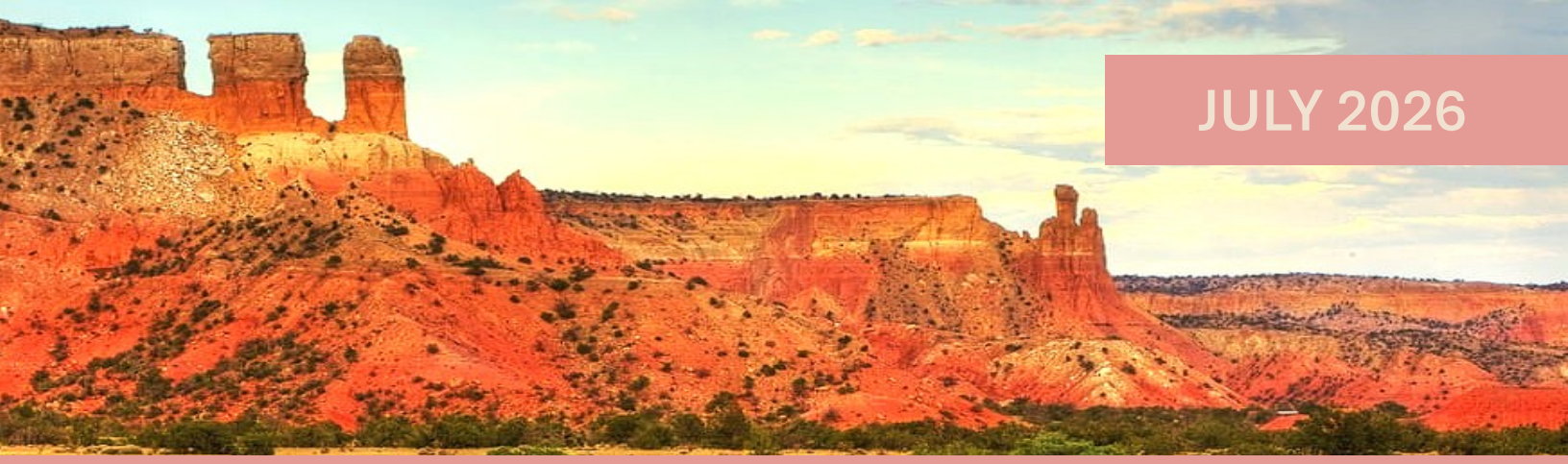


JULY 2026

DEVELOPMENTAL DISABILITIES SUPPORTS DIVISION

NEWSLETTER

INSIDE THIS ISSUE

From the Director's Desk - Jennifer Zwally, Director

Happy Summer,

As always, there is a great deal happening across the New Mexico Health Care Authority (HCA) and the Developmental Disabilities Supports Division (DDSD). As we begin Fiscal Year 2027, I would like to take a moment to share some exciting news and highlight several priorities that will guide our work in the year ahead.

I am proud to announce that the Centers for Medicare & Medicaid Services (CMS) has approved the renewal of both New Mexico's Developmental Disabilities (DD) Waiver and Medically Fragile Waiver for another five-year cycle. This achievement reflects the tremendous collaboration among providers, self-advocates, families, community partners, DDSD staff, and many other stakeholders who contributed feedback and expertise throughout the renewal process. Thank you for your partnership and commitment to ensuring these programs continue to meet the needs of New Mexicans.

As we move forward into FY27, DDSD remains focused on several key priorities:

- Monitoring and expanding provider capacity and the direct care workforce to support our growing waiver population and ensure access to quality services throughout the state.
- Providing greater clarity and guidance regarding service standards and program requirements across all DDSD programs.
- Updating authoritative documents, policies, and guidance to align with recently approved waiver renewals.
- Continuing to prioritize the health, wellness, and safety of individuals receiving services through proactive monitoring, collaboration, education, and quality improvement efforts.
- Strengthening partnerships with other state agencies to improve supports for children with intellectual and developmental disabilities (IDD) and individuals with co-occurring or dual diagnoses.

- Implementing the National Core Indicators (NCI) Survey to gather valuable feedback from individuals receiving services and their families, helping us measure outcomes, identify opportunities for improvement, and strengthen the quality of our service system.
- Advocating for provider rate increases and preparing for the selection of a vendor to conduct the next comprehensive rate study.
- Continuing to focus on quality, accountability, and person-centered practices throughout our service delivery system.

DDSD remains committed to working collaboratively with providers, advocates, individuals receiving services, families, and community partners to strengthen New Mexico's system of supports. Together, we have made significant progress, and I am excited about the opportunities ahead as we continue building a system that promotes independence, choice, inclusion, safety, and meaningful community participation for people with IDD.

Jen

DDSD Mission Statement

To serve those with intellectual and developmental disabilities by providing a comprehensive system of person-centered community supports so that individuals live the lives they prefer, where they are respected, empowered, and free from abuse, neglect, and exploitation.

To Act With:

- **Accountability**
- **Collaboration**
- **Respect**
- **Transparency**

To Be:

- **Person Centered**
- **Proactive**
- **Innovative**
- **Inclusive**

New Mexico ACRE Coming Fall 2026

Contributor: Alix Dean, Community Inclusion and Supported Employment Lead

The Association of Community Rehabilitation Educators (ACRE) Basic Employment Services Certificate is the nationally defined entry-level credential for employment service professionals. The Developmental Disabilities Supports Division has been working with Partners for Employment to create and launch a New Mexico ACRE training starting in Fall 2026.

NM ACRE is designed to prepare professionals supporting people with intellectual and developmental disabilities to seek and maintain competitive integrated employment. The NM ACRE credential meets certification requirements for Developmental Disabilities Waivers community integrated employment service providers. The training and credential are beneficial for anyone providing community inclusion or employment services to people served through the Developmental Disabilities Waiver, Mi Via Waiver, and State General Fund programs.

The training will be made available *for free* to DDSD providers, vendors, and family members. You do not have to be a job developer or job coach to benefit.

NM ACRE is the culmination of a three-year project through the Partners for Employment. This curriculum is:

- Rooted in New Mexico culture
- Efficiently formatted to reduce credentialing time
- Accessible online via an interactive new learning platform
- Shaped by learner feedback

The first cohort of learners can enroll this Fall for a 16-week format. This is significantly shorter than previous training pathways. Additional training schedules (4-week options) coming in Spring 2027. ACRE credential is earned upon completion. There is no test.

Contact Amanda V Cowan, AVCowan@salud.unm.edu at Partners for Employment about enrollment timelines.

HR-1 and Exemptions

Contributor: Jen Zwally, DDSD Director

Many of you are aware of recent federal changes included in H.R. 1 that establish Medicaid community engagement requirements, sometimes referred to as work requirements, for certain Medicaid beneficiaries beginning in 2027. Under federal law, some adults enrolled in Medicaid will be required to demonstrate participation in work, education, volunteer activities, or other qualifying community engagement activities as a condition of maintaining Medicaid eligibility.

DDSD would like to reassure providers, individuals receiving services, and families that individuals with intellectual and developmental disabilities (IDD) are not subject to these community engagement requirements. Federal law and implementing guidance provide exclusions and exemptions for individuals with disabilities and those with significant physical, intellectual, developmental, behavioral health, or medical conditions that substantially impact daily functioning.

Based on our current understanding of the federal requirements, individuals enrolled in DDSD-operated programs, including those receiving services through the Developmental Disabilities Waiver, Mi Via Waiver, Medically Fragile Waiver, State General Fund programs, and Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID), are expected to qualify for these disability-related exemptions and therefore will not be required to meet community engagement or work requirements to maintain Medicaid eligibility.

DDSD is actively monitoring federal guidance and working closely with the New Mexico Health Care Authority and the Medical Assistance Division to understand implementation requirements and any potential impacts on New Mexicans receiving services. We will continue to provide updates as additional information becomes available.

At this time, providers should continue supporting individuals and families as usual and refer any questions regarding Medicaid eligibility or community engagement requirements to DDSD for clarification.

What You'll Start Seeing Published Under the Access Rule - July 2026

Contributor: Christina Hill, Deputy Bureau Chief - Community Programs Bureau

You may have heard that the federal Ensuring Access to Medicaid Services Rule is bringing some important updates to how states report and share information about Home and Community Based Services (HCBS). While this rule adds new transparency and reporting requirements, DDSD is already preparing and is ontrack to meet all deadlines.

At a high level, the rule is intended to give individuals receiving services, their families, providers, and the public a clearer understanding of HCBS services, payment structures, and related fee schedules. Beginning July 1, 2026, DDSD will publish a new "Payment Disclosure" report using 2025 data, updated every two years, and will continue publicly posting HCBS fee schedules as required under federal transparency standards.

The Health Care Authority (HCA) already publicly posts current waiver fee schedules, which meet federal requirements. The only change is that fee schedules for Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF-IID) will now also be included as part of the publicly available information.

To provide a fuller picture of HCBS payment practices, the Payment Disclosure will also share statewide average hourly payments to providers of Personal Care, Home Health Aide, Homemaker, and Habilitation services. It will include the number of claims and beneficiaries for each service within the Developmental Disabilities (DD) Waiver and the Medically Fragile Waiver (self-directed waivers are excluded from the federal requirement). DDSD is working to identify which services apply and to convert non-hourly rates to hourly equivalents where possible. Some services may be excluded if an hourly rate cannot be reliably calculated, but the goal is to give the most accurate and meaningful picture of hourly payments across these key service categories.

Looking ahead: What's coming in FY27

Looking forward, the rule includes several additional reporting requirements that will begin in FY27. DDSD will start preparing reports on waitlists, service access, and annual reassessments, along with continuing updates to the Payment Disclosure. As this work moves forward, DDSD will keep providers informed so you always know what's coming next.

Questions?

Please feel free to reach out to me anytime with questions or comments.

Christina Hill
Deputy Bureau Chief, DDSD Community Programs Bureau
christina.hill@hca.nm.gov

Summary of Community Inclusion Initiatives

Contributor: Alix Dean, Community Inclusion and Supported Employment Lead

This year, the Community Inclusion and Employment (CI/E) Unit completed two projects to understand how community inclusion (CI) services are working in the Developmental Disabilities (DD) and Mi Via waiver programs. The purpose of CI services is to assist a person with building valued social roles, establishing meaningful relationships, building skills for navigating community events, activities, and resources, and making informed decisions about employment.

Two projects conducted in State Fiscal Year 26 (7/1/25 - 6/30/26) to evaluate the status of CI services were:

The Community Inclusion Provider Survey solicited input from providers of CI services. The goal of the CI Provider Survey was to help DDSD gather input on what is working well and understand existing challenges and how to enhance services that foster community participation and integration.

The Quality Visits initiative involved facility-based reviews of provider-operated buildings where CI services are provided in a group model. These visits were designed to strengthen existing relationships with regional providers and offer targeted assistance as necessary. The regional office Community Inclusion Coordinators (CICs) toured provider-operated buildings to document operational practices, observe delivery environments, and identify potential opportunities for quality improvement.

The Quality Visits followed the Community Inclusion Provider Survey, bringing depth to information captured via provider self-report on the survey. Together these activities offer a snapshot of provider experiences, organizational practices, strengths, and barriers to person-centered CI services through the DD and Mi Via waiver programs.

Overall, provider staff show a foundational understanding of how to individualize supports in both group and 1:1 service models. The CI/E Unit observed strong rapport between the provider staff and people they support. Despite these strengths, providers report ongoing strains affecting the quality of CI services.

Providers reported the biggest challenges are:

- Staff shortages
- Transportation barriers
- Supporting people with higher medical or behavioral health needs, especially people over 55, in community settings

Additionally, people struggle to know where to go in their community and how to advocate for access when faced with barriers such as being asked to have their support staff pay to attend the zoo or ride the bus with them. The right to bring a personal attendant that provides necessary personal care is afforded by the American's with Disabilities Act (ADA).

Thank you to everyone who was involved in these efforts. DDSD will address the concerns through resources and training in the coming months. If you want help removing barriers participating in community-based activities, education, or employment, please reach out to the Community Inclusion and Employment Unit. We can help.

https://www.hca.nm.gov/community-inclusion/

For questions or comments, reach out to Alix.Dean@hca.nm.gov

ICF/IID Program Updates: What's New for Providers, Individuals, and Families

Contributor: Christina Hill, Deputy Bureau Chief - Community Programs Bureau

The Developmental Disabilities Supports Division (DDSD) is pleased to share several updates to the Intermediate Care Facilities for Individuals with Intellectual l Disabilities (ICF/IID) program. From provider resources to placement information, these updates are designed to support quality services and improve access across New Mexico.

For Providers

Quarterly Provider Meetings

DDSD is launching quarterly meetings with ICF/IID providers to share program updates, provide regulatory guidance, and create a regular forum for questions, feedback, and discussion of emerging issues in the field.

Annual Upper Payment Limit (UPL) Supplemental Payments Approved

The Centers for Medicare and Medicaid Services (CMS) approved State Plan Amendment 24 0009 in September 2025. This change lets the Health Care Authority (HCA) give ICF/IID facilities one lump sum payment each year before the state fiscal year ends. These payments are based on each facility's Upper Payment Limit (UPL). The UPL is the highest amount Medicaid can pay to a facility, and it cannot be more than what Medicare would pay for the same services. The Medical Assistance Division of the HCA recently sent letters to each ICF/IID facility explaining their supplemental payment amounts for State Fiscal Year 2026.

Posting Fee Schedules by July 1

Beginning July 1, ICF/IID fee schedules, including per diem rates, will be available online to comply with new federal transparency requirements. Visit: https://www.hca.nm.gov/providers/fee-schedules/

For Individuals and Families

Planning for ICF/IID Placement

Individuals seeking placement in an ICF/IID facility must:

- Receive a "Yes Match" letter from the DDSD Pre-Service Intake Bureau
- Meet Medicaid eligibility requirements
- Have a neuropsychological evaluation completed within the previous 90 days

Current Placement Availability

DDSD monitors ICF/IID placement availability each month and currently has openings in multiple regions throughout the state.

For assistance or questions regarding ICF/IID referrals and admission, please contact Jessica Trujillo.

Statewide ICF/IID Program Coordinator: Jessica T. Trujillo jessica.trujillo@hca.nm.gov 505-623-1916

Developmental Disabilities (DD) Waiver Updates

Contributor: Steven Fernandez, DD Waiver Program Manager

CMS Approves the 2026 DD Waiver Application

DDSD is pleased to announce that the Centers for Medicare and Medicaid Services (CMS) has approved the 2026 DD Waiver Application! This renewal includes several important updates to processes, services, and provider requirements.

Key Program Changes

Service Changes

- Community Integrated Employment, Job Aide, was removed as a waiver service because similar supports are provided under Community Integrated Employment Job Maintenance. The service was duplicative.
- Community Inclusion Aide was removed as a waiver service because the Community Inclusion Aide job duties and supports were included in Customized Community Supports (CCS) service. The service was duplicative.
- "Socialization and Sexuality Education" has been renamed to "Healthy Relationships and Personal Safety Education." The name change was requested by CMS.
- The Person-Centered Assessment (PCA) requirement has been removed because the information is now included in the waiver participants' Individual Service Plan (ISP).

Provider Requirements

CARF International and The Council on Quality and Leadership (CQL) accreditation is no longer required for DD Waiver service providers.

Rate Changes

Implementation of rates increases were approved in House Bill 2 (HB2) across multiple service categories. The services are listed below.

- Customized In-Home Supports, Living with Family or Natural Supports
- Customized In-Home Supports, Living Independently
- Supported Living Cat. 1, Supported Living Cat. 2, Supported Living Cat. 3, Supported Living Cat. 4
- Customized Community Support, Small Group
- Occupational Therapy, Standard, Occupational Therapy, Incentive
- Occupational Therapy Assist. Standard, Occupational Therapy Assist. Incentive
- Speech, Language Pathology, Standard, Speech, Language Pathology, Incentive

For questions or support contact Steven Fernandez: steven.fernandez@hca.nm.gov

Health and Wellness Visits Update

Contributor: Scott Doan, DDSD Deputy Director

As we approach the end of the first six months of 2026, the Developmental Disabilities Supports Division (DDSD) continues to complete health and wellness visits. As of this writing, DDSD has completed 47,450 health and wellness visits since March of 2023. On average, DDSD completes approximately 1,250 visits per month for individuals receiving Home and Community Based Waiver services.

The following table reflects the total number of health and wellness visits completed from January 1, 2026 through June 22, 2026; including the total number of alleged abuse, neglect, and/or exploitation reports made to the Division of Health Improvement, Incident Management Bureau (DHI-IMB). The table also shows the total number of Regional Office Requests for Assistance (RORAs) filed during this time.

Time Period	Total Number of Health and Wellness Visits	Total Number of ANE Allegations Reported	Total Number of RORAs filed
1/1/2026 through 6/22/2026	7,076	34	35

DDSD continues to monitor environmental concerns as reported from the health and wellness visits. Since March 9, 2026; 72 distinct individuals or settings have been reported to have environmental concerns. Of the 72 reported concerns, 41 were for individuals receiving Developmental Disabilities Waiver services, 30 were for individuals receiving Mi Via Waiver services, and 1 individual or setting was reported for the Medically Fragile Waiver. As part of this process, DDSD continues to work toward establishing a definition across all three Waivers for environmental concerns. Environmental concerns are those issues and/or concerns that do not rise to the level of suspected abuse, neglect, and/or exploitation.

Population growth: As individuals are now being allocated monthly to Waiver services, the number of individuals requiring a health and wellness visit has increased. Since July of 2025, DDSD has seen a population growth of approximately 868 individuals added to Waiver services.

- July through December 2025: 8,292 individuals receiving Waiver services.
- January through June 2026: 8,680 individuals receiving Waiver services.
- July through December 2026: 9,160 individuals receiving Waiver services.

*9,160 individuals are based on the number of individuals who will be receiving Waiver services with an effective start date for services as July 1, 2026.

As the number of individuals receiving Waiver services increases, the number of DDSD employees completing health and wellness visits remains the same, which may have an impact on scheduling and the number of individuals who can be seen each month by DDSD employees. DDSD will continue to monitor the capacity to complete health and wellness visits.

As always, continued thanks to each person who has participated in health and wellness visits for your cooperation.

Introduction to the Vineland Adaptive Behavior Scales (Vineland 3)

Contributor: Steven Fernandez, DD Waiver Program Manager

The Vineland Adaptive Behavior Scales (Vineland 3) is a standardized assessment tool used to measure an individual's adaptive behaviors-the practical, everyday skills needed to function independently and meet environmental demands.

- The Vineland 3 evaluates domains such as communication, daily living skills, socialization, and motor skills.
- The Vineland 3 does not replace medical eligibility. The Level of Care (LOC) determines medical eligibility, while the Vineland 3 supports functional assessment and service planning.
- Initial Level of Care (LOC) reviews and initial and annual Vineland 3 will be conducted by the Third-Party Assessor (TPA), Comagine Health.
    - Comagine Health has local assessors in each of the five regions in New Mexico.
    - Comagine partners with Goodwill Industries of New Mexico to extend coverage and capacity.
    - The Comagine assessors have availability beyond standard business hours, including evenings and weekends.
    - Vineland 3 assessments are assigned to the assessors at least 90 calendar days before the initial or previous annual Level of Care expiration.

Vineland 3 Rollout Plan

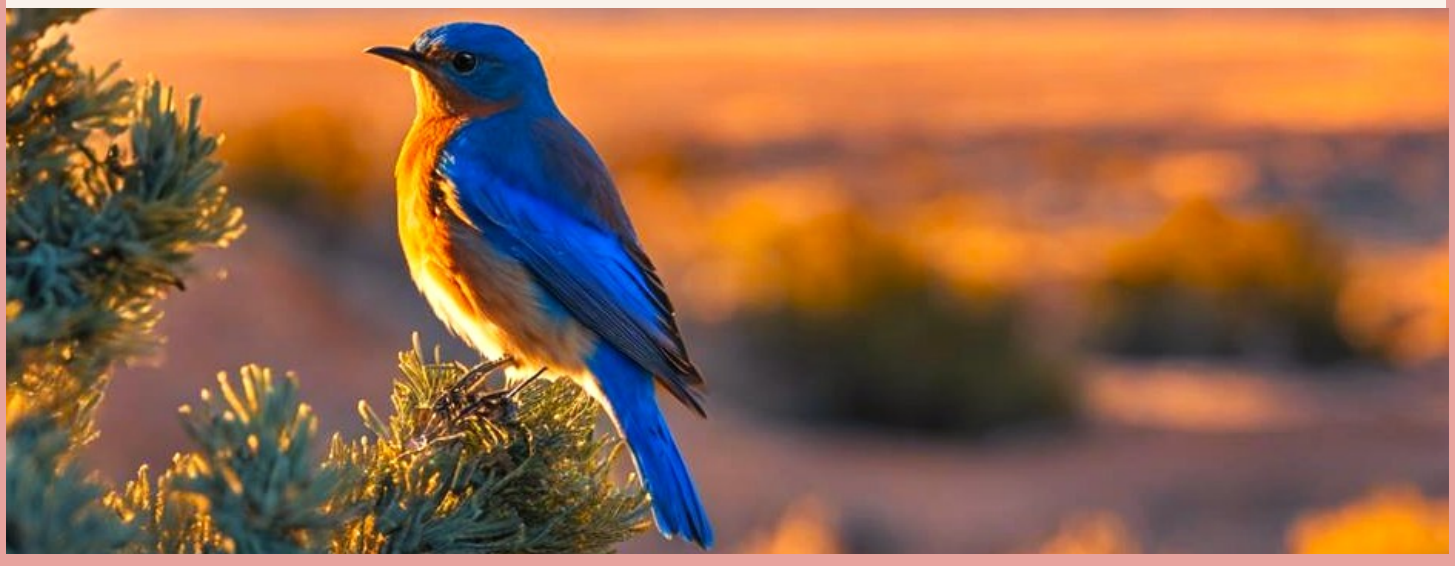
Transition period 7/1/26-9/30/26

- The TPA will begin to schedule Vineland 3 assessments in July 1, 2026 for recertification and initial allocations.
    - The TPA schedules the Vineland 3 90 days in advance of the expiration of the LOC.
    - The TPA schedules the Vineland 3 assessments for initial allocations once they receive the Primary Freedom of Choice.

The Vineland 3 will begin on 10/1/26.

The Vineland 3 will follow the expiration date of the participants' level of care for recertifications.

For questions or support contact Steven Fernandez: steven.fernandez@hca.nm.gov



Rural Health Projects Funding

Contributor: Jen Zwally, DDSD Director

The New Mexico Health Care Authority (HCA) is accepting grant applications for projects that improve health care in rural, frontier and Tribal communities across the state.

The Rural Health Innovation Fund will provide $47 million for practical projects that address local health care needs and improve access, quality and long-term stability.

“People who live and work in rural communities understand the health care challenges they face,” said Elisa Wrede, HCA acting rural health director. “This fund will help communities and local partners turn strong ideas into projects that improve access to care and strengthen rural health systems.”

Projects may include:

- New or expanded health care services.
- Technology or equipment that improves access to care.
- Regional partnerships and shared service models.
- Care coordination and patient navigation.
- Other locally designed projects that address rural health needs.

Eligible applicants may include health care providers, Tribal entities, community-based organizations, local governments, academic institutions, regional partnerships, vendors and other organizations with a direct role in carrying out the proposed project.

Applicants must explain the need for the project, what they plan to do, how the work will be completed, what results they expect and how the project will continue to benefit communities after the funding period ends.

The Rural Health Innovation Fund is part of New Mexico’s Rural Health Transformation Program, which also includes efforts to expand access to care, grow the rural health workforce, support rural providers and improve health data and planning.

Organizations interested in submitting proposals may access the official RFP documents through the HCA procurement portal on Submittable and the HCA website: https://www.hca.nm.gov/lookingforinformation/open-rfps/

Proposals are due by 5 p.m. MDT on July 27, 2026.

Building Consistency Through the Train the Trainer Program

Contributor: Eryn Bailey, Training and Knowledge Management Bureau Chief

Every day across New Mexico, Direct Support Professionals (DSPs) provide essential services that help individuals with intellectual and developmental disabilities live safe, meaningful, and self-directed lives. Behind that work is a statewide training system designed to ensure that support staff receive consistent, high-quality instruction regardless of where they are employed.

The Train the Trainer (TTT) program serves as the pathway for agency trainers who teach foundational developmental disabilities waiver courses throughout New Mexico. Through this program, potential trainers complete prerequisite coursework, participate in mentoring, and demonstrate their ability to effectively teach course content before becoming certified.

The program is built on a structured mentorship model. Agency trainers are guided by certified mentors, who are trained and supported by the DDSD Training and Knowledge Management Bureau (TKMB) Master Mentors. Before teaching a live class, prospective trainers must successfully complete activities such as live teach-backs, where they demonstrate their knowledge of the material, presentation skills, and ability to navigate the training technology used in the classroom.

The importance of this process extends far beyond the classroom. With a centralized TTT program, provider agencies across the state can teach critical health, safety, and service-related information in different ways. The TTT program helps establish a consistent baseline of knowledge so that DSPs receive the same core information whether they work in Albuquerque, Las Cruces, Taos, or any other New Mexico community.

Certification is not the end of the process. The TTT program includes ongoing quality assurance measures that help maintain training standards statewide. Certified trainers participate in fidelity reviews, knowledge assessments, and classroom observations to ensure course content continues to be delivered accurately and consistently. Trainers also commit annually to a Trainer Code of Ethics, reinforcing their responsibility to provide professional, objective, and standardized instruction.

This system creates a powerful ripple effect. TKMB trains and supports agency trainers. Agency trainers educate DSPs. DSPs provide direct support to individuals receiving services. When training is delivered effectively, DSPs are better prepared to support medication delivery, implement person-centered plans, and promote person-centered practices that respect each person's goals, choices, and independence.

At its core, the TTT program is about more than certification. It is about building a knowledgeable workforce, promoting consistency across the state, and helping ensure that individuals with intellectual and developmental disabilities receive high-quality supports from well-trained professionals who recognize and respect each person's strengths, abilities, and right to direct their own lives.

Contributor: Elaine Hill, Mi Via Program Manager

Mi Via Service Standards

DDSD is finalizing updates to Mi Via Service Standards and they are expected to be released later this summer.

The revised Service Standards feature a more streamlined, user-friendly format that improves organization and readability. Updates also strengthen person-centered principles by emphasizing participant choice, independence, self-direction, and informed decision-making.

To create a single, comprehensive resource, appendix content has been incorporated into the applicable sections of the document. These enhancements are intended to improve usability while continuing to provide clear guidance for participants, consultants, providers, and other stakeholders.

Public Comment Opportunity

The Tribal Notification and Public Comment processes are being issued to inform you that HCA, through the Developmental Disabilities Supports Division, is accepting written and verbal comments regarding proposed amendments to the New Mexico Administrative Code (NMAC) rule 8.314.6, Mi Via Home and Community-Based Waiver Services.

A public comment period is planned for July 2026, providing stakeholders, participants, families, providers, and the public an opportunity to review and provide feedback on the proposed updates made to align with the current Mi Via Waiver application, effective October 1, 2025.

Contributor: Deanna DeHerrera, Mi Via Systems Manager

Training Policy update!

The Developmental Disabilities Supports Division (DDSD) is implementing a consolidated Training Policy Summer 2026 that establishes standardized monitoring, reporting, and remediation practices for required training based on job classification within the Mi Via Waiver program.

The purpose of this policy is to strengthen compliance with training requirements outlined in program service standards and applicable federal guidelines, ensuring that services continue to be delivered by qualified and properly trained staff.

Important:

There are **no changes** to the current Mi Via training requirements. A complete list of required trainings is available on the University of New Mexico Center for Development and Disability (UNM CDD) Training Hub.

For questions regarding the consolidated Training Policy, contact Deanna DeHerrera at:
deana.deherrera@hca.nm.gov

Updates to the Mi Via Services and Support Plan

Contributor: Claudia Rice, Office of Constituent Support

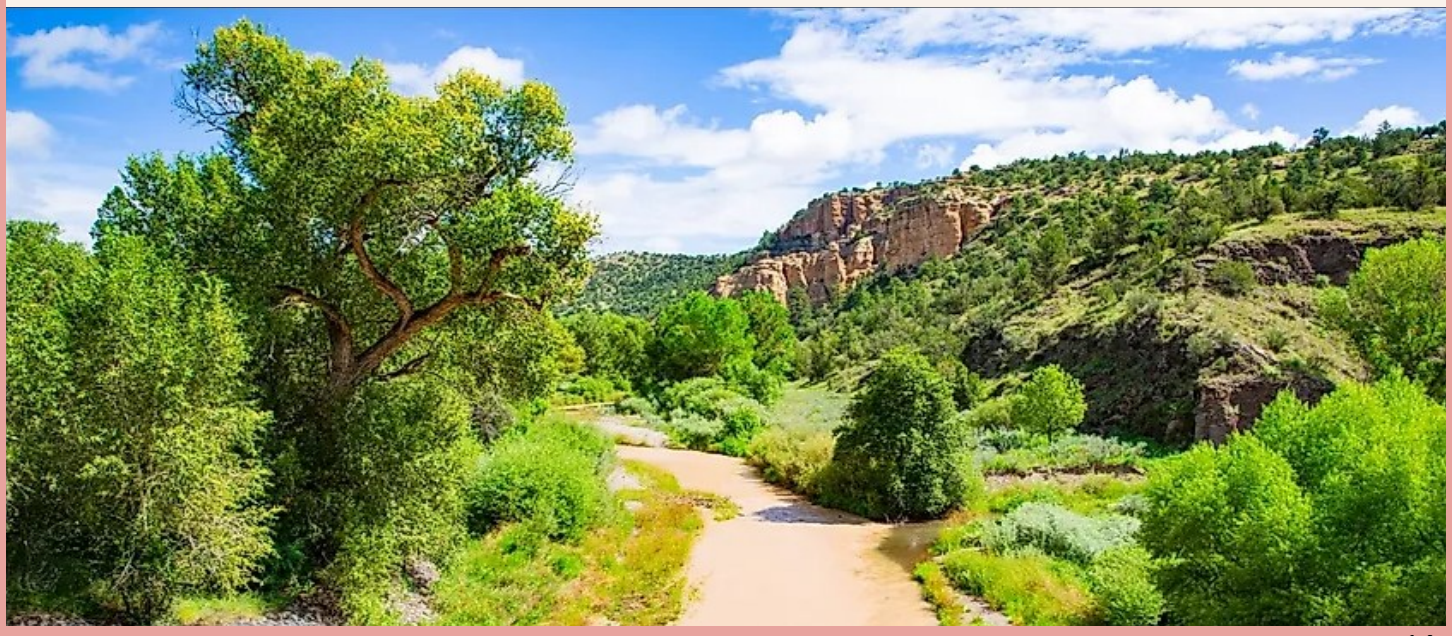
In 2025, the Developmental Disabilities Supports Division (DDSD) began exploring opportunities to revise the Mi Via (MV) Waiver Service and Support Plan (SSP) to improve accessibility, usability, and overall user experience. To guide the revision of SSP 2026, DDSD solicited feedback from consultants, DDSD staff, stakeholder groups, and waiver participants and their family members. This collaborative input played a key role in shaping the revisions and ensuring the updated SSP better reflects the needs and experiences of those involved in the planning process.

The revisions incorporated into SSP 2026 are also intended to further strengthen and support the person-centered planning (PCP) process. PCP is a collaborative approach to developing an individual's SSP that recognizes each person's unique strengths, preferences, goals, and evolving needs. The process acknowledges that people grow and change over time and emphasizes cultural considerations, informed choice, dignity of risk, and the use of plain language whenever possible to promote understanding and meaningful participation.

While SSP 2026 includes several modifications, many foundational components of the original SSP remain in place and have been expanded, clarified, or reformatted as part of the streamlined design of the updated document. Additional enhancements include an expanded risk assessment section, new questions related to settings requirements and added sections to explore technology use and employment to support independence and quality of life.

SSP 2026 is currently undergoing testing in FOCoSonline; the secure online database that houses the SSP and other information about Mi Via participants. Testing will be wrapping up in early July, at which time SSP 2026 will be rolled out. SSP 2026 will also be available to view on the new Health Care Authority website launching in July.

Overall, SSP 2026 reflects DDSD's ongoing commitment to improving the planning process while promoting person-centered practices, accessibility, and meaningful engagement for waiver participants and their circles of support. The updated format is intended to support communication and comprehensive planning in addressing each individual's unique goals, preferences, and support needs.



LIVING My Life: Integrating the Participatory Approach and Collaborative-Consultative Model of Therapy in the Developmental Disabilities Waiver

Contributor: Robin Leinwand - Statewide OT Consultant, Demarre Sanchez - Statewide SLP Therapy Consultant & Mary Beth Schubauer - Statewide Physical Therapy Consultant

Physical, Occupational, and Speech Therapy service providers who work with people receiving supports through the Developmental Disabilities Waiver (DDW) in New Mexico must follow the Participatory Approach (PA) and the Collaborative-Consultative (CC) Therapy Model for therapy service delivery. These philosophies have been utilized in DDW since at least 2012 when they were written into the DDW Standards

The **Participatory Approach (PA)** is the philosophy that all people, regardless of disability, can participate in daily activities and achieve individual goals. Incorporation of enabling/assistive technologies can be a critical component of this approach to therapy services. The Participatory Approach describes how therapy providers innovate and apply best practices through collaboration. Therapeutic, therapy informed, and related strategies are implemented "in real-life environments; at home, in the community, or wherever support is needed most directly with the person receiving services, their families, and their support staff." (DDSD Newsletter, July 2025)

The **Collaborative-Consultative (CC)** Therapy Model involves everyday integration of therapy strategies into a person's life to move the person toward fulfilling life visions, enhancing functional abilities, and assuring health and safety. The role of the therapist is to design and train supportive and/or adaptive strategies through direct collaboration with the person, Direct Support Professionals (DSP), and other members of the interdisciplinary team (IDT). Success depends on consistent implementation of strategies by all IDT members.

This article uses a case study to illustrate how both the PA and CC Model support a person as they work to achieve their visions and outcomes.

Meet Josh: Josh has been receiving waiver services for about two years. He uses a 4-wheel-walker for support and uses a manual wheelchair at times. Josh needs some assistance with activities of daily living. Over the years, he and his family have figured out how to best support him in their home. As a young adult, he wants to be more independent and develop his own social network.

Josh's current IDT consists of himself, his Case Manager, a Family Living Service Coordinator, and a DDW Physical Therapist (PT). At his annual Individual Service Plan (ISP) meeting, Josh shared that he wanted to go on outings to meet people in the community. He requested adding Customized Community Supports– Individual (CCS-I) to assist. His PT thinks this is a great idea and will focus their services to support access and use of bus transportation. The PT also recommends that Josh choose a DDW Speech-Language Pathologist (SLP) to help him with social communication skills he'll need riding the bus and during interactions at community events. The IDT decided to request a targeted evaluation from an Occupational Therapist (OT) due to concerns with Josh's distractibility and frustration in unfamiliar situations. Josh selects SLP, OT, and CCS-I providers from the Secondary Freedom of Choice (SFOC) during the IDT meeting and these requests are processed to add those services to his budget for the start of his new ISP year. (continued)

Once their budgets were in place, the SLP and OT met Josh and completed their separate evaluations focused on the reasons for referral. Following these evaluations, all therapists collaborated with Josh and CCS-I staff to determine what was needed to support progress toward his new ISP outcome of being more independent in community access and meeting people.

The OT evaluation focused on opportunities to help Josh focus and cope with new people and new situations. The IDT met to discuss observations and suggested strategies that Josh could use before and during bus rides and community activities. The OT provided the team with examples of checklists and visual cue cards for coping and self-talk strategies. Recommendations were shared regarding possible Remote Personal Support Technology (RPST) services using GPS tracking that could increase Josh's independence and safety in the community in the future. There were no additional OT-related needs at this time, so these services were proposed to be ended and the budget closed.

The SLP consulted with the OT and developed Written Direct Support Instructions (WDSI) incorporating recommended strategies for helping Josh navigate bus rides. The PT created a WDSI with instructions for how to assist Josh with mobility on/off the bus and in unfamiliar community settings.

The PT met with CCS-I staff and Josh before his first community outing. They completed hands-on training to ensure both Josh and the CCS-I staff understood and demonstrated safe use of his gait belt and walker. The PT continued to train other staff as they came on board and saw Josh occasionally at home and in the community to address needs related to equipment maintenance, mobility concerns, and his home exercise program (HEP). Once he had progressed to more independent community access, the PT did not see him at a specified weekly appointment time since the focus was on follow-through with recommended strategies, training of staff, and Josh's adherence and progression of his HEP.

The SLP met with Josh and CCS-I staff to identify topics that might come up while on the bus or at a specific community event. Josh used his phone's Notes App to record and/or list important messages and topics of discussion. Pictures and guides were developed and saved to his Notes App to assist him in using some of the OT recommended coping strategies when needed. The SLP trained the WDSIs related to helping him to navigate the bus ride and communication strategies for safety and conversations.

An Assistive Technology Fund (ATF) application was submitted through his case manager requesting the purchase of a walker mount for his phone and wireless headphones to support Josh's community access and assist him with his coping skills.

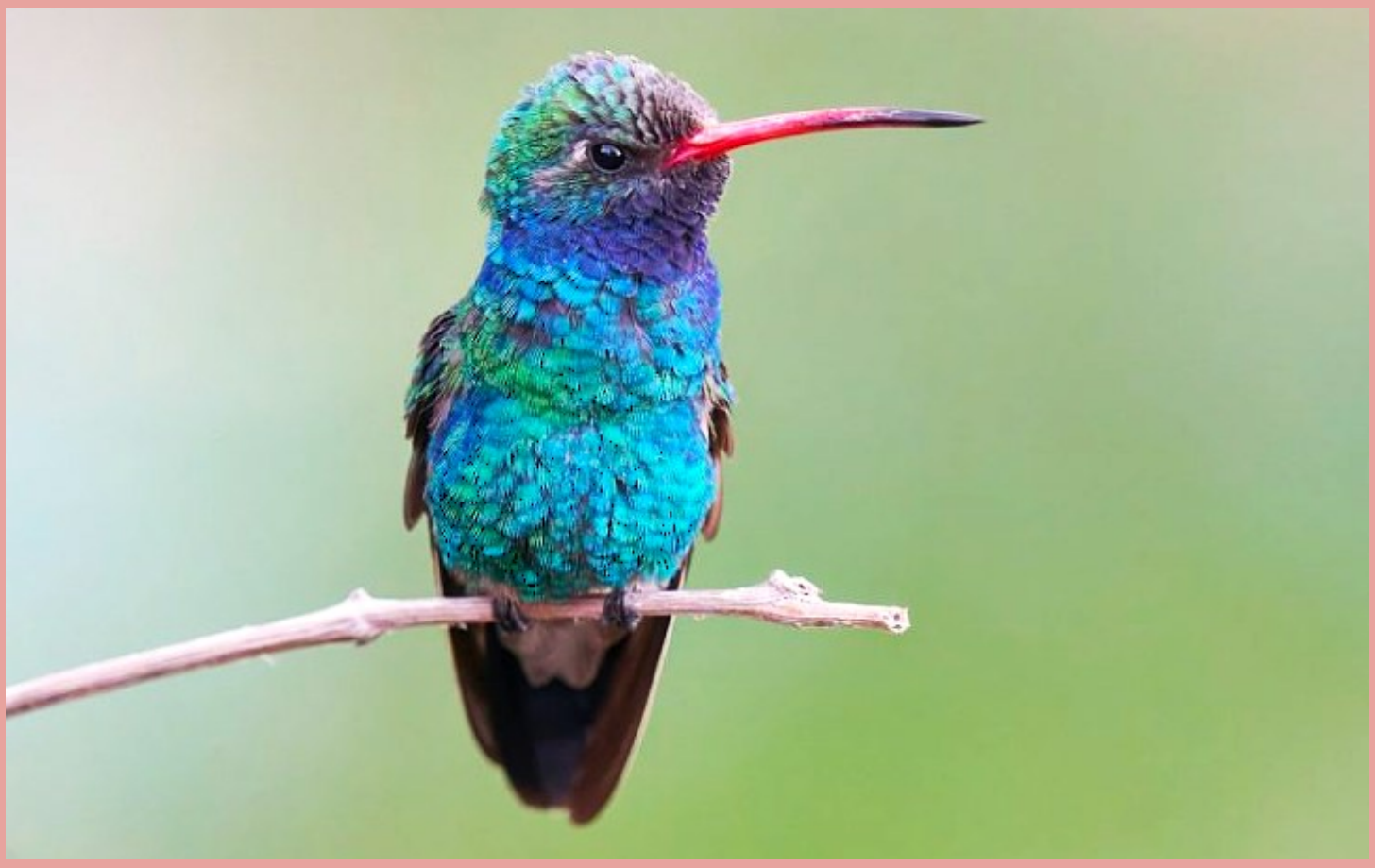
Josh and his CCS-I direct support professional worked together to incorporate the strategies from his WDSIs for community access and social interactions. This collaboration identified new tools that were added to his plans. Over the course of the next year, the PT and SLP retrain new people in Josh's life, including paid and unpaid caregivers/friends, as requested.

(continued)

Josh and his CCS-I direct support professional worked together to incorporate the strategies from his WDSIs for community access and social interactions. This collaboration identified new tools that were added to his plans. Over the course of thenext year, the PT and SLP retrain new people in Josh's life, including paid and unpaid caregivers/friends, as requested. Josh's social circle improved over time and he slowly became more independent with interactions and community mobility. As he became more comfortable, his family circle was encouraged by the confidence he developed and by his safe community access. His therapists reported the notable progress and changes seen in Josh.

For anyone in society, as well as for people with IDD, progress isn't just about achieving milestones through Visions and Desired Outcomes. Progress is about becoming more independent, striving toward goals, increasing participation, and improving overall quality of life through meaningful and person-centered activities. The Participatory Approach and Collaborative-Consultative Model ensure therapy services are not something that happens to a person, but with them and through those who know them best. Therapy strategies are integrated into daily life, making interventions more relevant, respectful, and sustainable. By incorporating SLP, PT, and OT services in natural settings, we honor the belief that people thrive when given support to achieve what they find important and valuable.

DDSD sees value in the Participatory Approach and Collaborative-Consultative Model and encourages therapists to see the whole person and meet them exactly where they are.



Clinical Services Bureau Updates

Contributor: Melissa McBride, MBA, MSN, RN, Clinical Services Bureau Chief

The Clinical Services Bureau continues to advance several initiatives aimed at supporting providers, strengthening services, and enhancing resources available to individuals receiving DDSD services.

Therapy Services Updates
Therapy Services is currently updating key forms, including the Assistive Technology (AT) Form and the Therapy Documentation Form (TDF), to improve consistency and support service delivery.

To enhance communication and collaboration with providers, Therapy Services will launch its first Quarterly Therapy Provider Meeting on July 16, 2026. Meetings will be held on the third Thursday of each quarter and will provide an opportunity to share updates, discuss emerging issues, and strengthen partnerships with therapy providers throughout New Mexico.

The Therapy Services team remains committed to expanding and strengthening the healthcare workforce serving individuals with intellectual and developmental disabilities. As part of these efforts, DDSD staff will participate in several recruitment events this year, including:

- New Mexico Occupational Therapy Association Annual Conference August 21–22, 2026
- UNM Health Sciences Center Health Professional Job Fair September 10, 2026

These events provide valuable opportunities to connect with occupational therapists, physical therapists, speech-language pathologists, nurses, registered dietitians, and other healthcare professionals interested in serving New Mexico communities.

Aspiration Risk Management Updates

The Aspiration Risk Management (ARM) program continues to evolve to support person-centered decision-making and risk management practices.

The Clinical Services Bureau is currently recruiting for an Aspiration Risk Management Coordinator Nurse position. Interested applicants are encouraged to explore this opportunity to join the DDSD team and contribute to this important area of service.

Additionally, updates have been made to the Comprehensive Aspiration Risk Management Plan (CARMP) Decision Points. Stakeholders are encouraged to review the May 15, 2026 memorandum for a complete summary of the changes. Key updates include:

- A CARMP may be declined before plan development, including when the Aspiration Risk Screening Tool (ARST) identifies a moderate or high aspiration risk.
- The Decision Consultation Process (DCP) must be followed.
- The Decision Consultation Form (DCF) must be completed in its entirety.

These updates are intended to promote informed decision-making and ensure consistent implementation of aspiration risk management processes across the service system.

(continued)

Development is underway for the Asynchrony Aspiration Risk Management Training, which will be offered during the morning session of upcoming training opportunities.

Specialty Mobility and Seating Conference

The Specialty Seating Clinic is pleased to announce the 2026 Specialty Mobility and Seating Conference, which will be held on November 6–7, 2026, at the Albuquerque Public Schools Berna Facio Professional Development Complex in Albuquerque.

This conference brings together professionals, providers, and specialists to share best practices, innovations, and resources related to mobility and seating solutions that support independence, health, and quality of life for individuals with disabilities.

Conference Location:
Albuquerque Public Schools
Berna Facio Professional Development Complex
3315 Louisiana Blvd. NE
Albuquerque, NM 87110

New Mexico's Second Annual Special Needs Dental Care Summit

Contributor: Dr. Alicia Grady

New Mexico's second annual Special Needs Dental Care Summit brought together dental professionals, advocates, caregivers, family members, and policymakers to discuss how to improve access to dental care for people with special needs. The event gave participants a chance to share experiences, learn from experts, build connections, and identify ways to address barriers to care. During the summit, attendees discussed challenges that make it difficult for people with special needs to receive dental services and explored solutions to improve access. Dental professionals learned strategies and best practices for treating patients with special needs. Caregivers and families received information about available services and how to advocate for quality care. Policymakers gained a better understanding of the challenges families face and discussed ways to strengthen New Mexico's oral health system.

A key focus of the summit was two initiatives aimed at improving access to specialized dental care. The first is a new website that is being developed as a central resource for individuals with special needs, caregivers, dental providers, and community organizations. The website will offer information about services, educational materials, and referral resources. The second initiative is an updated training program for dentists who want to treat patients with special needs. The program will include enhanced education, clinical guidance, in-office training, and professional development opportunities. Its goal is to increase provider confidence and expand the number of dental professionals prepared to deliver high-quality care to this population.

The summit highlighted the importance of collaboration and the shared commitment to improving oral health care for people with special needs across New Mexico. Through discussion, networking, and teamwork, participants provided valuable ideas that will help shape future efforts. More information about the website, training program, and the third annual summit will be available soon.

New Abuse, Neglect and Exploitation Hotline

Contributor: Edward Gould, Bureau of Individual Safety & Advocacy - Bureau Chief

Beginning July 1, 2026, New Mexicans can again report suspected abuse, neglect, or exploitation (ANE) of individuals with intellectual and developmental disabilities through a restored, toll free hotline: **800 445-6242**

The direct line will connect callers immediately with intake specialists in the Health Care Authority's Division of Health Improvement, Incident Management Bureau (IMB). Online reports submitted through HCA's reporting webpage will also route directly to the IMB team starting July 1, 2026.

Who the Hotline Serves

The hotline is available to report concerns involving individuals enrolled in:

- Developmental Disabilities (DD) Waiver
- Mi Via Waiver
- Medically Fragile Waiver
- State General Fund developmental disability programs

Why This Matters

This restoration is part of a broader agency effort to simplify reporting processes, accelerate response times, and enhance follow up on critical incidents. The Incident Management Bureau continues to investigate allegations and coordinate safety measures, corrective actions, and referrals to law enforcement when needed.

Action Needed from Providers and Partners

The Health Care Authority requests that providers, advocacy organizations, and partner agencies:

- Update internal reporting procedures and staff guidance
- Replace outdated hotline numbers with **800 445-6242**
- Share updated contact information with staff, individuals receiving services, and families or guardians

More guidance on reporting ANE can be found at: https://www.hca.nm.gov/report-abuse-neglect-exploitation/

Pre-Service Intake Bureau Announcement

Contributor - Nicole Hernandez, Pre-Service Intake Bureau Chief

The Pre-Service Intake Bureau, Central Registry Unit, in conjunction with the Community Programs Bureau launched Open Office Hours for Waiver Allocation Assistance. These virtual sessions are held via MS Teams on the 2nd and 4th Tuesday of each month from 12:00 p.m. to 1:00 p.m. Individuals currently in the waiver allocation process are encouraged to attend if they need assistance navigating allocation-related requirements or next steps. The Teams link and QR code are available on DDSD social media platforms.

State General Fund: Supporting Individuals & Families Across New Mexico

Contributor: Brandi Rede, SGF Program Manager

The State General Fund (SGF) program has successfully wrapped up Fiscal Year 2026 and is now moving into Fiscal Year 2027. All Fiscal Year 27 contracts have been updated, submitted, and services will continue statewide.

The SGF program supports provider agencies offering Day Services, Employment Supports, Residential Services, and Respite Services. These services remain essential for individuals and families by promoting community participation, stability, and individualized assistance based on each person's needs.

In addition to direct service providers, SGF funds and partners with the University of New Mexico (UNM) and New Mexico State University (NMSU) to provide Autism supports statewide. Through these partnerships, individuals and families have access to diagnostic evaluations, professional and family trainings, family support services, peer groups, podcasts, and the New Mexico Systemic Therapeutic Assessment Resources and Treatment program, expanding access to specialized behavioral health and autism-related resources throughout New Mexico.

The SGF Program continues to support the Prader-Willi Program through ARCA. This program provides specialized training, resources, and support to individuals with a diagnosis of Prader-Willi Syndrome or related diagnoses, as well as to families and providers working to meet their unique needs.

Another important statewide resource supported through SGF is American Sign Language Interpreter Services through RGC Access. This service provides American Sign Language interpreter access for individuals receiving SGF or waiver services during Individual Service Plan/Service and Supports Plan meetings, Interdisciplinary Team meetings, assessments, and specialty clinic appointments, helping ensure communication access and meaningful participation in service planning and healthcare supports.

SGF also supports the Assistive Technology (AT) Fund managed through DDSD's Clinical Services Bureau. This resource is only available to individuals who are receiving SGF services and individuals not currently receiving waiver services. This resource assists with purchasing AT when other funding options are unavailable and helps individuals access tools that support daily living, communication, and increased independence.

As we begin FY27, the State General Fund Program remains committed to supporting individuals and families through flexible resources, statewide partnerships, and services that promote independence, access, and community inclusion across New Mexico. By providing essential supports and services while individuals await allocation to waiver services, SGF continues to help bridge service gaps and ensure individuals and families receive needed assistance during periods of transition.

For questions or additional information regarding the SGF Program, please contact the SGF Program Manager, Brandi Rede, at Brandi.Rede@hca.nm.gov or 575-932-8160.

Medically Fragile Waiver (MFW) Updates

Contributor: Shannon Culpepper, Medically Fragile Waiver Program Manager

Medically Fragile Waiver Renewal

The Medically Fragile Waiver application was approved by the Centers for Medicare and Medicaid Services (CMS) for another five (5) years effective July 1, 2026!

New Services Starting July 1, 2026

The Medically Fragile Waiver will begin to offer the following services starting July 1, 2026:

Acupuncture – may provide effective pain control, decreased symptoms of stress, improved circulation and a stronger immune system, as well as other benefits using needles, cupping, and acupressure.

Biofeedback – technique that enables a participant to learn how to change physiological, psychological and behavioral responses for the purposes of improving physical, emotional, behavioral and cognitive health performance.

Chiropractic – use of hands-on spinal adjustments or manipulations to correct misalignments, improve joint mobility, alleviate pain and support overall wellness.

Cognitive Rehabilitation – designed to improve cognitive functioning by reinforcing, strengthening, or re-establishing previously learned patterns of behavior or establishing new patterns of cognitive activity or compensatory mechanisms of impaired neurological systems.

Hippotherapy- provided by a licensed physical, or occupational therapist or speech language pathologist as a physical, occupational and speech-language therapy treatment strategy that utilizes horse movement as part of an integrated intervention program to achieve functional outcomes.

Individual Directed Goods and Services – services, equipment, or supplies reimbursed with waiver funds. The goods or services must directly relate to the participant's qualifying condition or disability.

Music Therapy – therapeutic intervention using music-based techniques to address physical, emotional, cognitive, and social needs.

Naprapathy – focuses on the evaluation and treatment of neuro-musculoskeletal conditions and is a system for restoring functionality and reducing pain in muscles and joints.

Play Therapy- a variety of play and creative arts techniques utilized to alleviate chronic, mild, and moderate psychological and emotional conditions for a participant that are causing behavioral problems and/or are preventing the participant from realizing his or her potential.

DDSD currently has issued a call for providers for all the above services. Please reach out to Tammy Barth, Provider Enrollment Manager, to request a provider application or with any questions by email at Tammy.Barth@hca.nm.gov or by phone at 505-469-8480.

Fee Schedule Updates

The following rate increases will occur effective July 1, 2026.

Service Description	Units	New Proposed Rate (effective July 1, 2026)
Occupational Therapy	15 min	$49.66
Occupational Therapy Assistant	15 min	$27.80
Physical Therapy	15 min	$49.66
Physical Therapy Assistant	15 min	$27.80
Speech Language Pathology	15 min	$49.66

Funding Limits or Budget Allotments

Annual budget allotments were increased to align with updated provider rates. All levels of care will have an increase in allotment. Under 21 budget allotment does not reflect what Early Periodic Screening Diagnosis and Treatment (EPSDT) Benefit through the Managed Care Organization (MCO) benefit pays for children under 21.

Level of Care	Proposed Budget Allotments Starting 7/1/26
Under 21 all levels*	$60,000*
21 and over Level 1	$335,000
21 and over Level 2	$275,000
21 and over Level 3	$215,000
	*Plus EPSDT MCO benefit coverage

MFW is currently in the process of updating the MFW Service Standards to align with our other waivers. Feedback and suggestions are welcome and can be submitted using the following link: Medically Fragile Waiver Standards Revision-2026

Human Rights Committee

Beginning October 1, 2026, the Medically Fragile Waiver will require the implementation of a Human Rights Committee (HRC) for all nursing and home health aide agencies. An HRC protects participant rights by reviewing any proposed restrictions related to documented health and safety concerns. DDSD is making this change to MFW in order to align processes with the other waivers, follow the rules set by the Centers for Medicare and Medicaid Services (CMS) and strengthen the protection of MFW participants' rights and quality of life.

If you have any questions, contact Medically Fragile Waiver Program Manager—Shannon Culpepper at Shannon.Culpepper@hca.nm.gov or by phone at 505-670-8954.

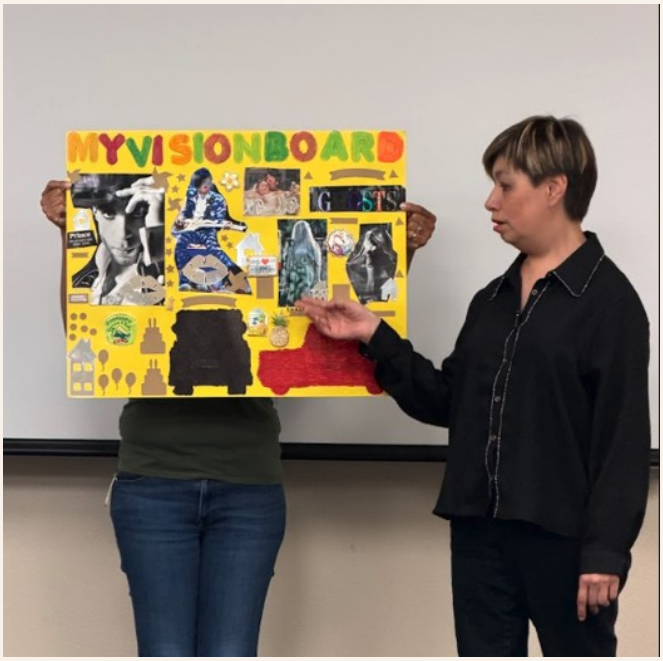
Leading the Way: Peer Mentors Shine in Friends and Relationships Course Classes

Contributor: Thea Kavanaugh, DDSD Socialization and Sexuality Education Project Contractor

Did you know that there's a peer mentor in every Friends & Relationships Course (FRC) class across New Mexico?

Peer mentors are paid self-advocates with intellectual and developmental disabilities (IDD) who assist in FRC classes. These individuals show qualities that make them essential to our program. They connect with students, demonstrate social skills, and show the benefits of learning about health and relationships. In this role, they are paid for their skills and knowledge while increasing their self-awareness and fostering personal growth.

Vanessa's Journey in Las Cruces



Vanessa is a self-advocate peer mentor. Her work helps our program and inspires students to practice speaking up for themselves and managing their own health. Vanessa has served as a peer mentor in Las Cruces for almost a year. When asked what she likes about her job, she stated: "I can help the other students. I can help them not be shy and how to not be nervous." As a peer mentor, Vanessa attends the class with her support guide, Angie. Angie provides positive reinforcement and prompting when needed, but she has slowly reduced her level of assistance as Vanessa has increased her confidence.

Peer mentors continue to improve their knowledge and skills by participating in all class activities alongside their peers. The difference is that peer mentors will take more of a leadership role. Peer mentors will role-play, model social scripts, lead small-group activities, and share their experiences and knowledge once the new students have had a chance. For example, as shown in the image, Vanessa presented a vision board she made to her classmates to display her personal life goals. Vanessa travels about one hour from Santa Teresa to Las Cruces to attend the weekly class. She and Angie make this trip because they believe in the class's purpose. Vanessa explained why it is important for others to take the class: "That is part of their future; they need to learn about it."

How Students Become Peer Mentors

During FRC classes, teachers look for students who show a commitment to their own growth. These individuals help others during group work and display a desire to learn and improve. Once a student completes the curriculum lessons, which usually takes three to four series, a teacher might ask them to become a peer mentor. This opportunity lets the individual take the class again in a leadership role. This repetition helps them practice skills and share knowledge with their peers. This follows the philosophy: "to teach is to learn twice" by Joseph Joubert, meaning that the simple act of serving in the role of a leader contributes to one's growth as a learner.

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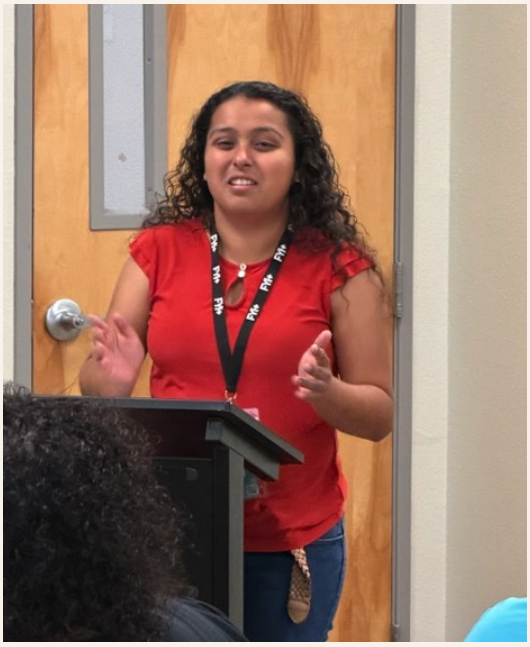
Viridiana's Impact and Outreach



Viridiana is another mentor who shared her feelings about her role: "It makes me feel strong... stronger and mentally." Becoming a peer mentor requires a willingness to learn and interact with others. Mentors play a part in FRC classes by building supportive relationships, encouraging participation, and removing the shame often linked to sexual health topics. By leading class activities, peer mentors help new students feel comfortable, reduce anxiety, and increase participation. Their leadership directly inspires new students, who often share their perspective on the peer mentors: "If they can do it, I can do it!"

Viridiana also helps with community outreach events. She speaks with families and individuals about the benefits of the FRC class. As Viridiana explains the importance of the course: "This is a very serious course, especially for the newbies. Because if they don't learn this stuff soon, how are they ever going to get ready for this? It is very helpful, and not just for only one person, it's everybody who needs to learn that."

Class Details and Registration

The Friends and Relationships Course is offered statewide. The program is open to teens (ages 14 to 17) and adults (ages 18 and older).

Format: A course series is approximately eight weeks

Schedule: Classes typically meet once per week for two hours for a total of 16 hours per series

Location: Classes are held in community settings or virtually

Teachers: All FRC teachers meet professional qualification standards and go through training and student teaching

Peer Mentors: All FRC classes have at least one self-advocate peer mentor

New Mexico offers this proactive Waiver service to foster the continuous development of lifelong socialization and sexuality skills and knowledge needed for community inclusion, personal fulfillment, safety, and protection. If you are a Mi Via participant, you can request the FRC through your budget. Use the code for Individual Directed Goods and Services (T1999). Talk to your Consultant to get started.

To register for classes in your area, request presentations/trainings on the service, or ask questions, please contact:

Thea Kavanaugh Email: theak@realtherapeuticsllc.com Phone: 575-635-9013

Provider Enrollment Relations Unit Updates

Contributor: Tammy Barth, Provider Enrollment Relations Unit Manager

The Provider Enrollment Relations Unit (PERU) remains committed to maintaining adequate provider capacity across New Mexico. Currently, six (6) newly approved providers have been added to the Secondary Freedom of Choice (SFOC) list, offering services under the Developmental Disabilities (DD) Waiver. Their services include:

- Adult Nursing, Customized Community Supports-Individual, Customized In-Home Supports Family Living, and Respite (DDW)
- Remote Personal Support Technology
- Private Duty Nursing (MFW)

Additionally, four (5) providers are undergoing HCA review for the following services:

- Adult Nursing, Customized Community Supports-Individual, Customized In-Home Supports, Family Living, and Supported Living
- Adult Nursing, Customized Community Supports-Individual, Customized In-Home Supports, Family Living, Respite
- Adult Nursing, Customized Community Supports-Group, Customized Community Supports-Individual, Family Living, Independent Living Transition, Non-Medical Transportation and Supported Living
- Customized Community Supports-Individual and Family Living
- Physical Therapy

PERU continuously monitors provider capacity and actively recruits to ensure sufficient coverage for waiver services. Current service needs by region are outlined below:

Developmental Disabilities (DD) Waiver Service

Metro	Assistive Technology, Personal Support Technology, and Vehicle Modifications.
Northeast	Assistive Technology, Crisis Supports, Intensive Medical Living, Remote Personal Support Technology, Vehicle Modifications.
Northwest	Assistive Technology, Crisis Supports, Environmental Modification, Independent Living Transition, Intensive Medical Living, Nutritional Counseling, Remote Personal Support Technology, Socialization & Sexuality Education, Vehicle Modifications
Southeast	Assistive Technology, Crisis Supports, Environmental Modification, Nutritional Counseling, Remote Personal Support Technology, Vehicle Modifications.
Southwest	Assistive Technology, Crisis Supports, Independent Living Transition, Intensive Medical Living, Nutritional Counseling, Remote Personal Support Technology, Vehicle Modifications.

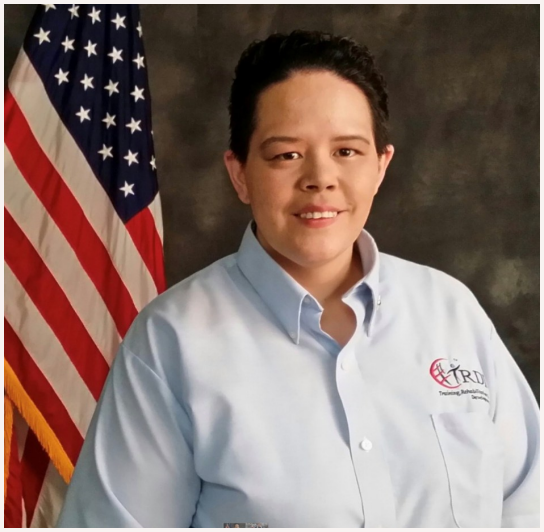
Medically Fragile (MF) Waiver Service Needs

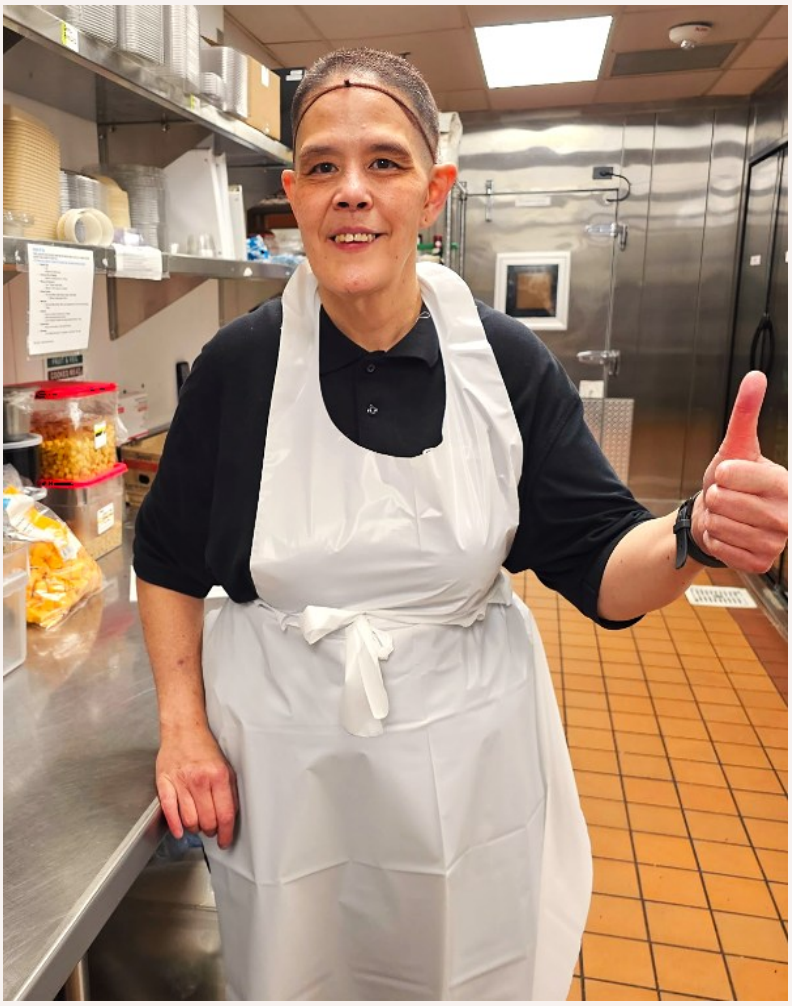
Metro	Customized Community Group Supports, Individual Direct Goods & Services, Massage Therapy, Nutritional Counseling, Specialized Medical Equipment & Supplies, Specialized Respite Home, Vehicle Modifications.
Northeast	Customized Community Group Supports, Environmental Modification, Individual Direct Goods & Services, Massage Therapy, Nutritional Counseling, Physical Therapy, Specialized Medical Equipment & Supplies, Specialized Respite Home, and Vehicle Modifications.
Northwest	Behavior Supports Consultation, Customized Community Group Supports, Environmental Modification, Individual Direct Goods & Services, Massage Therapy, Nutritional Counseling, Occupational Therapy, Physical Therapy, Specialized Medical Equipment & Sup-
Southeast	Behavior Supports Consultation, Customized Community Group Supports, Environmental Modification, Individual Direct Goods & Services, Massage Therapy, Nutritional Counseling, Occupational Therapy, Physical Therapy, Specialized Medical Equipment & Supplies, Specialized Respite Home, Speech Therapy, and Vehicle Modifications.
Southwest	Behavior Supports Consultation, Customized Community Group Supports, Individual Direct Goods & Services, Massage Therapy, Nutritional Counseling, Occupational Therapy, Physical Therapy, Specialized Medical Equipment & Supplies, Specialized Respite Home, Speech Therapy, Vehicle Modifications.

Employment Tales - Alicia Lucoski

Hello, my name is Alicia,

I work two part-time jobs-at a military dining facility during the week and at IHOP on the weekends. I enjoy earning my own income so I can reach my goals, like buying a new cell phone, remodeling my bathroom, and saving for my future in my ABLE account.
I am proud to be awarded Employee of the Month, showing my hard work and commitment as a New Mexican with IDD/Autism.





Client Program Counts

PARTICIPANTS BY WAIVER AS OF 7/6/26	
Waiver	**Participant Count**
Developmental Disabilities Waiver	4,886
Mi Via Waiver	4,024
Medically Fragile Waiver	166
Total	9,076

2026 Fall Leadership Institute - A Great Year to Invest in Yourself and Your Team

Contributor: Kristin Loomis, Director NLCDD

We are halfway through 2026, and the field of intellectual and developmental disabilities has had some tough challenges, with more to come. Our resources are uncertain, the future of our service system is unclear, but our advocacy and commitment are steadfast. To keep our momentum, we must have strong leaders at every level and in every part of our system. Because leaders are the lynchpin to our system's future; skilled, knowledgeable, and connected leaders ensure we maintain the course toward inclusive and person-directed supports, even when the resources, legislation, and regulations that underpin our progress are challenged.

You can take significant steps to build and support leadership development across our sector, to make sure today's and tomorrow's leaders have the confidence, resources, and connections they need to keep our field moving forward.

Whether you have been in your field 40 years or 4 months, you have something to share, and you have things to learn. Bill Nye, American educator, actor, comedian, and engineer, wrote "everyone you will ever meet knows something you don't." In the IDD field, we don't have many opportunities to meaningfully come together with other leaders from different organizations, states/provinces, or parts of the system to intentionally grow our skills and knowledge together. In November 2026, the National Leadership Consortium on Developmental Disabilities, in partnership with the New Mexico Health Care Authority Developmental Disabilities Supports Division, will be holding the Fall Leadership Institute in Santa Fe. The Leadership Institute is a week-long opportunity to invest in your development, and that of your team members. Through a carefully-designed blend of expert speakers, interactive exercises, and assessments, attendees leave with confidence, clarity, and an action plan. Each cohort becomes a professional support system—leaders to call for advice, collaborate with on initiatives, or turn to when facing tough decisions.

"The Leadership Institute was a full course meal served with opportunities to not only look at the system, your organization but also inward at yourself to see the in depth ways that you can be an integral changemaker while connecting with so many others across the country learning from them as well as imparting information and knowledge to them. It is one of the best meals added to the recipe book of our system's success." – 2025 Leadership Institute Graduate. We know leadership can be challenging and it can be lonely. The Fall Leadership Institute can be an opportunity to create impactful, lasting relationships well beyond the week-long training. We also know that when you take time and space to develop yourself and others, that impact ripples outward:

- Growth: Confidence and leadership effectiveness in current roles grow
- Organization transformation: Policy changes, improved culture, better outcomes
- Systems change: Cross-organizational collaboration that advances the field
- People with IDD benefit: More individualized supports, increased choice and control, better protection of human rights

Even if the Fall Leadership Institute isn't for you, we hope you find time to invest in you and your team's development.

(continued)

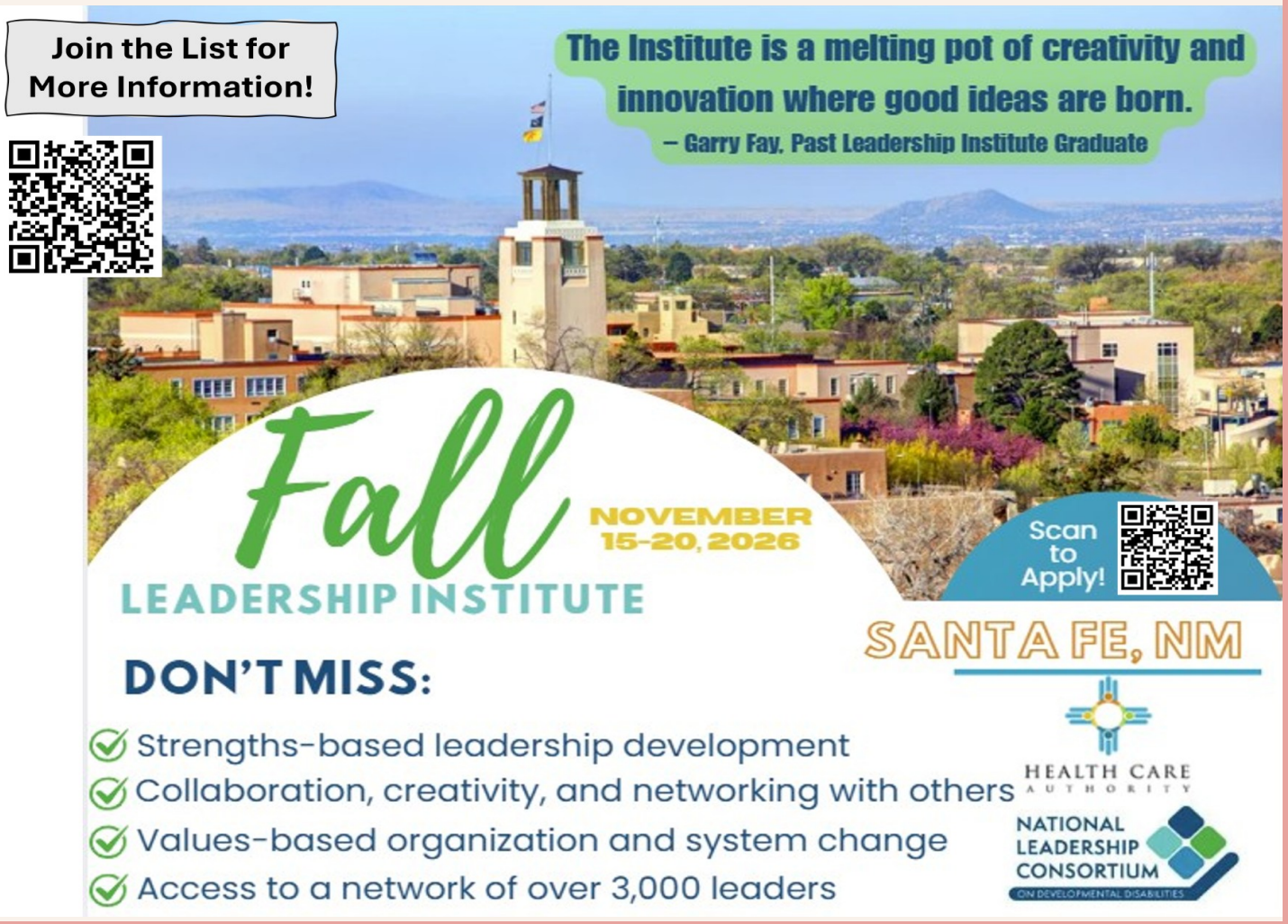
2026 Fall Leadership Institute (continued)

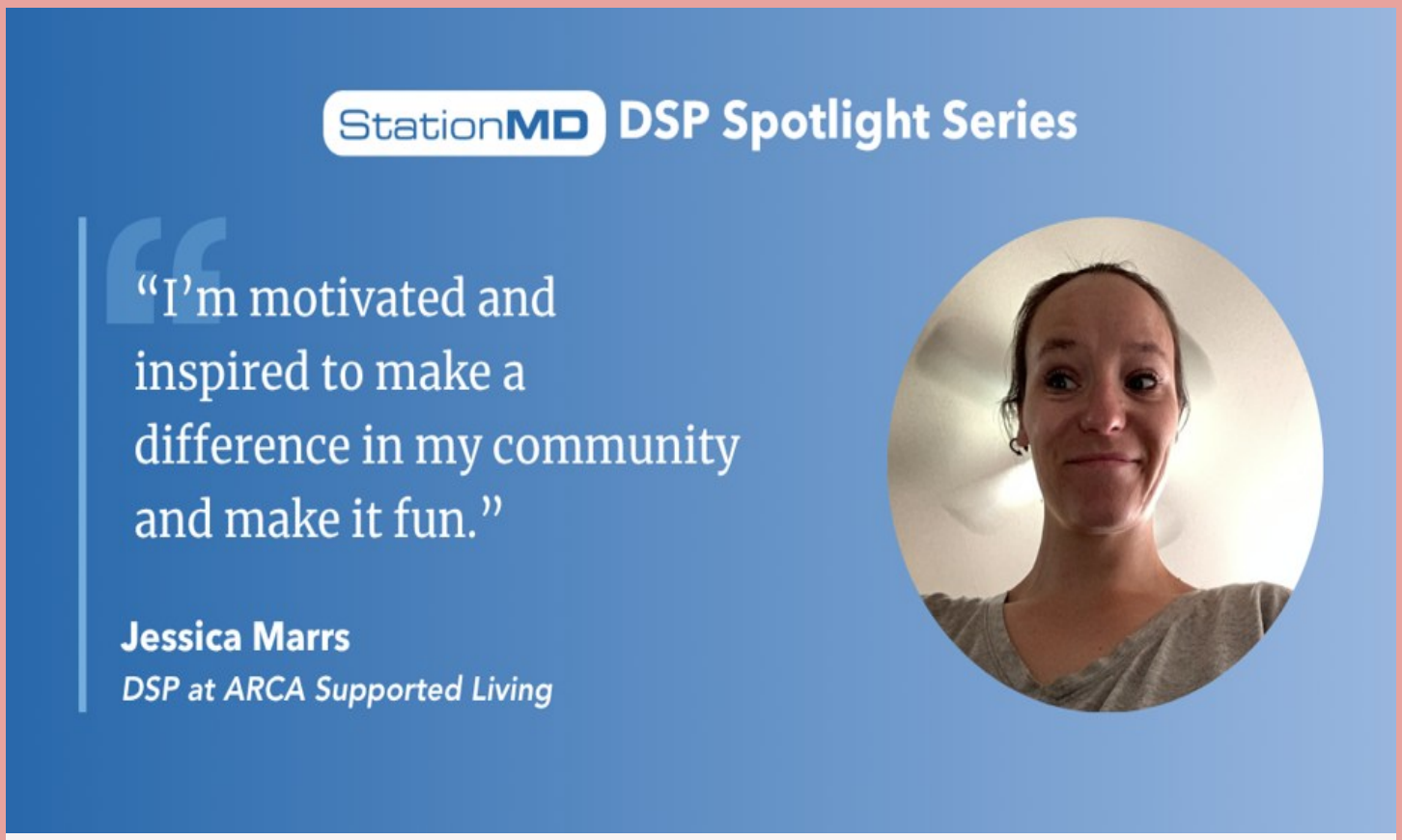
With research showing that 70% of team engagement (the commitment team members have toward each other, their shared tasks, and the organization's mission) is directly determined by the manager, we cannot neglect our own development and the development of our team members. It is too important to leave to chance.

"The Leadership Institute was a transformative experience that equipped me with the tools and insights to become a more effective and impactful leader. The program focus on strategic thinking, emotional intelligence, and team building combined with the opportunity to learn from experienced mentors and peers created an invaluable learning environment. I highly recommend this program to anyone seeking to elevate their leadership abilities and make a positive difference in their organization and community." – 2024 Leadership Institute Graduate

For more information on the Fall Leadership Institute or the National Leadership Consortium on Developmental Disabilities, please visit the links below. Fall Leadership Institute– The Fall 2026 Leadership Institute - National Leadership Consortium on Developmental Disabilities General Leadership Institute Information - Leadership Training - National Leadership Consortium on Developmental Disabilities National Leadership Consortium on Developmental Disabilities Information - Home - National Leadership Consortium on Developmental Disabilities

"In my almost 30-year professional career, this week has been one of the most transformative and empowering trainings in my life. The things I've learned are worth the time alone, but the connections and resources I've gained are invaluable." – 2025 Leadership Institute Graduate





We're thrilled to shine the spotlight on Jessica Marrs from ARCA Supported Living, whose compassion, flexibility, and genuine care have made her an invaluable member of her team. They have shared:

"Jessica is someone who just naturally goes above and beyond. She stays calm under pressure, takes a solution-focused approach to challenges, and really takes the time to build trust with the individuals she supports. You can tell she genuinely cares. Whether it's picking up extra shifts, adjusting her schedule, or simply stepping in to help - she does it without hesitation. She leads by example and brings a positive attitude to everything she does."

"Jessica stepped into her floater position dedicated and ready to help homes throughout Supported Living. She responds quickly and is always ready for her next task. She has no problem when plans change and she is needed elsewhere. She is very team-oriented and always helps when homes need something picked up or dropped off. She has stayed late nights assisting individuals at urgent care facilities and ensures all information is relayed to supervisors. Jessy works very hard and provides great quality of care for the individuals we serve. Thank you so much Jessy for all that you do - very well deserved."

When asked what motivates her, Jessica shared: "Making a difference in my community and making it fun". Outside of work, Jessica has been singing since she was 6 years old and enjoys spending time with friends and family. Her advice to fellow DSPs perfectly captures her approach to the job: "Make things fun and make challenges for yourself".

E-BLASTS

Second Annual Special Needs Dental Care Summit Flyer – March 24, 2026
EMOD Call for Providers for Medically Fragile Waiver – March 20, 2026
DDSD Document Distribution – March 16, 2026
Advocacy Meeting Invitation - March 3, 2026
DDSD Document Distribution – March 3, 2026
PUBLIC NOTICE: Public Comment: Proposed Amendment to NMAC 8.321.1 – February 24, 2026
HB 357–Mi Via Provider Gross Receipts Tax Frequently Asked Questions – February 19, 2026
DDSD Document Distribution – February 16, 2026
DDSD Document Distribution – February 2, 2026
HCBS Rate Study Final Report on Rate Study Recommendations – January 27, 2026
Turquoise Claims Update – January 15, 2026
DDSD Document Distribution – January 15, 2026
Corrected - December 2025 Quarterly Meeting Presentation – December 18, 2025
DDSD Document Distribution – December 15, 2025
Mi Via Memo - Clarification on Mi Via Service Caps – December 15, 2025

NEW HIRES AND PROMOTIONS

Trinity Douglass - Economist: Santa Fe office: starts 6/20/26
Michelle Sanchez - Social Services Coordinator: Las Cruces, starts 4/11/26
Amy Mondragon - Senior Registered Nurse: Albuquerque, starts 4/11/26
Andres Soveranez - Purchasing Coordinator: Santa Fe, starts 4/11/26
Shannon Culpepper - Senior Registered Nurse: Albuquerque, 3/28/26
Guadalupe Garcia - Senior Purchasing Coordinator: Santa Fe, 3/28/26
Ernest Martinez - Supervisor, Social Services: Albuquerque: 3/28/26
Crystal Vigil - Legal Support Worker Supervisor: Albuquerque, 3/14/26
Laura Mixon - Supervisor, Social Services: Roswell, 2/28/26
Jason Rodriguez - Supervisor, Training: Albuquerque, 2/28/26
Phillip Bustamante - Sr Social Services Coordinator: Albuquerque, 2/14/26
Amber Carrillo - Sr Social Services Coordinator: Albuquerque, 2/14/26
Dominic Jaramillo - Supervisor, Social Services: Albuquerque, 2/14/26
Jesus Marquez - Senior Healthcare Surveyor: Albuquerque, 2/14/26
Bernadette Torrez - Sr Social Services Coordinator: Albuquerque, 2/14/26
Cesar Leon - ASB Bureau Chief, Program Management: Santa Fe, 1/31/26
Kristina Memmer - Sr Social Services Coordinator: Taos, 1/31/26
Jovanna Miranda - Sr Social Services Coordinator: Albuquerque, 1/31/26
Megan Shores - Sr Social Services Coordinator, Pre-service specialist: Albuquerque, 1/31/26
Amanda Veracka - Statewide Case Management System Coordinator: Albuquerque, 1/31/26
Amanda Abeyta-Arrietta - Business Operations Analyst: Santa Fe, 1/17/26
Ben Dougherty - Office Support Clerk: Taos, 1/3/26

ABOUT US

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If you would like to write an article for the DDSD Newsletter, have suggestions or comments, contact:

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