



<p><b>What is Mi Via?</b></p>	<p>Mi Via is the New Mexico Department of Health Developmental Disabilities Support Division’s self-directed waiver program. In alignment with the Centers for Medicaid and Medicare Services (CMS) Final Rule for all Home and Community Based-Services (HCBS) settings, Mi Via is designed to support participants to have decision-making authority over their Waiver services and take direct responsibility in the management of their services within a system of available supports. With more choice, control, flexibility, freedom offered through self-direction, there is more participant responsibility and accountability.</p> <p><b>CMS Final Rule Setting Requirements</b></p> <p>All individuals receiving Home and Community Based Services (Waiver services)</p> <ul style="list-style-type: none"> <li>• Engage in community life</li> <li>• Have access to the community</li> <li>• Control their personal resources</li> <li>• Seek employment and work in competitive settings</li> <li>• Make informed choices about their lives</li> </ul> <p><b>Guiding Principles of Mi Via</b></p> <p>All participants:</p> <ul style="list-style-type: none"> <li>• Have value and potential</li> <li>• Will be viewed in terms of their abilities</li> <li>• Have the right to live, work learn and receive services and supports to meet their individual needs, in the most integrated setting possible within their community.</li> </ul> <p>See Mi Via Service Standards <a href="https://nmhealth.org/publication/view/regulation/3380/">https://nmhealth.org/publication/view/regulation/3380/</a></p>
<p><b>Is there a Resource Allocation?</b></p>	<p>Yes. By age.</p> <p>0-17 (23, 443)</p> <p>18-20* (54, 589) (*68,589 if using In Home Living Services)</p> <p>21 &amp; older (72, 710)</p> <p>Participant budget authority means that participants have the flexibility within the management of their budgets for services and the budgets are developed using a range of rates for services.</p> <p>See Appendix C Range of Rates <a href="https://nmhealth.org/publication/view/regulation/3383/">https://nmhealth.org/publication/view/regulation/3383/</a></p>

<p><b>What types of plans are used and who develops them?</b></p>	<p>Service and Support Plan (SSP) are developed through a person-centered approach by the participant with assistance from their consultant and circle of support that the participant chooses to work with. A participant may choose to use Plan Facilitation as a Mi Via Waiver service to assist with the development of the SSP. See Appendix B Service and Support Plan SSP Template <a href="https://nmhealth.org/publication/view/regulation/3382/">https://nmhealth.org/publication/view/regulation/3382/</a></p>
<p><b>What is the role of the individual and/or family on Mi Via?</b></p>	<p>Participants, their families and/or authorized representatives (if applicable), take direct responsibility for managing their services and managing their service plan and budgets, establishing their own employees and/or selecting their own vendor agencies to provide services with support from existing systems within the Mi Via program including the ability to choose who will assist them with establishing ongoing services and supports through Mi Via program. They are responsible for working with a Consultant to maintain program eligibility, for developing the Service and Support Plan/budget, monitoring their service budget, and/or appropriately designating a non-paid Employer of Record (EOR), if needed. The EOR is a nonpaid person who assists with the oversight of employee functions if using employees and/or the EOR can assist with vendors for services if using vendors.</p> <p>Participants/EOR provide for or arrange for the training they feel is necessary for their employees and/or vendors to have, for keeping records and documents of vendor and/or employee agreements, EOR packets, copies of timesheets and invoices and maintaining copies of Medical and Financial eligibility.</p>
<p><b>Who does Mi Via serve?</b></p>	<p>Mi Via only serves those individuals who have received a Developmental Disabilities Waiver (DDW) allocation or a Medically Fragile Waiver (MFW) allocation from the Department of Health Developmental Disabilities Supports Division (DOH DDS). If you are not yet in a Waiver program, you must register for services with the DOH/DDS Intake and Eligibility Unit (505-841-5552).</p>
<p><b>If I am already on a Waiver program, will I lose my allocation if I want to change waiver programs?</b></p>	<p>No you will not lose your allocation or have to go back on to the “waiting list”. If you are currently being served by the DD waiver or the MF waiver and you decide that you want to participate in Mi Via, or if you are on the Mi Via waiver and would like to participant on the applicable Traditional DD or MF waivers, you will need to fill out a Waiver Change Form (WCF) to request a change in waiver programs. You will receive a WCF upon request from the DOH DDS Mi Via Unit, <a href="https://nmhealth.org/about/ddsd/pgsv/sdw/">https://nmhealth.org/about/ddsd/pgsv/sdw/</a> for the MF or the local DOH/DDS Regional Office for DD. <a href="https://nmhealth.org/about/ddsd/region/">https://nmhealth.org/about/ddsd/region/</a></p>