

# NEW MEXICO 1915(c) HOME AND COMMUNITY-BASED WAIVER PROVIDER STATUS SUMMARY – JULY 2026

## DEVELOPMENTAL DISABILITIES WAIVER

| DD WAIVER                                    | REGION | NUMBER OF PROVIDER AGENCIES | NUMBER OF PROVIDER AGENCIES ON MORATORIUM | NUMBER OF PROVIDER AGENCIES TAKING NEW CLIENTS | NUMBER OF NEW PROVIDER AGENCIES |
|----------------------------------------------|--------|-----------------------------|-------------------------------------------|------------------------------------------------|---------------------------------|
| Adult Nursing                                | METRO  | 29                          | 8                                         | 21                                             | 1                               |
|                                              | NE     | 10                          | 1                                         | 9                                              |                                 |
|                                              | NW     | 6                           | 3                                         | 3                                              |                                 |
|                                              | SE     | 8                           | 4                                         | 4                                              |                                 |
|                                              | SW     | 16                          | 6                                         | 10                                             |                                 |
| Assistive Technology Purchasing Agent        | METRO  | 1                           | 0                                         | 1                                              |                                 |
|                                              | NE     | 2                           | 0                                         | 2                                              |                                 |
|                                              | NW     | 1                           | 0                                         | 1                                              |                                 |
|                                              | SE     | 2                           | 1                                         | 1                                              |                                 |
|                                              | SW     | 1                           | 0                                         | 1                                              |                                 |
| Behavioral Support Consultation              | METRO  | 18                          | 14                                        | 4                                              |                                 |
|                                              | NE     | 9                           | 6                                         | 3                                              |                                 |
|                                              | NW     | 6                           | 4                                         | 2                                              |                                 |
|                                              | SE     | 7                           | 5                                         | 2                                              |                                 |
|                                              | SW     | 11                          | 8                                         | 3                                              |                                 |
| Case Management                              | METRO  | 8                           | 0                                         | 8                                              |                                 |
|                                              | NE     | 6                           | 0                                         | 6                                              |                                 |
|                                              | NW     | 7                           | 0                                         | 7                                              |                                 |
|                                              | SE     | 7                           | 0                                         | 7                                              |                                 |
|                                              | SW     | 7                           | 0                                         | 7                                              |                                 |
| Community Integrated Employment – Group      | METRO  | 2                           | 1                                         | 1                                              |                                 |
|                                              | NE     | 2                           | 0                                         | 2                                              |                                 |
|                                              | NW     | 3                           | 1                                         | 2                                              |                                 |
|                                              | SE     | 4                           | 1                                         | 3                                              |                                 |
|                                              | SW     | 2                           | 0                                         | 2                                              |                                 |
| Community Integrated Employment – Individual | METRO  | 15                          | 4                                         | 11                                             |                                 |
|                                              | NE     | 7                           | 2                                         | 5                                              |                                 |
|                                              | NW     | 5                           | 2                                         | 3                                              |                                 |
|                                              | SE     | 5                           | 2                                         | 3                                              |                                 |
|                                              | SW     | 7                           | 1                                         | 6                                              |                                 |
| Crisis Supports                              | METRO  | 3                           | 0                                         | 3                                              |                                 |
|                                              | NE     | 0                           | 0                                         | 0                                              |                                 |
|                                              | NW     | 0                           | 0                                         | 0                                              |                                 |
|                                              | SE     | 0                           | 0                                         | 0                                              |                                 |
|                                              | SW     | 1                           | 0                                         | 1                                              |                                 |

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| DD WAIVER                                             | REGION | NUMBER OF PROVIDER AGENCIES | NUMBER OF PROVIDER AGENCIES ON MORATORIUM | NUMBER OF PROVIDER AGENCIES TAKING NEW CLIENTS | NUMBER OF NEW PROVIDER AGENCIES |
|-------------------------------------------------------|--------|-----------------------------|-------------------------------------------|------------------------------------------------|---------------------------------|
| Customized Community Supports - Group                 | METRO  | 27                          | 9                                         | 18                                             | 1                               |
|                                                       | NE     | 9                           | 1                                         | 8                                              |                                 |
|                                                       | NW     | 6                           | 1                                         | 5                                              |                                 |
|                                                       | SE     | 7                           | 2                                         | 5                                              |                                 |
|                                                       | SW     | 16                          | 6                                         | 10                                             |                                 |
| Customized Community Supports- Individual/Small Group | METRO  | 43                          | 16                                        | 27                                             | 2                               |
|                                                       | NE     | 14                          | 3                                         | 11                                             |                                 |
|                                                       | NW     | 12                          | 4                                         | 8                                              |                                 |
|                                                       | SE     | 11                          | 5                                         | 6                                              |                                 |
|                                                       | SW     | 25                          | 8                                         | 17                                             |                                 |
| Customized In-Home Supports                           | METRO  | 20                          | 7                                         | 13                                             |                                 |
|                                                       | NE     | 12                          | 1                                         | 11                                             |                                 |
|                                                       | NW     | 5                           | 1                                         | 4                                              |                                 |
|                                                       | SE     | 12                          | 3                                         | 9                                              |                                 |
|                                                       | SW     | 21                          | 3                                         | 18                                             |                                 |
| Environmental Modification                            | METRO  | 4                           | 0                                         | 4                                              |                                 |
|                                                       | NE     | 3                           | 0                                         | 3                                              |                                 |
|                                                       | NW     | 1                           | 0                                         | 1                                              |                                 |
|                                                       | SE     | 1                           | 1                                         | 0                                              |                                 |
|                                                       | SW     | 2                           | 0                                         | 2                                              |                                 |
| Independent Living Transition                         | METRO  | 4                           | 0                                         | 4                                              | 1                               |
|                                                       | NE     | 2                           | 0                                         | 2                                              |                                 |
|                                                       | NW     | 0                           | 0                                         | 0                                              |                                 |
|                                                       | SE     | 3                           | 0                                         | 3                                              |                                 |
|                                                       | SW     | 1                           | 0                                         | 1                                              |                                 |
| Living Supports- Family Living                        | METRO  | 36                          | 4                                         | 32                                             | 2                               |
|                                                       | NE     | 15                          | 1                                         | 14                                             |                                 |
|                                                       | NW     | 10                          | 1                                         | 9                                              |                                 |
|                                                       | SE     | 13                          | 2                                         | 11                                             |                                 |
|                                                       | SW     | 21                          | 2                                         | 19                                             |                                 |
| Living Supports- Intensive Medical Living             | METRO  | 5                           | 3                                         | 2                                              |                                 |
|                                                       | NE     | 0                           | 0                                         | 0                                              |                                 |
|                                                       | NW     | 0                           | 0                                         | 0                                              |                                 |
|                                                       | SE     | 2                           | 2                                         | 0                                              |                                 |
|                                                       | SW     | 0                           | 0                                         | 0                                              |                                 |
|                                                       | METRO  | 36                          | 18                                        | 18                                             | 1                               |

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| DD WAIVER                        | REGION | NUMBER OF PROVIDER AGENCIES | NUMBER OF PROVIDER AGENCIES ON MORATORIUM | NUMBER OF PROVIDER AGENCIES TAKING NEW CLIENTS | NUMBER OF NEW PROVIDER AGENCIES |
|----------------------------------|--------|-----------------------------|-------------------------------------------|------------------------------------------------|---------------------------------|
| Living Supports-Supported Living | NE     | 6                           | 1                                         | 5                                              |                                 |
|                                  | NW     | 5                           | 1                                         | 4                                              |                                 |
|                                  | SE     | 5                           | 4                                         | 1                                              |                                 |
|                                  | SW     | 15                          | 6                                         | 9                                              |                                 |
| Non-Medical Transportation       | METRO  | 10                          | 2                                         | 8                                              | 1                               |
|                                  | NE     | 2                           | 0                                         | 2                                              |                                 |
|                                  | NW     | 4                           | 1                                         | 3                                              |                                 |
|                                  | SE     | 4                           | 2                                         | 2                                              |                                 |
|                                  | SW     | 3                           | 0                                         | 3                                              |                                 |
| Nutritional Counseling           | METRO  | 2                           | 0                                         | 2                                              |                                 |
|                                  | NE     | 2                           | 0                                         | 2                                              |                                 |
|                                  | NW     | 1                           | 0                                         | 1                                              |                                 |
|                                  | SE     | 1                           | 0                                         | 1                                              |                                 |
|                                  | SW     | 1                           | 0                                         | 1                                              |                                 |
| Occupational Therapy             | METRO  | 26                          | 26                                        | 0                                              |                                 |
|                                  | NE     | 4                           | 4                                         | 0                                              |                                 |
|                                  | NW     | 3                           | 3                                         | 0                                              |                                 |
|                                  | SE     | 3                           | 2                                         | 1                                              |                                 |
|                                  | SW     | 4                           | 3                                         | 1                                              |                                 |
| Personal Support Technology      | METRO  | 3                           | 2                                         | 1                                              |                                 |
|                                  | NE     | 2                           | 1                                         | 1                                              |                                 |
|                                  | NW     | 2                           | 1                                         | 1                                              |                                 |
|                                  | SE     | 3                           | 1                                         | 2                                              |                                 |
|                                  | SW     | 2                           | 1                                         | 1                                              |                                 |
| Physical Therapy                 | METRO  | 27                          | 21                                        | 6                                              |                                 |
|                                  | NE     | 6                           | 5                                         | 1                                              |                                 |
|                                  | NW     | 9                           | 7                                         | 2                                              |                                 |
|                                  | SE     | 4                           | 4                                         | 0                                              |                                 |
|                                  | SW     | 6                           | 4                                         | 2                                              |                                 |
| Preliminary Risk Screening       | METRO  | 3                           | 1                                         | 2                                              |                                 |
|                                  | NE     | 3                           | 0                                         | 3                                              |                                 |
|                                  | NW     | 3                           | 1                                         | 2                                              |                                 |
|                                  | SE     | 2                           | 1                                         | 1                                              |                                 |
|                                  | SW     | 2                           | 1                                         | 1                                              |                                 |
| Respite                          | METRO  | 18                          | 5                                         | 13                                             |                                 |
|                                  | NE     | 13                          | 0                                         | 13                                             |                                 |

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| DD WAIVER                   | REGION | NUMBER OF PROVIDER AGENCIES | NUMBER OF PROVIDER AGENCIES ON MORATORIUM | NUMBER OF PROVIDER AGENCIES TAKING NEW CLIENTS | NUMBER OF NEW PROVIDER AGENCIES |
|-----------------------------|--------|-----------------------------|-------------------------------------------|------------------------------------------------|---------------------------------|
|                             | NW     | 4                           | 0                                         | 4                                              |                                 |
|                             | SE     | 10                          | 3                                         | 7                                              |                                 |
|                             | SW     | 18                          | 6                                         | 12                                             |                                 |
| Socialization and Sexuality | METRO  | 3                           | 0                                         | 3                                              |                                 |
|                             | NE     | 3                           | 0                                         | 3                                              |                                 |
|                             | NW     | 2                           | 0                                         | 2                                              |                                 |
|                             | SE     | 2                           | 0                                         | 2                                              |                                 |
|                             | SW     | 2                           | 0                                         | 2                                              |                                 |
| Speech Therapy              | METRO  | 32                          | 24                                        | 8                                              |                                 |
|                             | NE     | 6                           | 6                                         | 0                                              |                                 |
|                             | NW     | 7                           | 7                                         | 0                                              |                                 |
|                             | SE     | 4                           | 2                                         | 2                                              |                                 |
|                             | SW     | 4                           | 4                                         | 0                                              |                                 |
| Supplemental Dental         | METRO  | 0                           | 0                                         | 0                                              |                                 |
|                             | NE     | 0                           | 0                                         | 0                                              |                                 |
|                             | NW     | 0                           | 0                                         | 0                                              |                                 |
|                             | SE     | 0                           | 0                                         | 0                                              |                                 |
|                             | SW     | 0                           | 0                                         | 0                                              |                                 |

### MI VIA WAIVER

| MI VIA WAIVER       | REGION | NUMBER OF PROVIDER AGENCIES | NUMBER OF PROVIDER AGENCIES ON MORATORIUM | NUMBER OF PROVIDER AGENCIES TAKING NEW CLIENTS | NUMBER OF NEW PROVIDER AGENCIES |
|---------------------|--------|-----------------------------|-------------------------------------------|------------------------------------------------|---------------------------------|
| Consultant Services | METRO  | 15                          | 0                                         | 15                                             |                                 |
|                     | NE     | 14                          | 1                                         | 13                                             |                                 |
|                     | NW     | 12                          | 1                                         | 11                                             |                                 |
|                     | SE     | 13                          | 1                                         | 12                                             |                                 |
|                     | SW     | 13                          | 0                                         | 13                                             |                                 |

# NEW MEXICO 1915(c) HOME AND COMMUNITY-BASED WAIVER PROVIDER STATUS SUMMARY – JULY 2026

## MEDICALLY FRAGILE WAIVER

| MEDICALLY FRAGILE WAIVER           | REGION | NUMBER OF PROVIDER AGENCIES | NUMBER OF PROVIDER AGENCIES ON MORATORIUM | NUMBER OF PROVIDER AGENCIES TAKING NEW CLIENTS | NUMBER OF NEW PROVIDER AGENCIES |
|------------------------------------|--------|-----------------------------|-------------------------------------------|------------------------------------------------|---------------------------------|
| Behavior Support Consultation      | METRO  | 2                           | 1                                         | 1                                              |                                 |
|                                    | NE     | 2                           | 1                                         | 1                                              |                                 |
|                                    | NW     | 1                           | 1                                         | 0                                              |                                 |
|                                    | SE     | 1                           | 1                                         | 0                                              |                                 |
|                                    | SW     | 1                           | 1                                         | 0                                              |                                 |
| Case Management                    | METRO  | 1                           | 0                                         | 1                                              |                                 |
|                                    | NE     | 1                           | 0                                         | 1                                              |                                 |
|                                    | NW     | 1                           | 0                                         | 1                                              |                                 |
|                                    | SE     | 1                           | 0                                         | 1                                              |                                 |
|                                    | SW     | 1                           | 0                                         | 1                                              |                                 |
| Customized Community Group Support | METRO  | 1                           | 1                                         | 0                                              |                                 |
|                                    | NE     | 0                           | 0                                         | 0                                              |                                 |
|                                    | NW     | 0                           | 0                                         | 0                                              |                                 |
|                                    | SE     | 0                           | 0                                         | 0                                              |                                 |
|                                    | SW     | 0                           | 0                                         | 0                                              |                                 |
| Environmental Modification         | METRO  | 2                           | 0                                         | 2                                              |                                 |
|                                    | NE     | 1                           | 0                                         | 1                                              |                                 |
|                                    | NW     | 0                           | 0                                         | 0                                              |                                 |
|                                    | SE     | 0                           | 0                                         | 0                                              |                                 |
|                                    | SW     | 2                           | 0                                         | 2                                              |                                 |
| Home Health Aide                   | METRO  | 5                           | 0                                         | 5                                              |                                 |
|                                    | NE     | 5                           | 0                                         | 5                                              |                                 |
|                                    | NW     | 5                           | 0                                         | 5                                              |                                 |
|                                    | SE     | 5                           | 0                                         | 5                                              |                                 |

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|                                     |       |   |   |   |  |
|-------------------------------------|-------|---|---|---|--|
|                                     | SW    | 6 | 0 | 6 |  |
| In-Home Respite                     | METRO | 5 | 0 | 5 |  |
|                                     | NE    | 5 | 0 | 5 |  |
|                                     | NW    | 5 | 0 | 5 |  |
|                                     | SE    | 5 | 0 | 5 |  |
|                                     | SW    | 5 | 0 | 5 |  |
| Individual Direct Goods and Service | METRO | 0 | 0 | 0 |  |
|                                     | NE    | 0 | 0 | 0 |  |
|                                     | NW    | 0 | 0 | 0 |  |
|                                     | SE    | 0 | 0 | 0 |  |
|                                     | SW    | 0 | 0 | 0 |  |
| Massage Therapy                     | METRO | 1 | 0 | 1 |  |
|                                     | NE    | 0 | 0 | 0 |  |
|                                     | NW    | 0 | 0 | 0 |  |
|                                     | SE    | 0 | 0 | 0 |  |
|                                     | SW    | 0 | 0 | 0 |  |
| Nutritional Counseling              | METRO | 1 | 0 | 1 |  |
|                                     | NE    | 1 | 0 | 1 |  |
|                                     | NW    | 1 | 0 | 1 |  |
|                                     | SE    | 1 | 0 | 1 |  |
|                                     | SW    | 1 | 0 | 1 |  |
| Occupational Therapy                | METRO | 2 | 0 | 2 |  |
|                                     | NE    | 2 | 0 | 2 |  |
|                                     | NW    | 1 | 0 | 1 |  |
|                                     | SE    | 0 | 0 | 0 |  |
|                                     | SW    | 0 | 0 | 0 |  |
| Physical Therapy                    | METRO | 3 | 0 | 3 |  |
|                                     | NE    | 2 | 0 | 2 |  |
|                                     | NW    | 1 | 0 | 1 |  |

## NEW MEXICO 1915(c) HOME AND COMMUNITY-BASED WAIVER PROVIDER STATUS SUMMARY – JULY 2026

|                                            |       |   |   |   |  |
|--------------------------------------------|-------|---|---|---|--|
|                                            | SE    | 0 | 0 | 0 |  |
|                                            | SW    | 0 | 0 | 0 |  |
| Private Duty Nursing                       | METRO | 5 | 0 | 5 |  |
|                                            | NE    | 5 | 0 | 5 |  |
|                                            | NW    | 5 | 0 | 5 |  |
|                                            | SE    | 5 | 0 | 5 |  |
|                                            | SW    | 5 | 0 | 5 |  |
| Specialized Medical Equipment and Supplies | METRO | 1 | 0 | 1 |  |
|                                            | NE    | 1 | 0 | 1 |  |
|                                            | NW    | 1 | 0 | 1 |  |
|                                            | SE    | 1 | 0 | 1 |  |
|                                            | SW    | 1 | 0 | 1 |  |
| Specialized Respite Home                   | METRO | 1 | 0 | 1 |  |
|                                            | NE    | 1 | 0 | 1 |  |
|                                            | NW    | 1 | 0 | 1 |  |
|                                            | SE    | 1 | 0 | 1 |  |
|                                            | SW    | 1 | 0 | 1 |  |
| Speech Therapy                             | METRO | 5 | 0 | 5 |  |
|                                            | NE    | 2 | 0 | 2 |  |
|                                            | NW    | 1 | 0 | 1 |  |
|                                            | SE    | 0 | 0 | 0 |  |
|                                            | SW    | 0 | 0 | 0 |  |
| Vehicle Modifications                      | METRO | 0 | 0 | 0 |  |
|                                            | NE    | 0 | 0 | 0 |  |
|                                            | NW    | 0 | 0 | 0 |  |
|                                            | SE    | 0 | 0 | 0 |  |
|                                            | SW    | 0 | 0 | 0 |  |

## NEW MEXICO 1915(c) HOME AND COMMUNITY-BASED WAIVER PROVIDER STATUS SUMMARY – JULY 2026

| MEDICALLY FRAGILE WAIVER           | REGION | NUMBER OF PROVIDER AGENCIES | NUMBER OF PROVIDER AGENCIES ON MORATORIUM | NUMBER OF PROVIDER AGENCIES TAKING NEW CLIENTS | NUMBER OF NEW PROVIDER AGENCIES |
|------------------------------------|--------|-----------------------------|-------------------------------------------|------------------------------------------------|---------------------------------|
| Behavior Support Consultation      | METRO  | 2                           | 1                                         | 1                                              | 0                               |
|                                    | NE     | 2                           | 1                                         | 1                                              | 0                               |
|                                    | NW     | 1                           | 1                                         | 0                                              | 0                               |
|                                    | SE     | 1                           | 1                                         | 0                                              | 0                               |
|                                    | SW     | 1                           | 1                                         | 0                                              | 0                               |
|                                    |        |                             |                                           |                                                |                                 |
| Case Management                    | METRO  | 1                           | 0                                         | 1                                              | 0                               |
|                                    | NE     | 1                           | 0                                         | 1                                              | 0                               |
|                                    | NW     | 1                           | 0                                         | 1                                              | 0                               |
|                                    | SE     | 1                           | 0                                         | 1                                              | 0                               |
|                                    | SW     | 1                           | 0                                         | 1                                              | 0                               |
|                                    |        |                             |                                           |                                                |                                 |
| Customized Community Group Support | METRO  | 1                           | 1                                         | 0                                              | 0                               |
|                                    | NE     | 0                           | 0                                         | 0                                              | 0                               |
|                                    | NW     | 0                           | 0                                         | 0                                              | 0                               |
|                                    | SE     | 0                           | 0                                         | 0                                              | 0                               |
|                                    | SW     | 0                           | 0                                         | 0                                              | 0                               |
|                                    |        |                             |                                           |                                                |                                 |
| Environmental Modification         | METRO  | 2                           | 0                                         | 2                                              | 0                               |
|                                    | NE     | 1                           | 0                                         | 1                                              | 0                               |
|                                    | NW     | 0                           | 0                                         | 0                                              | 0                               |
|                                    | SE     | 0                           | 0                                         | 0                                              | 0                               |
|                                    | SW     | 2                           | 0                                         | 2                                              | 0                               |
|                                    |        |                             |                                           |                                                |                                 |
| Home Health Aide                   | METRO  | 4                           | 0                                         | 4                                              | 0                               |
|                                    | NE     | 4                           | 0                                         | 4                                              | 0                               |
|                                    | NW     | 4                           | 0                                         | 4                                              | 0                               |
|                                    | SE     | 4                           | 0                                         | 4                                              | 0                               |
|                                    | SW     | 4                           | 0                                         | 4                                              | 0                               |
|                                    |        |                             |                                           |                                                |                                 |

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|                                            |       |   |   |   |   |
|--------------------------------------------|-------|---|---|---|---|
| In-Home Respite                            | METRO | 4 | 0 | 4 | 0 |
|                                            | NE    | 4 | 0 | 4 | 0 |
|                                            | NW    | 4 | 0 | 4 | 0 |
|                                            | SE    | 4 | 0 | 4 | 0 |
|                                            | SW    | 3 | 0 | 3 | 0 |
| Individual Direct Goods and Service        | METRO | 0 | 0 | 0 | 0 |
|                                            | NE    | 0 | 0 | 0 | 0 |
|                                            | NW    | 0 | 0 | 0 | 0 |
|                                            | SE    | 0 | 0 | 0 | 0 |
|                                            | SW    | 0 | 0 | 0 | 0 |
| Massage Therapy                            | METRO | 1 | 0 | 1 | 0 |
|                                            | NE    | 0 | 0 | 0 | 0 |
|                                            | NW    | 0 | 0 | 0 | 0 |
|                                            | SE    | 0 | 0 | 0 | 0 |
|                                            | SW    | 0 | 0 | 0 | 0 |
| Nutritional Counseling                     | METRO | 1 | 0 | 1 | 0 |
|                                            | NE    | 1 | 0 | 1 | 0 |
|                                            | NW    | 1 | 0 | 1 | 0 |
|                                            | SE    | 1 | 0 | 1 | 0 |
|                                            | SW    | 1 | 0 | 1 | 0 |
| Occupational Therapy                       | METRO | 2 | 1 | 1 | 0 |
|                                            | NE    | 2 | 1 | 1 | 0 |
|                                            | NW    | 1 | 1 | 0 | 0 |
|                                            | SE    | 0 | 0 | 0 | 0 |
|                                            | SW    | 0 | 0 | 0 | 0 |
| Physical Therapy                           | METRO | 3 | 1 | 2 | 0 |
|                                            | NE    | 2 | 1 | 1 | 0 |
|                                            | NW    | 1 | 1 | 0 | 0 |
|                                            | SE    | 0 | 0 | 0 | 0 |
|                                            | SW    | 0 | 0 | 0 | 0 |
| Private Duty Nursing                       | METRO | 4 | 0 | 4 | 0 |
|                                            | NE    | 4 | 0 | 4 | 0 |
|                                            | NW    | 4 | 0 | 4 | 0 |
|                                            | SE    | 4 | 0 | 4 | 0 |
|                                            | SW    | 3 | 0 | 3 | 0 |
| Specialized Medical Equipment and Supplies | METRO | 1 | 0 | 1 | 0 |
|                                            | NE    | 1 | 0 | 1 | 0 |
|                                            | NW    | 1 | 0 | 1 | 0 |
|                                            | SE    | 1 | 0 | 1 | 0 |

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|                             |       |   |   |   |   |
|-----------------------------|-------|---|---|---|---|
|                             | SW    | 1 | 0 | 1 | 0 |
| Specialized<br>Respite Home | METRO | 1 | 0 | 1 | 0 |
|                             | NE    | 1 | 0 | 1 | 0 |
|                             | NW    | 1 | 0 | 1 | 0 |
|                             | SE    | 0 | 0 | 0 | 0 |
|                             | SW    | 0 | 0 | 0 | 0 |
| Speech<br>Therapy           | METRO | 5 | 0 | 5 | 0 |
|                             | NE    | 2 | 0 | 2 | 0 |
|                             | NW    | 1 | 0 | 1 | 0 |
|                             | SE    | 0 | 0 | 0 | 0 |
|                             | SW    | 1 | 0 | 1 | 0 |
| Vehicle<br>Modifications    | METRO | 0 | 0 | 0 | 0 |
|                             | NE    | 0 | 0 | 0 | 0 |
|                             | NW    | 0 | 0 | 0 | 0 |
|                             | SE    | 0 | 0 | 0 | 0 |
|                             | SW    | 0 | 0 | 0 | 0 |

# NEW MEXICO 1915(c) HOME AND COMMUNITY-BASED WAIVER PROVIDER STATUS SUMMARY – JULY 2026

## SUMMARY

| WAIVER                            | REGION | PERCENTAGE OF TOTAL AGENCIES ON MORATORIUMS | PERCENTAGE OF AGENCIES TAKING NEW CLIENTS | PERCENTAGE OF SERVICE TYPES THAT HAVE ZERO PROVIDERS | GREATEST REGIONS OF NEED | PROVIDER TYPES WITH ONLY ONE PROVIDER |
|-----------------------------------|--------|---------------------------------------------|-------------------------------------------|------------------------------------------------------|--------------------------|---------------------------------------|
| Developmental Disabilities Waiver | METRO  | 44.00%                                      | 56.00%                                    | 12.00%                                               | Metro                    | AT                                    |
|                                   | NE     | 23.19%                                      | 76.81%                                    | 16.00%                                               | Northeast                |                                       |
|                                   | NW     | 37.25%                                      | 62.75%                                    | 24.00%                                               | Northwest                | AT, EM, NC                            |
|                                   | SE     | 31.58%                                      | 68.42%                                    | 20.00%                                               | Southeast                | EM, NC                                |
|                                   | SW     | 31.72%                                      | 68.28%                                    | 8.00%                                                | Southwest                | AT, CS, ILT, NC                       |
| Mi Via Waiver                     | METRO  | 0.00%                                       | 100.00%                                   | 0.00%                                                | N/A                      |                                       |
|                                   | NE     | 7.14%                                       | 92.86%                                    | 0.00%                                                |                          |                                       |
|                                   | NW     | 8.33%                                       | 91.67%                                    | 0.00%                                                |                          |                                       |
|                                   | SE     | 7.69%                                       | 92.31%                                    | 0.00%                                                |                          |                                       |
|                                   | SW     | 7.69%                                       | 92.31%                                    | 0.00%                                                |                          |                                       |
| Medically Fragile Waiver          | METRO  | 5.71%                                       | 94.29%                                    | 13.33%                                               | Metro                    | CCG-S, MT, NC, SMES, SRH              |
|                                   | NE     | 3.57%                                       | 96.43%                                    | 20.00%                                               | Northeast                | EM, NC, SMES, SRH                     |
|                                   | NW     | 4.35%                                       | 95.65%                                    | 33.33%                                               | Northwest                | BSC, NC, OT, PT, SMES, SRH, SLP       |
|                                   | SE     | 4.76%                                       | 95.24%                                    | 53.33%                                               | Southeast                | BSC, MC, SMES, SRH                    |
|                                   | SW     | 5.88%                                       | 94.12%                                    | 46.67%                                               | Southwest                | BSC, NC, SMES, SRH                    |