



**ACQ Committee Meeting Summary Notes**  
**August 14, 2025**  
**9:00 AM to 11:00 AM**

---

## **42 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*, Daniel Ekman, *Advocate, Developmental Disabilities Council, Program Manager, Center for Self Advocacy*, Kelley Harvey, *ACQ Administrator*

## **Agenda/Discussion**

1. Welcome and announcements: Siri Guru Nam Khalsa, ACQ Co-Chair
2. Review and request approval for minutes from April 10, 2025 ACQ Meeting, May 8, 2025 ACQ Listening Session, June 12, 2025 ACQ Listening Session
3. Public Comment: Daniel Ekman, ACQ Executive Committee Member
4. DDSD Director's Report: Jennifer Rodriguez, Director, DDSD
5. ACQ Membership Openings: Tracy Perry, ACQ Co-Chair
6. Presentations and Updates: Daniel Ekman, ACQ Executive Committee Member, Lisa Blue, Special Education Consultant and Tracy Perry, ACQ Co-Chair
7. Discussion on ACQ sub-committees: Tracy Perry, ACQ Co-Chair
8. Standing Committee Updates: Tracy Perry, ACQ Co-Chair
9. Public Comment: Lisa Blue, ACQ Executive Committee Member
10. Closing: Tracy Perry, ACQ Co-Chair

## **Meeting Notes**

1. **Welcome and announcements: Daniel Ekman, ACQ Executive Committee Member**
2. **Review and request approval for minutes from July 10, 2025 ACQ Meeting**
  - a. Approval of July 10, 2025 ACQ Meeting, no edits
3. **DDSD Director's Report: Jennifer Rodriguez, Director, DDSD**
  - a. Updates:
    - i. Health Care Authority Deputy Secretary Kyra Ochoa, who had direct oversight of DDSD, is no longer with the Healthcare Authority. We do have a new acting Deputy Secretary - Niki Kozlowski. She is currently the Income Support Division Director. In the interim, Cabinet Secretary Kari Armijo will have direct oversight of DDSD.
    - ii. Electronic Visit Verification (EVV): Since the implementation, the state of New Mexico has required our providers, who this is applicable to, to utilize a vendor called Authenticare as the aggregator. However, there is an open aggregator, which means that providers can choose their own

vendor and their own system to operate EVV reports. Currently, we have two (2) DD Waiver and Medical Fragile Waiver providers to help test the new aggregator acceptance testing. If there are any other fee-for-service providers who would like to be a part of the testing group, please reach out directly to Jennifer Rodriguez. The date for the new open aggregator rollout is not known yet, but it is being discussed.

iii. Developmental Disabilities Waiver Renewal, (or DD waiver renewal) and Medically Fragile Waiver Renewal:

1. DD waiver: We have completed a series of statewide in-person town hall meetings, including virtual meetings, to allow the public, our providers, and others who may be interested, to understand what it means when we renew our waivers and the process to get a new waiver application approved by the Centers for Medicare and Medicaid Services (CMS). The waivers are active on 5-year cycles, which means we have to renew with the Federal Government. The current DD waiver expires on June 30th of 2026 and the renewal process takes over a year to complete all of the required steps by the Federal Government. The town hall meetings that were completed recently was an opportunity to hear from the public and stakeholders on what they feel about what is working in the waiver program and if there are changes, what would that be. There is another opportunity for a public comment process at the end of this process and we will share the actual waiver application that we anticipate sending to CMS. I recommend everyone gets their comments in as soon as possible so we can review and research.

a. Related to the town halls, some of the input we received were primarily related to the ideas that have been proposed to unbundling respite or substitute care - pros and cons in whether or not we move forward with requesting that to CMS. There were also questions around the implementation of the Vineland Adaptive Behavior Skills and possibly implementing in the DD waiver to be utilized in person-centered planning tools. It is anticipated to be used to gather more information on what the types of support the waiver applicants may or may not need. We also received suggestions around the provider application process. Other comments were around the idea of eliminating the accreditation requirement for providers to reduce the burden on our providers because it is costly for them, but also to align with national best practices

2. Medically Fragile Waiver: Same process as the DD waiver, it is on the same 5-year cycle and we are currently involved in renewal activities because it expires on June 30th, 2026. We have

completed a series of only virtual town halls per the request of stakeholders and providers for ease in attendance. We did hear ideas and suggestions on new items related to funding available through the waiver process to fund guardianship and also ideas around the requirements to transition from the Medically Fragile Waiver into the Mi Via Self-Directed Waiver. We are not proposing these new ideas, but it gives us something to think about.

- iv. New Federal Rule - Home and Community-Based Programs: Issued from CMS, it's called Ensuring Access to Medicaid Services (Access Rule). There are six (6) main milestones to have states come into compliance with the rule over the course of a six (6) year period. We have met and accomplished our first main milestone, which was related to having a Beneficiary Advisory Committee (BAC) as part of the current existing Medicaid Advisory Committee. The Medicaid Advisory Committee (MAC) is run by the Health Care Authority, it is not specific to DDSD, but we are involved as the MAC and we have been asked to participate more. This advisory committee covers all different types of Medicaid programs. The BAC currently has thirteen (13) members with three (3) members who are HCBS waiver recipients
  - 1. In July, DDSD attended the MAC meeting to share who we are, organizational structure, programs we operate, stats related to programs, and provide a brief update on the Rate Study, including an update on the implementation of the new gross receipts tax that will go live on January 1st, 2026.
- b. Questions and Answers:
  - i. Question # 1: Are the names of the members of the Beneficiary Advisory Committee available publicly? Could you share who the three (3) HCBS members are?
    - 1. Answer: I am sorry, but I did not request the names. I do not know if they are shared publicly, but I do not have the names today. However, I can put you in contact with the person who gave me the roster
  - ii. Question # 2: Will Palco be participating in the Rate Study for services of homemaker, respite, community, direct support, and financial component?
    - 1. Answer: I can maybe partially answer that and I have a question for you for clarity, but no - our vendors or any HCA vendors do not participate in the Rate Study from the perspective of provider surveys, cost studies - as for the financial component, I am curious where the question is coming from. We rely on our providers by way of these tools to collect information. We do have lots of data that we turn over every time we do a Rate Study to our Rate Study Vendors, which is about service utilization, including cost for services - it includes all billing for DD waiver, Medically Fragile waiver, and Mi Via waiver. So if that is the financial piece

you're referencing, then yes, we turned it over. Palco rates or employee rates, that is negotiated by way of a contract, which is different procurement and different negotiation outside of our provider rates. DDS is responsible for provider rate setting, we are not responsible for contract obligations or payment for other divisions in the Health Care Authority's vendors.

- iii. Question # 3: Question about Medicaid as a whole, an item that comes up from recipients of the waiver services and providers, is there any information that could be spread further from this meaning to provide ease in relation to the Federal changes we hear about the Medicaid changes?

- 1. Answer: You are correct, there is a lot of unease about the future of various Medicaid programs and looming cuts. We have been asked to allow our Secretary to be the primary spokesperson for the larger Medicaid umbrella and what the impacts of the reconciliation bill will be. Currently, there are no concerns or anticipated impacts at all to our home and community-based waiver programs and that is to the extent of what I can share today. We are actively planning for our FY27 budget and Secretary Armijo has been clear with the legislature, the DFA, and the Governor's office that until we have a solid plan, they are not discussing what those impacts, including fiscal impacts are at this point in time. The deadline for Medicaid's plan to roll out these changes has not come yet, so you have the same information as we get it.

- iv. Question # 4: For the DD waiver, did we have the waitlist for ten (10) years for the patient to be off the waitlist?

- 1. Answer: Thank you for your question - happy to say no. We cleared our waitlist and we have cleared it again because people apply every single day. We had great news from this past legislative session that we were given funding in our base budget, which means that like our program budget, we receive money to allocate to people, to bring people into our waivers, and this reduces the waiting period. The longest anyone will wait to get a letter to join the services is approximately one (1) month.

- c. Confirmation on receiving Youth Supported Living Development document:

- i. I will look at the document and see what data we have available to share with the group. I can talk about this at a later point, but I am not prepared to speak on that today.

#### **4. Public Comment: Daniel Ekman, ACQ Executive Committee Member**

- a. No public comment made

#### **5. ACQ Membership Openings: Tracy Perry, ACQ Co-Chair**

- a. Current openings:
  - i. 1 opening for Behavior Therapist
  - ii. 1 opening for "15 people IDD Support Network"
  - iii. 1 opening for ACQ Executive Committee Member
    - 1. Lisa Blue has resigned
    - 2. Nominations for the ACQ Executive Committee Member is due by September 25, 2025 for voting quorum to be held at the next ACQ Meeting on October 9th, 2025
      - a. Note: You must be a ACQ Board Member to serve on the ACQ Executive Committee
- b. Update for new ACQ New Members - The Annual ACQ Orientation will be held on August 22nd, 2025, 1PM to 2PM.

## **6. Discussion on Rate Study Sub-Committee: Tracy Perry, ACQ Co-Chair**

- a. The committee has held two (2) meetings:
  - i. 8/4/2025: The first meeting was an introduction to all members on the committee, HMA group, and information about what HMA does and who they are. There was a small discussion on concerns, which HMA sent a follow-up meeting for 8/13/2025
  - ii. 8/13/2025: The second meeting was the follow-up meeting. We reviewed the survey tools and provided feedback. The plan is they'll make changes to the tools and send out again by August 25th, 2025.
- b. Additional comments:
  - i. Stephen Pawlowski is the head for Burns and Associates. He lead the Rate Study that was done in 2012. He is very responsive.
  - ii. On the survey forms and information, it plans to go to DDSD and providers by August 25th. It will be a labor intensive process. We talked about changing the cost report and staff reporting from 2-weeks to 1-week, but the decision was made to stay at 2-weeks. It is important that all of our providers complete this Rate Study.
  - iii. Reminder, the Rate Study is mandatory and we need 100% participation.
  - iv. When we started the meeting on the Rate Study Subcommittee, how was the information shared with the community to join? I heard it through multiple avenues, but how did case management companies hear about the possibility of joining the committee, or other providers and guardians? My recommendation is to have the information shared sooner.
    - 1. It went out originally through the ACQ and Tammy Barth also shared it agency wide, word of mouth and sharing
    - 2. We do have three (3) case managers represented on the subcommittee
    - 3. Keep in mind, this is not a DDSD subcommittee, it's the ACQ subcommittee. We did accept all nominations who did respond, which extended from 20 positions to 30 positions. The ACQ Executive Committee did not deny any nominations and all were accepted by DDSD.
  - v. Have the Rate Study materials been posted online? What about meeting

minutes?

1. Not yet, items are still being worked on. As for meeting minutes, I do not think so, but I can share my personal meeting minutes with you.
  - a. Action item: Tracy will share her meeting minutes from the recent Rate Study meetings
2. The tools are still in draft, but once they are finalized, HMA Burns will post and they will do a recorded webinar session to present and review the forms

## **7. Standing Committee Updates:**

- a. ACQ By Laws: Daniel Ekman [Daniel.Ekman@ddc.nm.gov](mailto:Daniel.Ekman@ddc.nm.gov)
  - i. Edits on ACQ By Laws have been completed from the last ACQ Meeting on July 10th, 2025. The ACQ Administrator will send out the updated copy and we'll review/approve for the next ACQ Meeting on October 9th, 2025.
- b. Interagency Coordinating Council (ICC): April Spaulding [april@abrazos.org](mailto:april@abrazos.org)
  - i. On the ICC, they met in July, and they reviewed and discussed the updated bylaws
  - ii. The ICC typically hosts a parent panel, however, in July, there was a provider panel to discuss successes and challenges in the field and how the ICC can better support providers delivering services
  - iii. The ECECD is conducting a community needs assessment, and this is a required systems-wide needs assessment to identify the strengths and challenges of the programs within ECECD, which includes both providers and families. And when this is completed, a final assessment will be published with county-level profiles
  - iv. The ICC received a breakdown of changes to the FY26 standards and definitions, and those were discussed
- c. Mi Via Advisory Committee: Tim Gardner [tgardner@drnm.org](mailto:tgardner@drnm.org)
  - i. The stipend issue continues to be worked out by the committee and DDSD Scott Doan has been very responsive
  - ii. A new issue emerged involving the process that Comagine has been implementing for requests for additional funding above the base allocation for the Mi Via Waiver. There were a number of families who said they have repeatedly submitted the same information to meet one or more of the four (4) sub standards with the same medical documentation they have used in the past and now Comagine is saying "no, it does not meet our standards" with no additional explanation.
- d. Medically Fragile Waiver Family Advisory Board (FAB): Ann Marie Parmenter [AMParmenter@salud.unm.edu](mailto:AMParmenter@salud.unm.edu)
  - i. The FAB did not meet in July. Our next meeting is Tuesday, September 2nd, 2025, at 5PM via Zoom
    1. The next meeting will focus on FAB recruitment to identify a leader, the Mi Via Waiver Renewal feedback, and event planning

- e. Mi Vía Vendor Stakeholders: Angelique Tafoya [atafoya@altamiranm.org](mailto:atafoya@altamiranm.org)
  - i. Recent meeting was held on August 12th, 2025
    - 1. Topics discussed were the following:
      - a. CSV file, which is in the works
      - b. Update to the GRT that is expected to start in January 2026
      - c. ACQ Website, our committee would like to use the website to be a warehouse of information. Our main goal is to solidify a list of vendor agencies and we are hoping to utilize the ACQ Website as a go-to/one-stop shop
        - i. DDS Scott Doan will work with Angelique off-line
      - d. We are waiting for the release of a draft policy for the EOR. There were several questions about the paid EOR and how it will work - information is pending from DDS
      - e. We shared two (2) or three (3) memos that were recently shared by Tammy Barth. One memo was on the allocation - who is being allocated, county, and age breakdowns for people to start planning. The other memo was in reference to the lease agreement protections. The last update was the use of Uber and Lyft for Mi Via Waiver services
      - f. The Caregiver Criminal History Screening Program is making significant changes and there will be a training on August 20th to review a portal of applicants.
- f. ACQ Policy and Quality: Winton Wood [wiwood@salud.unm.edu](mailto:wiwood@salud.unm.edu)
  - i. Elana and Winton unable to attend
  - ii. Tracy Perry shared the following update:
    - 1. 8/13/2025 was the Policy and Quality meeting. We went over the Exception Policy and the only change is adding the Mi Via and Medically Fragile to it. There were some questions related to the youth and the exception process - it was more talking than getting answers
- g. Youth Supported Living Development Committee: Gay Finlayson [gfinlayson@salud.unm.edu](mailto:gfinlayson@salud.unm.edu)
  - i. We are looking at how to get CYFD onboard with meeting with our committee to discuss requests on the following:
    - 1. The waiver and kids in State custody who have serious behavioral problems. We are in communication, but it is on a different topic related to housing kids within the office
      - a. I would like to join on getting CYFD to the table because we are experiencing a similar issue related to the Medically Fragile Program
      - b. I think if we hit the Legislature with the financial cost of the needs, we may get more
      - c. In terms of what the MCOs have or the Medical Assistance Division, or CYFD, I can't speak for their data, but we have data with respect to supported living. In terms of seeking

placement out of state, I do not have that data.

**8. Public Comment: Tracy Perry, ACQ Executive Committee Member**

- a. Comment #1: I wanted to provide a historical lesson on Rate Studies. In 2013, I did a presentation before the Legislative Health and Human Service Committee regarding Burns' last Rate Study. Prior to them coming to New Mexico, they completed a Rate Study in Georgia. The Rate Study in Georgia, they sent out a massive request for cost information and the majority of Georgia providers couldn't respond in the timeframe. Then ended up allotting two (2) more weeks for the providers to respond. The providers were still not able to complete. A year later, Burns' came to New Mexico and did the same cost thing, and they sent it out, and the providers looked at it and said, we can't respond to this in the time frame. Another two (2) weeks were provided and when they didn't get a good response, they said they would use their own files, which they have done twice. They then sent out their cost study, which came back with only 15% of the providers responding and the rest was based on their data. I am assuming this is not going to change. This will affect New Mexico as a business appraiser of looking at fixed overhead per unit cost - A rural provider is going to have a much higher fixed overhead cost based on per person they are serving because they have less people paying for. This is an issue in rural New Mexico. When only the providers that are the larger agencies that have the administrative overhead to respond to the surveys provide, it screws rural New Mexico and the rates that have gone on were set by Burns and have been following the same policy with PCG not getting responses twice to rate studies. We're back in the exact same boat again. What this does is that that hurts rural providers, and if you go to the freedom of choice, and you look for custom in-home support, supported living, intense medical living, all of them are not available statewide, despite the fact that our waiver is required to provide statewide services. If I looked at their contract, and their contract requires them to do this data, and that's what we're paying for, I'd like to see us get our dollars worth and not have them violate the terms of the contract and provide us real data so that we can work with it, so that rural New Mexico needs are taken into consideration. The other issue of the rate study is if you look at Los Lunas Community Program, and you compare their wages, which they got a raise as of July 1st - According to the legislature, we worked hard during the last session to get a rate increase for the waiver. We're not getting it. The Los Lunas Community Program, they are up around \$20 an hour with a 40% overhead. Our current wages are based on the previous 2019 rate study of \$15 an hour with a 22% overhead. In the recent 2023 study, they decided that subcontractors could fill those roles, which a federal court has now said they don't and several providers have been audited by the U.S. Department of Labor and forced to create these people as employees. So we're still using a \$15 an hour wage, but we've increased the overhead with different things the state has required. The average pay is about 15 bucks an hour. Some of the Albuquerque agencies, where they have lower fixed overhead per unit, can pay a



little bit more. The problem is that they're in direct competition for staff from most Los Lunas programs, who pay up to \$20 an hour with a 40% fixed overhead. Now, if you look at our waiver application, it says that no state agency is providing waiver services. That's not true. The rates at Los Lunas programs should be considered in the rate adjustment because that's the real cost. We don't have sufficient rates to attract providers, which the freedom of choice statistics would show or that Los Lunas is paying people way more than they need to, and they're violating the state anti-donation clause of the Constitution. It comes down to which law we are breaking. When we got thousands more jobs than the film industry and a bunch of other ones that were grossly subsidizing.

- b. Comment #2: I have been looking at the children with problem behavior and needing higher levels of care. But as I look around, there are programs with similar issues across the country. I am wondering if in our waiver renewal, or if there's some way for us to have a pediatric waiver that's more flexible for kids and families with kids who have autism. They cannot get on the waiver until the child can score a stable IQ at 6 or provide more documentation that shows the functional limitations. It feels like a disservice to those kids with early access to EPSDT services, they could make more progress.

## **9. Closing: Tracy Perry, ACQ Co-Chair**

---

### **Zoom Meeting Location:**

#### **Join Zoom Meeting**

<https://us06web.zoom.us/j/86170551005>

### **Upcoming ACQ Meetings and Listening Sessions:**

- ACQ Executive Committee Meeting
  - August 22, 2025, 12PM to 1PM
- ACQ Orientation
  - August 22nd, 2025 1PM to 2PM
- ACQ Listening Session
  - September 11, 2025, 9AM to 10AM
- ACQ Executive Committee Meeting
  - September 25, 2025, 2PM to 3:30PM
- ACQ Meeting
  - October 9, 2025, 9AM to 1PM