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Mi Via Service and Support Plan Sharing

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Background

The Mi Via Waiver is the Developmental Disabilities Supports Division's (DDSD) self-directed home and community-based services (HCBS) waiver. Self-direction is a service delivery model in which the individual receiving services (or their representative) have decision-making authority over certain services and take direct responsibility to manage their services with the assistance of a system of available supports.

The Mi Via Waiver allows participants to maintain budget authority. Under budget authority, the participant has the authority and accepts the responsibility to manage a participant-directed budget. In the Mi Via Waiver this authority permits the participant to make decisions about the acquisition of waiver/benefit goods and services that are authorized in the service plan and to manage the dollars included in a participant-directed budget. In plain terms the Mi Via participant decides which services they want on their budget, at what frequency, and the rate they will pay the vendors/providers to provide those services in the manner determined by the participant.

Additionally in the Mi Via Waiver participants decide who receives a full or limited copy of their person-centered plan called the Service and Support Plan (SSP). Most vendors or providers do not routinely receive the complete SSP. While this respects participants' personal preferences and budget authority, it may hinder service coordination and limit vendors' and providers' awareness of participant needs. If vendors and providers don't receive a copy of the complete SSP, they risk delivering supports that are unsafe, non-compliant, and misaligned with the person's needs, goals, and preferences.

During the Centers for Medicare & Medicaid Services (CMS) New Mexico site visit in September 2024, it was recommended that DDSD explore allowing for a broader sharing of the SSP information with all vendors and providers. The goal of this would be to promote consistency and coordination of care, ensure support reflects the participant's goals and preferences, enhance health, safety and quality of life, encourage accountability and shared responsibility, improve communication and reduce misunderstandings, and ensure everyone is informed, coordinated and focused on supporting the participant's goals, safety and overall well-being.

Approach

The DDSD Mi Via Waiver Unit reached out to Mi Via participants, guardians, employer of records, consultants, vendors and providers, along with the Mi Via Advisory Committee (MVAC) of the Advisory Council on Quality (ACQ) through a memo asking for input. DDSD met with the MVAC, consultants, and the vendor sub-committee of the ACQ via meetings and facilitated discussions around ideas on how to share the SSP to meet CMS's request while upholding the values of self-direction.

DDSD asked for input and thoughts on the following:

- What elements of the SSP should be shared universally among vendors and providers to streamline communication and coordination?
- What is needed to protect participant privacy, especially budget-related information, while ensuring vendors and providers have the awareness needed to deliver quality services?

Feedback

Feedback received was consistent across constituents. Overwhelmingly people felt that

- vendors should only access the SSP sections relevant to the services they provide,
- information should be obtained either through Mi Via Consultants or via FOCOsonline, the online system used to submit and manage the SSP, budget and related documents,
- the SSP needed revised page breaks to the current SSP document to facilitate ease of section sharing, and

**See table below for details of SSP sections to be shared with each service vendor/provider type.*

Recommendations

A balance must be achieved between protecting participant rights and ensuring vendors have essential budget information to deliver and bill for services correctly.

The DDSD Mi Via Unit is recommending adopting the above three recommendations.

1. Vendors and providers will receive the SSP sections relevant to the services they provide and are based on the table below.
2. Vendors and providers will receive #1 from Consultants or through FOCOsonline.
3. The SSP document will have page breaks inserted between each section.

Specific Service and Support Plan sections such as Living Supports, Community Membership, Health and Wellness, and Other Supports should be shared only with

applicable vendors, while emergency contact details in the Emergency Back-up Plan should be shared universally. Conduent currently links the vendor and or provider to the Mi Via Participant. During that process, they can send the appropriate section to the approved service to the vendor and or provider electronically.

Section of SSP to Share	Vendor/Provider Type
1. Living Supports	• Consultant • In Home Living • Homemaker Companion • Home Health Aide • Therapy Services, as applicable • Nursing, as applicable • Related Goods, as necessary
2. Community Membership Supports	• Consultant • Community Direct Support • Employment Support • Customized Community Supports • Nursing, as applicable • Related Goods, as necessary
3. Safety/Risk Assessment	• All
4. Health and Wellness Supports	• All
5. Other Supports	• Consultant • Transportation • Emergency Response Services • Respite • Related Goods, as necessary
6. Environmental Modifications	• Therapy Services, as applicable
7. Technology	• All
8. Consultant Services	• All
9. SSP Preparation	• Consultant
10. Backup Plan	• All

**Therapy Services include: Occupational Therapy, Physical Therapy, Speech Language Pathology, Behavior Support Consultation, Acupuncture, Biofeedback, Chiropractic, Hippotherapy, Massage Therapy, Naprapathy, Play Therapy and Cognitive Rehabilitation Therapy.*