be eligible for. One person's needs may not be the same as someone who has the same diagnosis. They recommended being careful about releasing HIPAA information.

(1) Scott Doan acknowledged the attendee for sharing their input and stated we would not disclose any protected health information. Each person is their own person that has their own unique qualities and abilities and characteristics and personality.



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c) The commenter with the question stated they have been working for over a decade in complying with the DDC law, where everybody who provides service to DD people provides certain information. Early Childhood is projecting a significant increase in folks with autism. It's a wave that we're not going to be prepared for. There's a number of studies of longevity and the University of Syracuse is one of the main facilities where they break down the lifespans to where we can actually determine in the future what kind of therapists we need or if we need more behavioral consultants to be prepared for it has nothing to do with anyone's individual PHI. We have to plan for the future and we have to provide money for it. And the wave that's coming, we are not ready at all for it.

**C. Closure of Listening Session, 10AM MST**

1. Tracy Perry closed out session and stated transcript was completed

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**Follow-Up Points:**

- Next upcoming ACQ Meeting scheduled for February 20, 2025 from 9AM to 1PM MST

**Zoom Information:**

<https://us06web.zoom.us/j/87658031494>

Meeting ID: 876 5803 1494

One tap mobile

+13462487799,,87658031494# US (Houston)

+16694449171,,87658031494# US

**DDSD ACQ website:**

Advisory Council on Quality - <https://www.hca.nm.gov/advisory-council-on-quality/>

ACQ Public Comments: <http://www.cdd.unm.edu/other-disability-programs/disability-health-policy/ddsdcourses/quality-public-comments.html>

**DDSD ACQ website:**

[Advisory Council on Quality - New Mexico Human Services Department \(nm.gov\)](#)

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