
HMA

HEALTH MANAGEMENT ASSOCIATES

*Home and Community Based Services
Rate Study*

Final Report on Rate Study Recommendations

PRESENTED TO

NEW MEXICO HEALTH CARE AUTHORITY
DEVELOPMENTAL DISABILITIES SUPPORTS DIVISION

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*Research and Consulting in the Fields of Health and Human Services Policy, Health Economics
and Finance, Program Evaluation, Data Analysis, and Health System Restructuring*

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Executive Summary

The New Mexico Health Care Authority's Developmental Disabilities Supports Division (DDSD) operates three Medicaid Section 1915(c) home and community-based services (HCBS) waivers for individuals with intellectual and developmental disabilities (I/DD): the Developmental Disabilities (DD) Waiver, the Mi Via Waiver, and the Medically Fragile Waiver. These waivers cover a variety of services, including residential and in-home supports, day habilitation and employment services, and clinical supports such as nursing, therapies, and behavioral support. Waiver services are delivered by a network of private providers, including for-profit and nonprofit agencies, independent contractors, and self-directed staff.

DDSD is responsible for establishing provider payment rates based on available fundings. Federal Medicaid statutes require that payment rates support access to effective, efficient, and quality services. In fiscal year 2025, payment rates for waiver services were updated based on the results of a 2023 rate study (except that no recommended reductions were adopted) and an additional 5.32 percent cost of living increase, resulting in average rate increases of 16.5 percent.

In 2023, the New Mexico Legislature passed House Bill 395 amending 28-16A-16 NMSA to require DDSD to conduct a biennial cost study of waiver rates. DDSD contracted with the Burns & Associates division of Health Management Associates (HMA-Burns) to lead this rate study. HMA-Burns has completed similar rate studies for HCBS programs in more than a dozen other states and previously conducted a rate study on behalf of DDSD in 2011-2012. Drawing on this experience, HMA-Burns organized the rate study into three phases:

- **Phase 1 - Background Research & Kick-Off Meetings.** HMA-Burns conducted an in-depth review of New Mexico's HCBS program structure, waiver specifications, service standards, regulations, and historical rate methodologies. These reviews were supplemented by discussions with DDSD leadership and a rate study subcommittee comprised of members of the Advisory Council on Quality Supports for Individuals with Developmental Disabilities and Their Families (ACQ). These activities clarified system strengths and challenges, validated methodological decisions, and informed the study's recommendations.
- **Phase 2 - Data Collection.** The project gathered extensive quantitative and qualitative data through a statewide provider cost survey (with an 80 percent overall response rate), time studies covering thousands of direct care workers across the state, analysis of claims and other systems data, and research into independent data sources to benchmark and inform rate model assumptions.
- **Phase 3 - Rate Model Development and Public Comments.** HMA-Burns developed service-specific rate models for most services in the scope of the study that reflected the data collected in Phase 2. Rate models are designed for transparency, including all the assumptions and calculations underlying each proposed rate. Alternative methodologies were used for some services. Draft rate and policy-related recommendations were released for public comment, leading to several adjustments to these proposals.

For most services, the rate study recommends increasing payment rates, but rate decreases are recommended for a small number of services. However, DDSD does not intend to adopt any rate

reductions. If funded, implementation of the proposed rates would increase overall spending by 16.1 percent, although the impact varies significantly by service and across waivers.

In addition to proposing rates that reflect current market conditions in New Mexico, the rate study recommends several related policy changes:

- Rates for services with the same or substantially similar scope and qualification requirements should be standardized across waivers.
- Rates for physical therapists, occupational therapists, and speech language pathologists should be standardized, as should rates for physical therapy assistants and certified occupational therapy assistants.
- Substitute care should be unbundled from the Family Living rate and be authorized and billed separately.
- A payment floor should be established to ensure contracted Family Living homes receive no less than 55 percent of the Family Living payment rate paid to the Family Living provider agency.
- Caseload maximums for case managers and Mi Via consultants should be reduced from the current 50 case maximum to no more than 35 cases to align the level of support received by participants with the rates paid to their providers.

In addition to the proposed rate models, the rate study offers several considerations related to implementation and future considerations:

- **Mi Via Waiver Individual Budget Allotments (IBAs).** Increases to payment rates for Mi Via Waiver services should be accompanied by increases to IBAs to ensure participants can continue to access the same level of support.
- **Annual Rate Adjustments.** In the years between rate studies, the state should consider updating rate model assumptions based on the most currently available data to ensure payments continue to reflect the cost of service delivery.
- **Value-Based Payments.** DDSD can also consider strategic quality initiatives, such as implementation of the federal Centers for Medicare and Medicaid Services (CMS) HCBS quality measure set, while future rate studies can further align rate structures with value-based payment options that align service outcomes with policy goals.
- **Federal Access Rule.** CMS' 2024 Ensuring Access to Medicaid Services rule will require providers of certain services to spend at least 80 percent of their Medicaid payments on direct care worker expenses. Because sub-regulatory guidance around key factors has yet to be issued, the proposed rate models do not specifically account for this requirement, but can be updated as appropriate once additional information is available.

This report summarizes the results of the rate study, which was a comprehensive and stakeholder-informed effort that ensured proposed rates are aligned with service requirements and current market conditions. Individual sections within the report provide details about the rate study background, process, methodology, and recommendations.

Section 1: Introduction and Rate Study Background

The New Mexico Health Care Authority’s Developmental Disabilities Supports Division (DDSD) administers three Medicaid Section 1915(c) home and community-based services (HCBS) waivers for individuals with intellectual and developmental disabilities (I/DD):¹

- The **Developmental Disabilities (DD) Waiver** offers a comprehensive array of agency-based services, including paid 24-hour services in group homes (Supported Living and Intensive Medical Living) and up to 24-hour supports in peoples’ homes or in surrogate homes (Family Living).
- The **Mi Via Waiver** allows participants to self-direct services and supports through an approved budget and plan.
- The **Medically Fragile Waiver (MF) Waiver** supports individuals who have both a medically fragile condition and a developmental disability (or delay) or are determined to be at risk of having a developmental delay, to live safely in their homes.

According to a recent New Mexico legislative report, the state “has one of the most comprehensive and wide-reaching service arrays to support waiver participants” including the highest usage of therapy services (occupational therapy, physical therapy, and speech language pathology) across all other state waiver programs.²

Due to high proportions of individuals in the DD Waiver receiving full-time residential services and the substantial use of high-cost clinical services (nursing and behavioral support consultation in addition to therapies), New Mexico’s has one of the highest per-person costs in the country. The most recent reporting from the State of the States in Intellectual and Developmental Disabilities (published 2025 for data gathered through 2023) found that New Mexico’s waiver spending per person is 98 percent higher than the national average.³

Figure 1 presents total waiver enrollment (as of June of each year) and spending between state fiscal years 2022 and 2024.

¹ The Supports Waiver was terminated in 2025 and individuals transitioned to other support programs (including other DDSD waivers).

² New Mexico Legislative Finance Committee. (November 2024). Progress Report – Developmental Disabilities and Mi Via Waivers. Retrieved from <https://www.nmlegis.gov/handouts/ALFC%20111824%20Item%203%20DD%20and%20Mi%20Via%20Progress%20Report.pdf>.

³ Kansas University. (2025). State of the States in Intellectual and Developmental Disabilities (2025). Retrieved from <https://stateofthestates.ku.edu/state-profiles>.

Figure 1: Waiver Enrollment and Spending (in millions), Fiscal Years 2022-2024*

Waiver	Measure	FY 2022	FY 2023	FY 2024	Change (2022 – 2024)
DD Waiver	Unique Participants (June)	3,286	3,985	4,343	32%
	Total Annual Spending	\$376.6	\$441.0	\$484.4	29%
Mi Via Waiver	Unique Participants (June)	2,334	2,923	3,211	38%
	Total Annual Spending	\$140.5	\$171.8	\$218.2	55%
Medically Fragile Waiver	Unique Participants (June)	179	163	172	(4%)
	Total Annual Spending	\$3.7	\$3.5	\$3.1	(15%)
Total	Unique Participants (June)	5,852	7,060	7,744	32%
	Total Annual Spending	\$521.2	\$616.4	\$705.8	35%

*Spending totals based on HMA-Burns’ analysis of claims data with service dates within each fiscal year.

As the table illustrates, overall spending increased 35 percent between fiscal years 2022 and 2024, driven primarily by a combination of enrollment growth and rate increases. The substantial increase in enrollment reflects New Mexico’s efforts to eliminate a 13-year waitlist, which it had accomplished for the DD Waiver and Mi Via Waiver by the end of fiscal year 2024.⁴

Waiver services are delivered through a network of private providers and vendors, including agencies, independent contractors, and employees of participants who self-direct services. According to a recent legislative report, the elimination of the waitlist has had positive impacts, but has also strained provider capacity.⁵ Adequate payment rates are a key element in supporting a strong provider network that can respond to the needs of the expanded service population. To ensure rate sufficiency and consistent with federal requirements that states undertake regular reviews of provider payments, DDS has engaged in more regular rate studies in recent years, including studies in 2019 and 2023. In fiscal year 2025, recommendations from the 2023 study were implemented (except that no recommended reductions were adopted) and an additional 5.32 percent cost of living increase was granted, resulting in average rate increases of 16.5 percent.⁶

Additionally, in 2023 the Legislature passed House Bill 395, amending 28-16A-16 NMSA to require DDS to conduct an independent biennial cost study, contingent on available funding. DDS contracted with the Burns & Associates division of Health Management Associates’ (HMA-Burns) for the current rate study. HMA-Burns led a rate study for DD Waiver services in 2011–2012.

⁴ New Mexico Health Care Authority Developmental Disabilities Supports Division. (June 27, 2025). DDS Update. Retrieved from <https://www.nmlegis.gov/handouts/LHHS%20062525%20Item%2012%20DDS>.pdf.

⁵ Ibid.

⁶ New Mexico Health Care Authority Developmental Disabilities Supports Division. (June 27, 2025). DDS Update. Retrieved from <https://www.nmlegis.gov/handouts/LHHS%20062525%20Item%2012%20DDS>.pdf.

This rate study considered most services covered by the DD Waiver, Mi Via Waiver, and MF Waiver as listed in Figure 2.⁷

Figure 2: Services Included in the Rate Study by Waiver

Service	DD Waiver	Mi Via	MF Waiver
<i>Case Management and Related</i>			
Case Management/ Consultant On-Going	✓	✓	✓
Pre-Eligibility Code	✓	✓	
Personal Plan Facilitation		✓	
Case Management Pre-Assessment			✓
Case Management Assessment			✓
<i>Residential Services</i>			
Supported Living	✓		
Intensive Medical Living Services	✓		
Family Living	✓		
<i>In-Home Supports</i>			
In-Home Living Supports		✓	
Customized In-Home Supports	✓		
Homemaker/Direct Support		✓	
Home Health Aide		✓	✓
<i>Respite</i>			
Respite (Individual/ Group)	✓		
Respite (Standard, LPN, RN)		✓	
Respite (Home Health Aide, LPN, RN)			✓
Respite - Facility			✓
<i>Day Programs/ Community Access</i>			
Customized Community Support (Individual and Group)	✓		
Customized Community Supports, Group		✓	
Community Direct Support		✓	
<i>Employment Supports</i>			
Community Integrated Employment (Job Development, Maintenance, Coaching, Self-Employment, Intensive)	✓		
Job Developer		✓	
Employment Supports (including Job Coach)		✓	
<i>Transportation</i>			
Non-Medical Transportation (per mile/ per pass/ ticket)	✓	✓	

⁷ The rate study did not consider Jackson Class rates. Transportation Trip, and Emergency Response, Testing and Maintenance on the Mi Via Waiver were excluded from the study and will continue to be negotiated. Community Inclusion Aide, Community Integrated Employment, Job Aide, and Customized Community Support, Individual Intensive were excluded from the rate study under the DD Waiver.

Figure 2: Services Included in the Rate Study by Waiver

Service	DD Waiver	Mi Via	MF Waiver
Transportation (per mile; time)		✓	
Therapies			
Therapy Services (Physical, Occupational, Speech Language)	✓	✓	✓
Therapy Assistant Services	✓		✓
Behaviorally-Focused Supports			
Behavioral Support Consultation	✓	✓	✓
Crisis Support (individual's residence and alternative residential setting)	✓		
Preliminary Risk Screening	✓		
Socialization and Sexuality Education	✓		
Professional Nursing and Nutrition			
Adult/ Private Duty Nursing (LPN/ RN)	✓	✓	✓
Nutritional counseling	✓	✓	✓
Specialized Therapies			
Massage Therapy		✓	✓
Acupuncture		✓	
Biofeedback		✓	
Chiropractic		✓	
Cognitive Rehab Therapy		✓	
Hippotherapy		✓	
Naprapathy		✓	
Play Therapy		✓	
Music Therapy			✓
Cost-Based Services			
Environmental Modifications	✓	✓	✓
Independent Living Transition	✓		
Assistive Technology	✓		
Remote Personal Support Technology	✓		
Fiscal Management of Adult Education Opportunities	✓		
Individual Directed Goods and Services		✓	✓
Specialized Medical Equipment			✓
SME and ID& G Fiscal Agent			✓
Vehicle Modifications			✓

The rate study was conducted between May 2025 and January 2026 and incorporated six key deliverables as shown in Figure 3.

Figure 3: Project Deliverables and Completion Timeline

Activity	Completion Timeline
Deliverable 1: Research/ work plan development/ project kickoffs	May – August 2025
Deliverable 2: Provider survey and time study	July – October 2025
Deliverable 3: Research and analysis	July – October 2025
Deliverable 4: Develop draft rate models	July – November 2025
Deliverable 5: Collect and respond to public comments	December 2025
Deliverable 6: Finalize rate models and issue summary report	December 2025 – January 2026

The remainder of this report is organized into the following sections:

- **Section 2: Rate Study Process** provides an overview of the key rate study objectives and a more detailed overview of each rate study deliverable.
- **Section 3: Rate Model Development** describes the major factors included within the proposed rate models, their data sources, and calculations, including wages, benefits, and productivity assumptions for direct care workers, and program support and administrative expenses to fund overhead expenses.
- **Section 4: Recommended Rates and Associated Changes** details the final recommendation for each service included in the rate study and describes any additional policy-related considerations for implementation.
- **Section 5: Additional Considerations** includes other policy considerations and rate-related recommendations, including a description of the estimated fiscal impact of the recommended rates.

The report also includes several attachments:

- Attachment 1 - Final Proposed Rate Models
- Attachment 2 - Public Comments and Responses
- Attachment 3 - Case Management and Consultant Services Provider Survey and Instructions
- Attachment 4 – Other HCBS Provider Survey and Instructions
- Attachment 5 - Provider Survey Analysis – Case Management and Consultant Services
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- Attachment 7 - Time Study Instrument – Case Management and Consultant Services
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Section 2: Rate Study Process

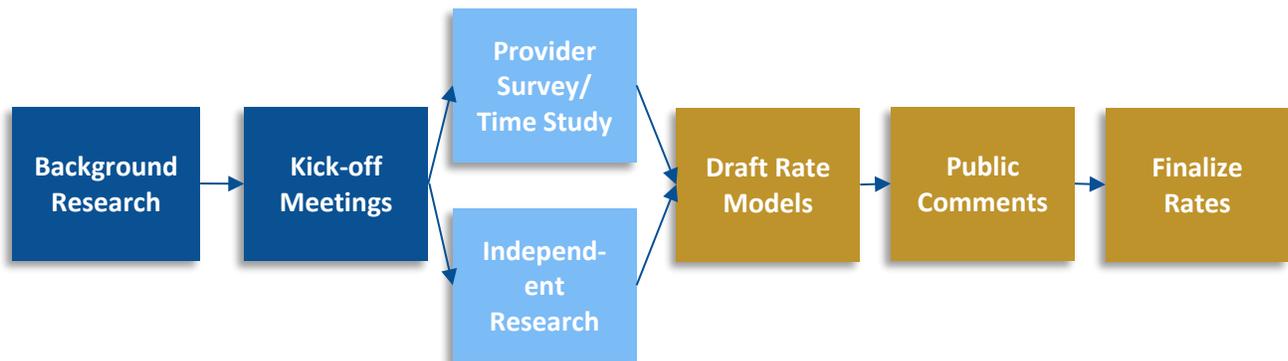
Drawing on its extensive experience leading rate studies for home and community-based services, HMA-Burns has developed and continues to evolve a standard approach to these projects. In particular, HMA-Burns employs an ‘independent rate-setting’ approach meaning that, rather than depending on any single source of information, HMA-Burns draws on data and insights from a variety of sources. This approach recognizes two important features of HCBS programs, particularly for individuals with I/DD.

First, whereas most medical services follow the same guidelines in every state, most HCBS lack a typical standard of care. Thus, although state HCBS programs generally include similar services, the requirements of these services can vary significantly across different states. For example, every state provides coverage for day habilitation programs (called Customized Community Supports-Group in New Mexico; other states use a variety of titles such as day program, day treatment, adult day health, or community access), but each state establishes its own standards in terms of staffing ratios, community engagement, transportation allowances, ancillary support requirements (such as the availability of nursing supports), and other programmatic expectations. Setting rates for these services therefore requires consideration of state-specific requirements.

Second, the large majority of payments for HCBS come from a single source: the state I/DD department. In contrast, providers of medical services may receive payments from a variety of sources in addition to state Medicaid programs, including Medicare, commercial insurance, and self-pay. Due to the substantial reliance on a single payer, HCBS providers’ costs are often a function of the rates paid by the state I/DD department. Thus, if payment rates are too low, costs will be artificially depressed. Conversely, if rates are too high, services may not be delivered in an efficient manner. The use of external data sources to supplement provider cost data aims to ensure that payment rates reflect actual market costs.

HMA-Burns’ independent rate-setting process encompasses three phases with seven discrete tasks as illustrated by Figure 4.

Figure 4: HMA-Burns’ Independent Rate-Setting Process



Phase 1: Background Research and Kick-Off Meetings

As noted above, state programs for individuals with I/DD typically cover similar arrays of services – particularly those services that constitute the majority of spending, including residential, in-home, and day programs – but service requirements, billing rules, and limits can vary significantly across states. HMA-Burns’ HCBS rate-setting process therefore always begins with a review and documentation of the current service environment.

HMA-Burns began this study by reviewing materials governing the operation of the program, including:

- The approved waiver applications for the DD Waiver, Mi Via Waiver, and MF Waiver
- State regulations governing service delivery
- DDSD’s service standards for each waiver
- Previous rate study reports
- Recent legislative reports

To supplement insights gained from the review of program materials, HMA-Burns held several initial meetings with DDSD. In addition, DDSD facilitated the establishment of a rate study subcommittee from members of the Advisory Council on Quality Supports for Individuals with Developmental Disabilities and Their Families (ACQ) to hear directly from providers, self-advocates, and other system representatives at key points during the rate study. Kick-off meetings with DDSD and the ACQ rate study subcommittee covered a project overview, the planned rate methodology, and discussion of current system strengths and challenges.

Based on DDSD’s scope of work for this project and further refinement during these initial meetings, several rate study objectives were established:

- **Fairly account for providers’ costs.** Consistent with the requirements of 28-16A-16 NMSA (House Bill 395), provider payment rates aim to reflect the direct and indirect costs providers incur to deliver services consistent with the state’s requirements and individuals’ service plans.
- **Comply with applicable payment requirements.** Federal Medicaid funds pay for the majority of service costs so payment rates must comply with federal law that states that payment rates must be “consistent with efficiency, economy, and quality of care”.⁸
- **Development of clear and transparent rate models that allow for regular updates.** Payment rates should be designed to permit regular consideration of whether they continue to reflect providers’ costs. The rate models detail all data sources, assumptions, and calculations used to derive the total rates. As costs change (for example, as data sources are updated), the impact on – and reasonableness of – the total rate can be evaluated.
- **Support programmatic goals.** Rates should further the program’s goals such as supporting individuals’ independence and aligning rates for similar services across waivers.

⁸ 42 U.S.C. §1396a(a)(30).

- **Ensure broad engagement with providers and other interested stakeholders.** The rate study included multiple opportunities for engagement, including input at key stages from the ACQ rate study subcommittee, the administration of a provider survey and time study, and a public comment period providing an opportunity for any interested parties to offer feedback on rate study recommendations before they are finalized.
- **Provide flexibility.** Rates should be consistent with flexible service delivery.
- **Reduce administrative burden.** When practical, rates should minimize administrative requirements while maintaining accountability.

These objectives can, at times, be in conflict, requiring a balancing of considerations. For example, a single bundled payment would be administratively simple, but would not reflect differences in provider costs (such as more intensive supports for individuals with more significant needs) or comply with federal requirements that discourage bundled payments. Observations from this initial system review informed both the data collection efforts and the development of rate models and related recommendations described below.

Phase 2: Data Collection

In the second phase of the project, HMA-Burns collected and analyzed data to inform rate model development. Key tasks included a provider cost survey, a direct care worker time study, and research and analysis of independent data sources.

Provider Survey

HMA-Burns developed a provider survey to collect data directly from service providers related to topics including:

- Wage and benefit costs for direct care, program support, and administrative staff
- Non-staff expenses, such as costs associated with facilities, vehicles, office equipment and supplies, insurance, professional services
- Caseloads as well as staffing levels and ratios in shared services
- Lengths of service encounters
- Mileage driven per week by direct care staff

Drafts of the Microsoft Excel-based survey were shared and reviewed with the ACQ rate study subcommittee. The HMA-Burns team made a number of changes based upon feedback obtained and finalized the survey instruments.

HMA-Burns emailed the finalized survey to service providers on August 28, 2025. Providers were asked to complete the survey by September 30, 2025, but all submissions after that date were accepted and incorporated in the survey analysis. All providers with claims in fiscal year 2024 (the most recently completed fiscal year at the time of data collection) were invited to participate.

To assist with completion of the survey, guidance was embedded into the survey instrument itself, instructions were written to provide background and definitions, webinars walking through each survey in detail were recorded and posted online, and a dedicated contact for questions was assigned.

Overall, 80 percent of providers representing 88 percent of the claims in fiscal year 2024 submitted a survey. All submitted surveys were reviewed by HMA-Burns. HMA-Burns reached out to providers by email and phone to clarify survey responses as needed.

To ensure robust and representative benchmarks, HMA-Burns includes multiple statistical measures when analyzing and reporting provider survey data. For most survey questions, the survey analysis reports unweighted averages, median values, and weighted averages. Weighted averages assign greater influence to providers based on size or service volume, while medians help mitigate the impact of extreme values. Additionally, averages are reported with and without statistical outliers, defined as responses that are more than two standard deviations above or below the mean value. Removing outliers helps prevent skewed results caused by data entry errors or other data anomalies. For example, if a provider mistakenly reports a direct care wage as \$240 per hour instead of \$24, the unadjusted average would be skewed by a likely reporting error while the average without outlier calculation will exclude the erroneous value.

The survey instructions, instruments, and analyses are included as Attachments 3, 4, 5, and 6.

Time Study

HMA-Burns developed time study instruments to measure time use by direct care workers, including case managers, consultants, DSPs, licensed professionals, and other service providers. Workers were asked to complete daily timekeeping over a 14-day period whether they worked on a given day or not. For each 15-minute period, workers were asked to report the activity in which they were engaged, such as:

- Providing direct care (according to the applicable service standards)
- Traveling
- Participating in individual planning meetings
- Participating in individual assessments
- Program preparation (set-up or clean-up)
- Recordkeeping/ reporting writing
- Time 'lost' due to missed appointments
- Engaging in employer-related activities (for example, attending staff meetings)

A total of 338 case management/ consultant time studies were submitted and 330 (98 percent) were incorporated into the time study analysis. A total of 2,686 time studies were submitted for the other HCBS time study, and of these, 2,352 (88 percent) were included in the time study analysis. Time studies were excluded for the following reasons:

- Did not report any direct service time during the 14-day period (suggesting they were not a direct care worker)

- Reported a job title that would not be expected to primarily provide direct care (such as ‘administrative assistants’)
- Did not provide information needed to categorize within time study analysis

In addition to requesting daily time tracking, the time studies requested that workers report their daily mileage and address locations for each 15-minute increment reported for distance analysis. Professional and licensed workers working as contractors were also asked to report their annual expenses.

The time study instrument and analysis for case managers and consultants are included as Attachments 7 and 9, respectively. The time study instrument and analysis for all other HCBS are included as Attachments 8 and 10, respectively.

Analysis of Other Independent Data Sources

HMA-Burns identified data from independent sources to supplement information gathered through the provider survey. By using data that is not limited to the I/DD system, the proposed rates aim to reflect reasonable, market-based costs. For these independent sources, HMA-Burns gathered information that was current, credible, and directly applicable to the rate study. When possible, data sources specific to New Mexico were utilized. Data sources include:

- New Mexico-specific wage data from the Bureau of Labor Statistics and historical wage growth data in New Mexico from the Bureau of Economic Analysis
- New Mexico-specific data regarding employee health insurance coverage and costs from the federal Department of Health and Human Services’ Medical Expenditure Panel Survey
- The Internal Revenue Service’s mileage rate, which is used to estimate the non-staff cost of travel
- Private market rates for select services, particularly specialized therapies on the Mi Via and MF Waivers
- Payment rates and policies in other states’ waivers to provide benchmarks for New Mexico’s programs and to form recommendations for changes to limits for cost-based services (such as environmental modifications)

Section 4 includes additional discussion of the use of independent data sources in the development of rate models.

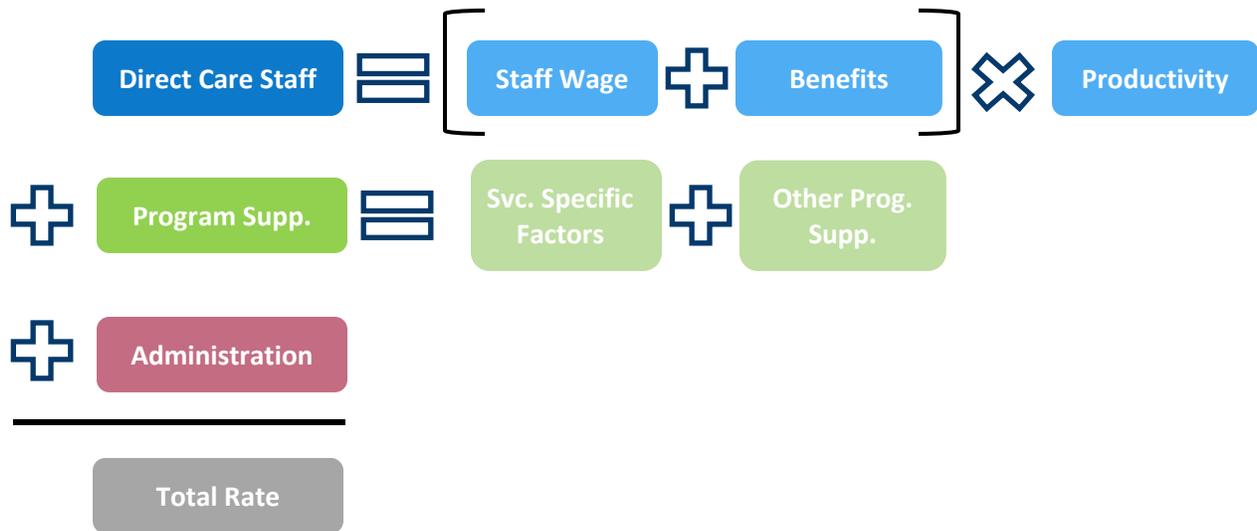
Phase 3: Rate Model Development and Public Comments

The third and final phase of the rate-setting process involved the development of recommended changes to payments methodologies, rates, and policies. HMA-Burns provided an opportunity for public comment on draft recommendations before making final recommendations.

Draft Rate Models and Associated Recommendations

To support transparency in the development of provider payment rates, HMA-Burns created detailed rate models that include the assumptions related to individual cost drivers used to establish the overall rates. Figure 5 presents a pictorial representation of the rate models.

Figure 5: Rate Model Structure



As depicted in the graphic, the major cost drivers fall into three categories:

- Wage and benefits costs for the direct care worker providing the service, including adjustments for productivity, which accounts for their non-billable responsibilities.
- Program support expenses, which include non-staff costs associated with service provision such as miles driven by direct care staff and the cost of the physical space in which services are delivered, as well as other program infrastructure (such as costs related to supervision, internal service coordination, program design, and quality assurance).
- Administration expenses, including executive leadership, finance, and information technology personnel, administrative facility expenses, general liability insurance, and similar expenses.

To ensure provider flexibility in managing their operations, providers are not expected to align their costs with rate model assumptions. For any given provider, it is expected that some costs will be lower than assumed and other costs will be higher. Instead, the rate model assumptions aim to reflect the reasonable total costs of delivering services. For example, the rate model for each service includes a wage assumption for the direct care staff that delivers that service, but providers do not have to pay each worker that wage. That is, a provider may choose to pay newer staff less than experienced staff, to offer more generous benefits but pay lower wages, or to otherwise manage their finances in a way that differs from rate model assumptions.

The development of rate models draws on findings from the first phase of the project where preliminary decisions are made related to the structure of rate models (such as the basis of billing and any key policy changes), key cost drivers to be included in the model, and whether multiple rates are needed for a given service to account for differences based on staff qualifications or other factors. The rate model structures are then populated based on data collected during the second phase of the project.

Section 3 provides an overview of the process for establishing cost assumptions within the rate models. Alternative methodologies were used for some services where rate models were not developed. These are also described in Section 4, but broadly fall under the following categories:

- **Rate recommendations based on private market rates.** HMA-Burns researched private market rates in New Mexico for specialized therapies available on the Mi Via Waiver and MF Waiver and developed recommendations based on the typical costs of these therapies.
- **Benchmarking for cost-based services.** Several current waiver services are reimbursed based on the cost of an item. These services also have a billing maximum over a specified period of time. For example, the current limits for environmental modifications include a \$5,000 cap over a five-year period while Specialized Medical Equipment is capped at \$1,200 per year. HMA-Burns researched policies and limits for similar services in other states' waiver programs to evaluate the reasonableness of New Mexico's policies.

Public comment process. After developing initial recommendations, HMA-Burns sought feedback from interested stakeholders. This public comment process is specific to the rate study and does not replace other opportunities for comment, such as state rulemaking, federal requirements for comment when amending Medicaid waiver programs, and legislative deliberations.

Draft rate models were released and posted online on December 5, 2025. Stakeholders were asked to submit their comments by December 19, 2025, although all comments submitted after that date were accepted. Comments were received from 40 providers, two parents, and one advocacy organization.

Several changes to the draft recommendations were made in response to public comments, including:

- Increasing the assumed wage for behavioral support consultants.
- Withdrawal of the proposal to establish different telehealth rates for professional services.
- Withdrawal of the proposal to combine standard and incentive rates for professional services and development of separate rate models for standard and incentive areas.
- Withdrawal of the proposed change to the methodology for allocating billable days when an individual changes their Supported Living or Family Living provider during their plan year; the existing approach will continue to be used.

Responses to all public comments are included as Attachment 2.

Final recommendations. Following the public comment period, HMA-Burns updated the proposed rate models to reflect changes made. Section 4 reports the final service-specific recommendations resulting from the rate study.

Section 3: Rate Model Development

As discussed in Section 2, HMA-Burns developed rate models for most services included in the rate study. These rate models include specific assumptions regarding individual cost drivers that combine to establish an overall rate for a unit of service. In general, there are five standard factors in each rate model:

- Wage paid to the direct care worker
- Benefits package for the direct care worker
- Productivity of the direct care worker
- Program support expenses
- Administrative expenses

Each of these major cost drivers are discussed below. Based on the specific service, a rate model may include additional factors such as:

- Vehicle-related expenses for services for which the direct care worker travels to the participant or transports the participant.
- Staffing ratios and attendance factors for shared services.
- Bundled clinical supports such as nursing and nutrition supports in Supported Living programs.
- Facility-related expenses for center-based or office-based services.

Assumptions are informed by information gathered through the provider survey, time study, and research of independent published data sources.

The resultant rates were compared to fee schedules in other programs, including programs providing services to individuals with I/DD and medically-fragile conditions in other states. These comparisons did not guide the establishment of rates because every program is unique in terms of service requirements, historic practices and rate methodologies, economic characteristics of the state, and provider networks. Instead, these comparisons offered benchmarks to ensure the reasonableness of the proposed rates.

Direct Care Worker Wages

Payroll and benefits costs for direct care workers represent the single largest category of expenses for HCBS providers, often accounting for between 65 and 80 percent of total costs. As a result, spending in these areas tends to be subject to the greatest constraints when payment rates do not reflect market costs. Thus, although current wage and benefit levels are informative, HMA-Burns primarily relied on independent, published sources of market wage data for comparable positions to ensure cost assumptions reflect current economic realities.

The proposed rate models assume that direct care workers are employees rather than a combination of employees and contractors as assumed in most of the current rates. Further, the rate models assume direct care workers have full-time hours, are paid for all hours worked, and have access to comprehensive benefits. As with all rate model assumptions, the assumption of an employed workforce does not dictate

provider operations and agencies may still choose to contract with workers, consistent with state and federal law.

The methodology for establishing wage assumptions for direct care staff included:

- Use of New Mexico-specific wage data from the United States Department of Labor’s Bureau of Labor Statistics (BLS) and identification of the most representative occupation or occupations for each individual service.
- Application of an inflationary adjustment to the BLS wage data so that values represent the period when rates could be effective.
- Identification of any scheduled minimum wage increases that may impact relatively lower-wage occupations, including DSPs.

The BLS publishes wage data for more than 800 standard occupational classifications and notes this is the “only comprehensive source of regularly produced occupational employment and wage rate information for the U.S. economy, as well as States, the District of Columbia, Guam, Puerto Rico, the U.S. Virgin Islands, and all metropolitan and nonmetropolitan areas in each State.”⁹ This statement highlights several of the features of the BLS data that makes it particularly useful for setting wage assumptions, including:

- **It is comprehensive.** BLS wage data is representative of 1.2 million establishments and about 57 percent of the employment in the United States.
- **It is regularly produced.** BLS wage data is published on an annual basis, allowing rate model assumptions to be regularly reviewed and updated.
- **It is cross-industry.** BLS wage data is not limited to a single industry so estimates for a given occupation are representative of the overall labor market for that occupation; this is particularly important when considering wage levels for underfunded programs.
- **It is state- (and local-) specific.** BLS wage data is reported for individual states and sub-state areas so that assumptions are tailored to the state in which rates are being developed.

Although the BLS wage data is published annually, it is always backwards-looking. The BLS releases data in March or April of each year, with the dataset representing May of the previous year. Thus, the proposed rate models use the May 2024 dataset published in April 2025.

Data from the United States Department of Commerce’s Bureau of Economic Analysis (BEA) was used to estimate wage inflation since May 2024. According to the BEA, as of December 2025, the compound annual growth rate for net earnings in New Mexico was 4.5 percent between 2014 and 2024.¹⁰ HMA-Burns therefore increased the BLS wage estimates by 12.45 percent to cover the 32 months from May 2024 to January 2027, the midpoint of the first full fiscal year in which the rates could potentially be implemented.

⁹ United States Bureau of Labor Statistics. (n.d.). Frequently Asked Questions. Retrieved from https://www.bls.gov/oes/oes_ques.htm.

¹⁰ United States Bureau of Economic Analysis. (As of December 2025). Compound annual growth rate for net earnings in New Mexico for 2014 – 2024. Retrieved from <https://apps.bea.gov/regional/bearfacts/>.

An additional adjustment was made to BLS wage data to ensure no resultant wage (after the inflationary adjustment) would be lower than the highest minimum wage in the state in January 2027, which will be \$17.50 per hour in Santa Fe.¹¹

With the multitude of occupations for which the BLS provides wage data, appropriate benchmarks must be selected for each service. At times, there is a precise match. For example, when setting rates for nursing services, there are specific occupational classifications for registered nurses and for licensed practical nurses. For other services, however, there may not be an exact match. For example, although DSPs are included in the BLS survey and a review of the national industry-level estimates makes clear that they are classified as home health and personal care aides (BLS' standard occupational classification [SOC] 31-1120), they have been combined with similar workers in other industries.¹² The BLS provides the following description for home health and personal care aides:

This occupation includes the 2018 SOC occupations 31-1120 Home Health Aides [Monitor the health status of an individual with disabilities or illness, and address their health-related needs, such as changing bandages, dressing wounds, or administering medication. Work is performed under the direction of offsite or intermittent onsite licensed nursing staff. Provide assistance with routine healthcare tasks or activities of daily living, such as feeding, bathing, toileting, or ambulation. May also help with tasks such as preparing meals, doing light housekeeping, and doing laundry depending on the patient's abilities.] and 31-1122 Personal Care Aides [Provide personalized assistance to individuals with disabilities or illness who require help with personal care and activities of daily living support (e.g., feeding, bathing, dressing, grooming, toileting, and ambulation). May also provide help with tasks such as preparing meals, doing light housekeeping, and doing laundry. Work is performed in various settings depending on the needs of the care recipient and may include locations such as their home, place of work, out in the community, or at a daytime nonresidential facility].¹³

This description, especially the personal care aide portion, describes aspects of the work that DSPs perform, but it arguably does not fully represent the responsibilities of DSPs who work with individuals with I/DD and who are expected to provide training and support to increase individuals' independence and to manage often challenging behaviors and medical needs. The proposed rate models therefore rely on a composite of multiple BLS occupations to construct the wage assumption for DSPs. As Figure 6 shows, the rate models use four BLS occupations to represent a DSP. The largest weighting – 55 percent – is applied to the home health and personal care aide classification, which is the occupation to which DSPs are currently assigned. The remaining 45 percent is evenly distributed across three other occupations that are representative of the work performed by DSPs based on a review of BLS occupational descriptions and service requirements.

¹¹ City of Santa Fe, New Mexico. (November 2025). City of Santa Fe Living Wage Proposal. Retrieved from <https://santafenm.gov/economic-development/living-wage-in-the-city-of-santa-fe>.

¹² United States Bureau of Labor Statistics. May 2024 OEWS Research Estimates by State and Industry (Sector 62: Health Care and Social Assistance). https://www.bls.gov/oes/oes_research_2024.htm.

¹³ United States Bureau of Labor Statistics. (November 2017). 2018 SOC Definitions. Retrieved from https://www.bls.gov/soc/2018/soc_2018_definitions.pdf/.

Figure 6: Rate Model Wage Assumption for DSPs

BLS Standard Occupational Classification	Weighting	Median Wage (Unadjusted)	Median Wage (Adjusted)
31-1120 Home Health and Personal Care Aide	55%	\$13.17	\$17.50
21-1093 Social and Human Service Assistant	15%	\$21.62	\$24.31
29-2053 Psychiatric Technicians	15%	\$17.93	\$20.16
39-9032 Recreation Worker	15%	\$15.15	\$17.50
Weighted Average		\$15.45	\$18.92

As the table demonstrates, this weighting produces an assumed DSP wage of \$18.92 per hour, including the adjustments previously described.¹⁴

The development of wage assumptions for services provided by staff other than DSPs, such as nurses and therapists, followed the same BLS-based approach described above. The BLS wage data before and after wage growth adjustments as well as the job mix assumptions are included in Appendix A of the rate model packet (Attachment 1).

Figure 7 compares the wage assumptions from the existing rate models to the final proposed rate models and reports the wages reported in the provider survey. As the table demonstrates, the proposed final rate models for nearly every service include wages that exceed the wage assumptions in the existing rate models as well as provider survey results.

Figure 7: Rate Model Hourly Wage Assumptions

Service or Position	2023 Rate Models	2025 Provider Survey****	Final Proposed Rate Models
DD Waiver Case Manager	\$24.84	\$20.07	\$26.77
Consultant (Mi Via Waiver)	\$24.84	\$25.33	\$26.77
Medically Fragile Case Manager	\$41.68	*	\$47.71
Direct Support Professional	\$17.11	\$16.86	\$18.92
Family Living Recruiter / Trainer / Supervisor	n/a	-	\$26.77
Crisis Support – Alternative Residence	n/a	-	\$20.16
Crisis Support – Individual Residence Primary	n/a	-	\$20.16
Job Developer	\$20.65	-	\$29.46
Job Coach	\$20.65	-	\$25.20
Registered Nurse	\$39.72	\$43.59	\$47.71

¹⁴ 28-16A-16 NMSA (House Bill 395) requires the rate study to consider the impact of setting the DSP wage assumption at 150 percent of the state minimum wage. As of January 2026, the New Mexico state minimum wage was \$12.00 per hour, meaning the DSP wage assumed in the final proposed rate models exceeds the 150 percent benchmark of \$18.00 per hour.

Service or Position	2023 Rate Models	2025 Provider Survey****	Final Proposed Rate Models
Licensed Practical Nurse	\$26.38	\$31.16	\$32.85
Behavioral Support Consultant	\$41.43	\$50.79	\$39.93
Physical Therapist**	\$53.53	\$109.59	\$56.72
Physical Therapist Assistant***	\$28.71	*	\$37.76
Occupational Therapist**	\$45.06	\$108.63	\$56.72
Occupational Therapist Assistant***	\$31.28	\$87.03	\$37.76
Speech Language Therapist**	\$48.25	\$105.81	\$56.72
Dietician	n/a	-	\$36.42
Home Health Aide	\$14.03	\$13.15	\$20.02
Risk Screening	n/a	-	\$39.93
Socialization and Sexuality Education Instructor	\$29.67	-	\$36.66

*Results are masked to ensure confidentiality (with a single provider response).

**PT/OT/SLP wage based on the highest median wage among the three classifications (SLP being highest). Therapy providers reported wages that would suggest full-time therapists earn more than \$220,000 annually. However, based on public comments, therapy providers may have reported wages that incorporate adjustments for productivity, as some therapy agencies reported paying therapists only for billable hours (meaning they would not be paid for activities like travel time between visits).

***PTA/OTA wage based on the highest median wage among the two classifications (OTA being highest); provider survey results are masked due to only one response with a PTA classified as an employee.

****The provider survey defined 'wages' as inclusive of overtime pay, shift differentials, paid time off (holidays, vacation pay, etc.), and all other reportable income. Wages specifically excluded reimbursement for expenses (such as mileage, payroll taxes, or benefits) which were captured in other parts of the survey.

Direct Care Worker Benefits

In addition to market-based wages, the rate models include funding for mandatory payroll taxes and a comprehensive benefits package that includes health insurance, paid time off, and other benefits that are intended to support providers to attract and retain a qualified and stable workforce. The rate models assume all direct care workers receive the same benefits.

The rate models include the following standard employer-paid payroll taxes:

- Social Security – 6.20 percent of total wages¹⁵
- Medicare – 1.45 percent of total wages¹⁶

¹⁵ U.S. Department of the Treasury - Internal Revenue Service. (2022). Publication 15 (Circular E). Retrieved from <https://www.irs.gov/pub/irs-pdf/p15.pdf>. In 2026, this tax is limited to the first \$184,500 in wages.

¹⁶ Ibid. There is no wage based limit for Medicare tax.

- Federal unemployment insurance – 0.60 percent on the first \$7,000 in wages paid¹⁷
- New Mexico state unemployment insurance – 1.0 percent on the first \$33,200 in wages paid¹⁸
- Workers’ Compensation – 2.64 percent of total wages¹⁹

The proposed rate models include assumptions related to the cost of providing health insurance to direct care workers. In particular, the models include assumptions related to take-up rates, distribution across plan types, and employer contributions to premium expenses derived from New Mexico specific data from the U.S. Department of Health and Human Services’ Medical Expenditure Panel Survey (MEPS).²⁰ The employer costs were increased by approximately 15 percent to account for cost increases since the MEPS publication. Figure 8 presents the assumed distribution across plan types and the assumed provider cost for each.

Figure 8: Rate Model Health Insurance Assumptions for Direct Care Workers		
Coverage Type	Participation Rate	Employer Cost
Employee Only	37.6%	\$650.00
Employee + One	10.3%	\$1,125.00
Family	16.4%	\$1,700.00
All Coverages	64.3%	

Overall, these assumptions translate to an assumed employer cost of \$639.08 per employee per month. This is the assumed average cost for all employees, including those who do not participate in their employer’s health insurance plan. In comparison, the average cost reported by provider survey respondents was \$176 per month for full-time employees and \$383 per month for case managers and Mi Via consultants.

The rate models assume that direct care workers receive 25 days of paid time off, inclusive of paid holidays, vacation, and sick leave. In comparison, respondents to the provider survey reported an average of 18 to 20 days of paid time off per year.

Lastly, the rate models include \$100 per direct care worker per month for all other benefits, such as dental or life insurance, a contribution to a retirement plan, tuition reimbursement, etc. In comparison, the provider survey found an average cost of about \$94 per full-time employee per month, but only \$19 per employee per month for part-time staff.

The benefits package for direct care workers is detailed in Appendix B of the rate model packet. In the rate models themselves, the benefits package is translated to a benefit rate expressed as a percentage of the direct care worker’s wage. Since certain benefit costs are assumed to be fixed (for example, the rate models provide the same \$639.08 per month for health insurance for all direct care workers), there is an

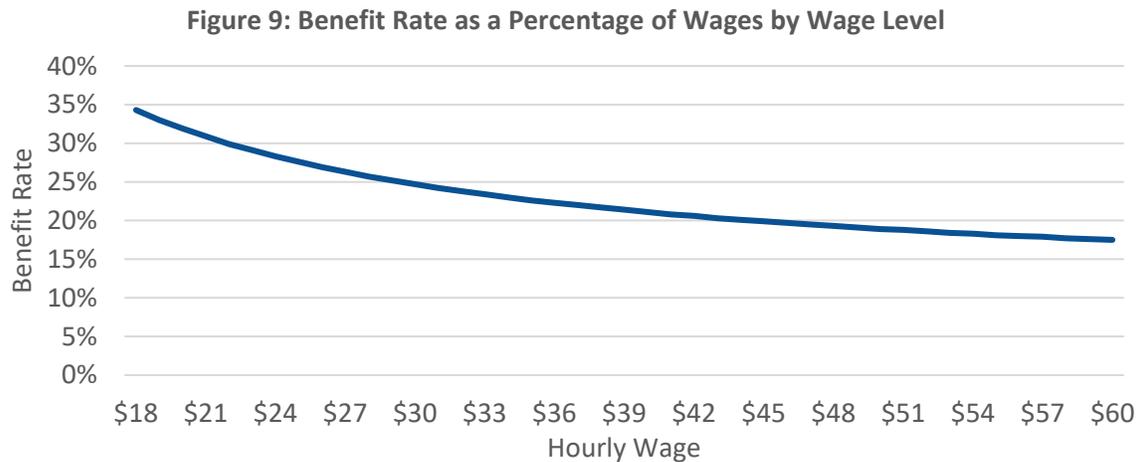
¹⁷ Ibid.

¹⁸ New Mexico Department of Workforce Solutions. (n.d.). Unemployment Insurance Tax Information (tax rate for new employers. Retrieved from <https://www.dws.state.nm.us/UI-Tax-Information>.

¹⁹ Based on Class Code 8835 (Home, Public, and Traveling Healthcare--All Employees) effective January 1, 2025 in New Mexico. Retrieved from <http://ncci.com>.

²⁰ United States Department of Health and Human Services Medical Expenditure Panel Survey. (2023). Retrieved from <https://datatools.ahrq.gov/meps-ic/#table-series>.

inverse relationship between the wage of the direct care worker and the benefit rate. That is, as the direct care wage increases, the benefit rate declines as illustrated in Figure 9.



For a DSP earning \$18.92 per hour, the benefits package translates to a 33.8 percent benefit rate. For an RN earning \$47.71 per hour, that same benefits package yields a 19.6 percent benefit rate. These rates exclude paid time off, which is recognized in the rate models as an adjustment to worker productivity as discussed in the next subsection.

Direct Care Worker Productivity

In general, direct care workers are not providing direct care all of the time due to other responsibilities that relate to service delivery or their employment. Employees are still working, however, and must be paid for this time. To ensure that providers recover these costs, the time associated with these activities must be distributed across workers’ billable hours.

For example, if an employee works 40 hours per week and earns \$25.00 per hour (wages, payroll taxes, and benefits), the cost of that employee to their employer is \$1,000.00 per week. However, if the employer is only able to bill for 32 hours of direct service per week because the other 8 hours are devoted to non-billable activities (like travel time or participating in training), the billable rate must be increased to cover the cost of those non-billable activities. The rate models achieve this by applying a ‘productivity factor’ that is calculated as the ratio of total work hours to billable hours. In this example, the productivity adjustment is calculated by dividing 40 hours by the 32 billable hours, yielding a productivity factor of 1.25. Applying the productivity factor to the \$25.00 cost per work hour produces \$31.25, which is the cost per billable hour that would be included in the rate model to fully compensate the employer for the \$1,000.00 weekly cost of the employee.

To account for non-billable activities, the rate model for each service first establishes a typical 40-hour workweek for a direct care worker. These workweeks incorporate activities that are likely to occur during any given week. These activities – and the time spent on each – vary from service to service and include:

- **Travel time between individuals** applies to services typically delivered in individuals’ homes and in the community, accounting for the time when staff travel from one service encounter to the next and cannot bill for the travel time.

- **Program set-up and clean-up** reflects staff time before and after program hours to prepare for and clean-up after service time. The models include 1.25 hours per week (15 minutes per day) for all direct care workers in these programs.
- **Program development** is included in the job development rate model to account for time that job developers spend developing their general network of providers rather than working on behalf of a specific individual. The model assumes 5.00 hours per for this purpose. Program development is also included in the Socialization and Sexuality Education rate model for 2.00 hours week.
- **Missed appointments** are included to reflect the time lost when a participant has an unscheduled absence. This adjustment is intended only to accommodate the time that is not redirected to some other activity. For example, if a two-hour encounter is scheduled in someone’s home and the worker drives to that home to find that individual is not there, it is assumed that the staff person will move on to another task. This may not be a billable activity, but could be catching up on training or recordkeeping. In other words, some portion of that two-hour appointment would be allocated to the missed appointment adjustment, but another portion would be associated with the activity to which their time was redirected.
- **Progress notes/ medical recordkeeping** is included for most services to accommodate documentation requirements. The time assumptions vary across services, but are generally higher for ‘professional’ services (including therapies and behavioral support consultants) that usually have more extensive reporting requirements and for group services since a worker will have to complete documentation for each service participant. This productivity assumption does not cover documentation time that occurs during the course of service delivery, which is a billable activity.
- **Supervision and other employer time** reflects workers’ employment-related activities such as attending staff meetings. Most services include 45 minutes per week for these activities.
- **Collateral contacts** is time associated with making contacts on behalf of an individual, though the individual may not be present. For example, time spent discussing medical histories with a participant’s doctor or behavioral health provider is considered a collateral contact. 1.25 hours per week (15 minutes per day) is included for therapists and behavioral support consultants, and 30 minutes per week are included for nursing services performed by RNs and LPNs.

The typical workweeks are then adjusted for training and paid time off, activities that are likely to be concentrated during specific weeks rather than occurring during a typical week. As described above, the benefits package for direct care workers assumes they receive 25 days of paid time off, which translates to 3.85 hours per week (25 days multiplied by 8 hours, divided by 52 weeks). Paid time off is included in all rate models.

Rate models for most services assume that staff receive 50 hours of training annually, while the Crisis Support, Socialization and Sexuality Education, and Preliminary Risk Screening rate models include 60 hours.

Productivity assumptions were informed by data collected through the provider survey and time study, as well as discussions with DDSD program staff regarding the amount of time that would be needed to

perform the non-billable activities associated with various services. Productivity assumptions are detailed in each individual rate model, and Appendix C of the rate model packet includes all productivity assumptions for each service and activity. A summary of the overall productivity adjustments for each service with a rate model is provided in Figure 10, with a comparison to the average productivity level reported by staff delivering services during the time study administered as part of the rate study.

Figure 10: Productivity Rates – Time Study Compared to Proposed Rate Models

Service*	Time Study (Avg. w/o Outliers)	Proposed Rates**
Supported Living	1.02	1.02
Intensive Medical Living Services	*	1.02
Customized In-Home Supports	1.02	1.13
Home Health Aide (MF Waiver)	1.00	1.14
Respite	1.00	1.07
Respite - Group	1.00	1.08
Customized Community Support-Individual	1.04	1.13
Customized Community Supports-Group Cat. 1	1.13	1.11
Customized Community Supports-Group Cat. 2	1.13	1.10
Comm. Integrated Employment (Ind.) - Job Development	*	1.31
Comm. Integrated Employment (Ind.)	1.16	1.14
Comm. Integrated Employment (Ind.) - Self-Employment	1.58	1.14
Community Integrated Employment-Group Cat. 1	1.15	1.11
Community Integrated Employment-Group Cat. 2	1.15	1.10
Behavioral Support Consultation	1.62	1.65
Therapists (OT/PT/SLP)	1.60/ 1.30/ 1.70	1.62
Certified Occupational Therapy Assistant (COTA)	*	1.44
Physical Therapy Assistant (PTA)	*	1.44
Nursing - Registered Nurse	1.10	1.24
Nursing - Licensed Practical Nurse	1.10	1.25
Crisis Support - Alt Res	*	1.02
Crisis Support - Individual Residence	*	1.09
Nutrition Counseling	*	1.22
Social and Sex Education	*	1.07
Risk Screen	*	1.65

*Services with fewer than five responses are masked from reporting.

**For the purpose of comparison to the time study, productivity levels do not include training or paid time off. Actual productivity adjustments in the rate models are somewhat higher to account for training and paid time off. Productivity adjustments for services with incentive rates are reported for standard rates, but higher productivity adjustments are made for the proposed incentive rates.

Program Support and Administrative Expenses

Provider rates must include sufficient program support and administrative funding to support a provider's ability to invest in and comply with training requirements, quality assurance and quality management systems, oversight and monitoring, and well-qualified administrative and support staff. In combination, the rate models include an average of 28 percent for overhead costs, which exceeds the amounts reported through the provider survey. Specifically:

- **Program support** includes supervision, internal service coordination activities, quality oversight, training, curriculum development, and other program-specific activities, functions that are crucial to the delivery of quality services. The rate models include \$35 per day for program support, equal to about 12.7 percent of providers' costs based on current rates. In comparison, case management and consultant agencies reported an average program support rate of 7.5 percent, and all other HCBS providers reported an average of 9.0 percent. The increase is intended to account for increases in wages and other expenses for program support personnel, investment in program infrastructure, and other program-related expenses.
- **Administrative expenses** include staff in general management, finance and accounting, information technology, and human resources; and other infrastructure costs needed to effectively deliver services. The rate models include funding to support the costs associated with these functions, such as administrative staff salaries and benefits, facility-related expenses, equipment and supplies, insurance, professional services (for example, lawyers, tax preparers, and accountants), and licensing and accreditation fees. The rate models include 15 percent of the total overall rate for administrative expenses. In comparison, case management and consultant agencies reported an average of 11.6 percent in administrative expenses, and all other providers reported an average of 12.6 percent.

Funding for gross receipts taxes (GRT) is excluded from the rate models since it does not apply to all providers and is added to the claim when paid by DDSD. To ensure unallowable costs are excluded from overhead estimates, the provider survey separately itemized revenues received from SSI/SSDI to cover room and board expenses. Additionally, providers were asked to allocate their administrative and program support costs between the waiver services they provide and all other programs they offer. Costs for room and board and expenses allocated to other programs were not included in the program support or administrative rate calculations used to benchmark the proposed assumptions.

Section 4: Recommended Rates and Associated Changes

The rate study included a review of the service requirements, payment rates, and billing policies for each service. For most services, rate models were developed consistent with the methodology described in Section 3. Other methodologies used to develop rate proposals for select services are described in the service-specific subsections below.

Standardizing Rates Across Waivers

To support participants' access to services regardless of the waiver on which they are enrolled, the rate study proposes to standardize rates across waivers when services have substantially similar scopes of work and the same qualification requirements.

Establishing Mi Via Waiver Rate Ranges

Many services on the Mi Via Waiver provide for a range of rates, providing flexibility to Mi Via participants in negotiating payments within a reasonable, market-based range. The rate study does not propose changing this approach and so recommends both a minimum and maximum rate for services with a range:

- The proposed lower-bound rates for services delivered by direct support professionals are equal to New Mexico's \$12.00 minimum wage. For other services, the lower-bound rates are set at the base wage assumption in the corresponding rate model developed for agency-managed services in the DD Waiver.
- The proposed upper-bound rate is equal to the combined wage and benefit cost assumptions in the corresponding rate model (excluding payroll taxes, which are added to the negotiated wage when a claim is paid) for agency-managed services. These upper limits allow participants to pay their workers an amount equal to the total compensation assumed for staff employed by provider agencies; that is, participants can pay their workers a higher wage to offset the inability to offer health insurance and other benefits.

Service-Specific Recommendations

Recommendations for each service are described below. The rate models, which detail the assumptions and calculations for each proposed rate (unless otherwise noted), are included as Attachment 1.

Note regarding proposed rate decreases. The rate study proposes to increase payment rates for most services. However, for a small number of services, the rate study proposes to reduce payment rates. For these services, DDS has stated that it does not intend to adopt or implement the recommendations. That is, DDS does not intend to reduce any current payment rates.

Case Management and Consultant Services

Case Management and Consultant Services provide assessment and planning services to ensure individuals have access to the types and amounts of waiver services they need as well as ongoing monitoring to ensure the health and safety of participants.

Each waiver provides for a case management service (named Consultant Services in the Mi Via Waiver), though the rates vary across waivers based on differences in caseloads and staff qualification requirements.

Case Manager / Consultant Qualification Requirements

Required provider qualifications are similar in the DD Waiver and Mi Via Waiver, but differ for the Medically Fragile Waiver:

- DD Waiver case managers must possess 1) a minimum of a high school diploma or general equivalency diploma (GED) with six years of experience working with individuals with disabilities, 2) a bachelor's degree in social work, psychology, human services, counseling, nursing, special education, or closely related field and one year experience, or 3) licensure as a social worker or registered nurse.
- Mi Via Waiver consultants must possess 1) a minimum of a high school diploma or GED with six years of experience working with individuals with disabilities, or 2) a bachelor's degree in social work, psychology, human services, counseling, nursing, special education, or closely related field and one year experience.
- Medically Fragile Waiver case managers must be a registered nurse with either 1) at least one year of experience working in home health programs, hospitals, community health programs, or similar settings, or 2) two years of experience in pediatrics, critical care, or public health fields.

The proposed rate models include the same wage assumptions for DD Waiver Case Management and Mi Via Waiver Consultant Services given the substantial alignment of experience and educational requirements. The proposed rate model for Medically Fragile Waiver Case Management assumes a higher wage reflecting the requirement that this service must be delivered by an RN.

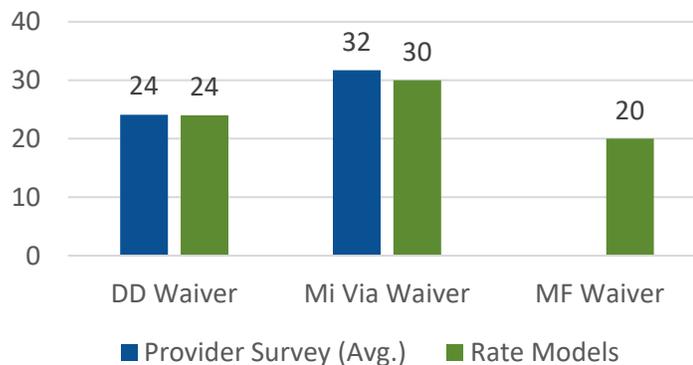
Case Manager / Consultant Caseload Assumptions

The rate models spread the assumed monthly cost for a full-time case manager or consultant (including vehicle, office, and overhead costs) over an assumed caseload to produce a monthly per-person rate. Waiver service standards define a maximum of 50 cases per case manager or consultant across all waivers. In practice, however, operating caseloads tend to be much lower. Further, caseloads vary substantially across waivers. Figure 11 compares the caseload assumption included in the proposed rate models to the average caseloads reported in the provider survey.

As the figure indicates, average caseloads reported in the provider survey are well below the caseload maximums allowed in service standards.

Additionally, despite similarities in required qualifications for DD Waiver case managers and Mi Via Waiver consultants, differences in scopes of provider responsibilities and individual needs result in lower caseloads for DD Waiver case managers (24.0 cases) compared to Mi Via consultants (31.7 cases). The proposed rate models assume average caseloads that align with caseloads reported in the provider survey.²¹

Figure 11: Reported Caseload Averages and Assumed Caseloads in Rate Models by Waiver



Proposed Rates

The proposed rate models for DD Waiver Case Management and Mi Via Waiver Consultant Services include the same cost assumptions. However, because the proposed Consultant Services rate model assumes a larger caseload, the proposed per-person rate is lower than DD Waiver Case Management. That is, the proposed rate models assume the same annual revenue for a case manager and a consultant, but produce different per-person payment rates as the standardized cost assumptions are spread over a different number of cases. In contrast to the proposed rate models, the current Consultant Services rate is almost 10 percent higher than the DD Waiver Case Management rate. Figure 12 presents the proposed case manager and consultant rates.

**Figure 12: Proposed Rates for Case Management and Consultant Services
(Rates per Month Unless Noted)**

Service	Current Rate	Final Proposed Rate	Percent Change
Developmental Disabilities Waiver			
On-Going	\$370.80	\$381.80	3.0%
Pre-Eligibility	\$143.00	\$152.72	6.8%
Mi Via Waiver (Consultant)			
On-Going	\$406.68	\$305.44	(24.9%)*
Pre-Eligibility	\$150.61	\$122.18	(18.9%)*
Personal Plan Facilitation	\$105.00-\$685.00 each	\$105.00-\$685.00 each	0.0%
Medically Fragile Waiver			
On-Going	\$668.03	\$693.59	3.8%
Pre-Assessment	\$106.08 / per assess.	\$108.09 / per assess.	1.9%
Assessment	\$143.00	\$173.40	21.3%

²¹ Caseloads for the MF Waiver are masked from reporting as they include only 1 provider.

**Figure 12: Proposed Rates for Case Management and Consultant Services
(Rates per Month Unless Noted)**

Service	Current Rate	Final Proposed Rate	Percent Change
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*DDSD does not intend to adopt rate reductions.

As the table shows, the rate study proposes to significantly decrease the rate for On-Going Consultant Services in the Mi Via Waiver. Two adjustments to rate model assumptions drive the proposed reduction:

- As noted above, the proposed rate model assumes an average of 30 cases per consultant, which is somewhat lower than the 31.7 average reported in the provider survey. In comparison, the current rate assumes an average of 5.778 hours per month per participant and that 70 percent of consultants’ time is spent on direct and indirect activities supporting individuals, translating to an average caseload of only 22. Since the assumed monthly costs for a consultant are spread over their assumed caseload, the per-person rate declines as the assumed caseload increases.
- The current rate includes a 47.6 percent overhead rate for Consultant Services compared to the 31.2 percent assumed for all other services, including DD Waiver Case Management. The proposed rate models include a total of 26.7 percent for overhead, which exceeds the costs reported through the provider survey.

The rate study relied on existing relationships between the rates for Pre-Eligibility services and the On-Going Case Management or Consultant Services rates. Pre-Eligibility services on the DD Waiver and Mi Via Waiver are set at 40 percent of the On-Going rates (based on the current ratio for DD Waiver Case Management), and 25 percent of the On-Going rate for the Medically Fragile Waiver (somewhat higher than the current 21.4 percent ratio). No changes to the existing range of rates for Personal Plan Facilitation are proposed.

Due to the combination of higher rates and larger caseloads, Mi Via consultants currently earn, on average, substantially more than DD Waiver case managers. As noted above, the rate study proposes to equalize expected revenues across case managers and consultants, as shown in Figure 13.

Figure 13: Comparison of Revenues Earned Currently and Under Rate Proposal

Waiver	Rate	Average Caseload*	Monthly Revenue
<i>Current Rates</i>			
DD Waiver	\$370.80	24.3	\$9,010
Mi Via Waiver	\$406.68	31.7	\$12,892
<i>Final Proposed Rates</i>			
DD Waiver	\$381.80	24	\$9,163
Mi Via Waiver	\$305.44	30	\$9,163

* Current average caseloads reflect reported averages from the provider survey while average caseloads for the ‘final proposed rates’ reflect the assumptions in the proposed rate models.

If the On-Going rates are implemented, the rate study recommends that allowable caseloads be reduced from the current maximum of 50 to 35 to align the level of support received by participants with the rates paid to their providers.

Residential Services

The DD Waiver covers three types of residential support, which collectively accounted for 62 percent of total DD Waiver spending in fiscal year 2024:

- **Family Living** services are provided in a person's home or a surrogate family home subcontracted through a Family Living provider agency. Subcontracted Family Living providers are often the parent or other relative of the participant receiving services. Provider agencies are responsible for recruiting, providing initial and ongoing training and oversight, conducting monthly in-home visitations, and coordinating up to 750 substitute care hours per year when a home operator is sick or needs to be away from the home for any reason.
- **Supported Living** services are provided in a provider owned or operated home with no more than four participants. Payment rates are tiered based on an individual's intensity of need. Participants in Supported Living Categories 1 through 3 may receive a Non-Ambulatory Stipend to account for the added staffing needed in case of an emergency where non-ambulatory participants require evacuation assistance.
- **Intensive Medical Living Services (IMLS)** are also provided in a provider owned or operated home with no more than four residents. IMLS is designed for participants with complex medical needs who require intensive support and clinical oversight by a nurse.

Providers may support individuals with varied needs within the same home, billing different Supported Living rate categories or IMLS for residents of the same home.

340-Day Billing Policy

The rate methodology for these services assumes a 340-day billing year to ensure providers receive a full year of payment even when individuals are occasionally absent from their home. That is, the current rates distribute the assumed annual cost over 340 billing days, producing a rate that is 7.4 percent higher than if the costs were distributed over 365 billing days. Once the provider has billed for 340 days of support, they have been paid for a full year of care and therefore cannot bill more than 340 days even if the individual is in the home for more than 340 days. The proposed rate models maintain this approach.

Supported Living and IMLS

Supported Living rates are tiered based on the typical number of individualized support hours provided to a resident as well as the amount of clinical supports.

Group Home Staffing Assumptions

Figure 14 reports staff hour assumptions for direct support professional, nurses, and nutritional counselors for each rate tier, as well as enrollment figures in June 2024.

Figure 14: Standard 1:1 Staff Support Assumptions in Supported Living and Intensive Medical Living Rate Models

	Count of Individuals (FY2024)	Percent of Total Individuals	Weekly 1:1 DSP Hours	Annual Nursing Hours	Annual Nutritional Counseling Hours
Category 1	44	3.5%	7	18	5
Category 2	214	17.2%	14	60	5
Category 3	357	28.7%	28	120	5
Category 4	605	48.6%	42*	180	5
IMLS	25	2.0%	48	520	12

*DD Waiver standards specify a *minimum* of 28 hours of one-to-one support required for Category 4; the proposed rate models assume 42 hours based on analysis of current staffing levels reported in the provider survey.

The rate study does not propose any changes to current expectations regarding one-to-one staff hours and clinical supports. For shared staff hours, the rate models assume an average of three-and-a-half residents per home based on findings from the provider survey in which 44 percent of reported participants live in three-bed homes, and 43 percent live in four-bed homes (with remaining participants living in one- or two-bed homes).

Figure 15 reports the assumed weekly hours per home in the rate models, accounting for both shared and one-to-one hours. Staffing assumptions are further detailed in Appendix D of the rate model packet.

Figure 15: Assumed Supported Living and IMLS Staff Hours per Resident per Week

	Shared Hours per Home	Shared Hours per Resident	1:1 Hours per Resident	Total Hours per Resident
Category 1	142.50	40.71	7.00	47.71
Category 2	142.50	40.71	14.00	54.71
Category 3	142.50	40.71	28.00	68.71
Category 4	142.50	40.71	42.00	82.71
IMLS	168.00	48.00	48.00	96.00

Proposed Rates

Figure 16 presents the proposed Supported Living, IMLS, and Non-Ambulatory Stipend rates.

Figure 16: Proposed Rates for Supported Living and Intensive Medical Living Services (Rates per Day)

	Current Rate	Final Proposed Rate	Percent Change
Category 1	\$221.54	\$312.16	40.9%
Category 2	\$272.45	\$357.54	31.2%
Category 3	\$357.13	\$443.54	24.2%
Category 4	\$463.59	\$529.55	14.2%
IMLS	\$492.90	\$668.16	35.6%
Non-Ambulatory Stipend	\$65.22	\$124.61	91.1%

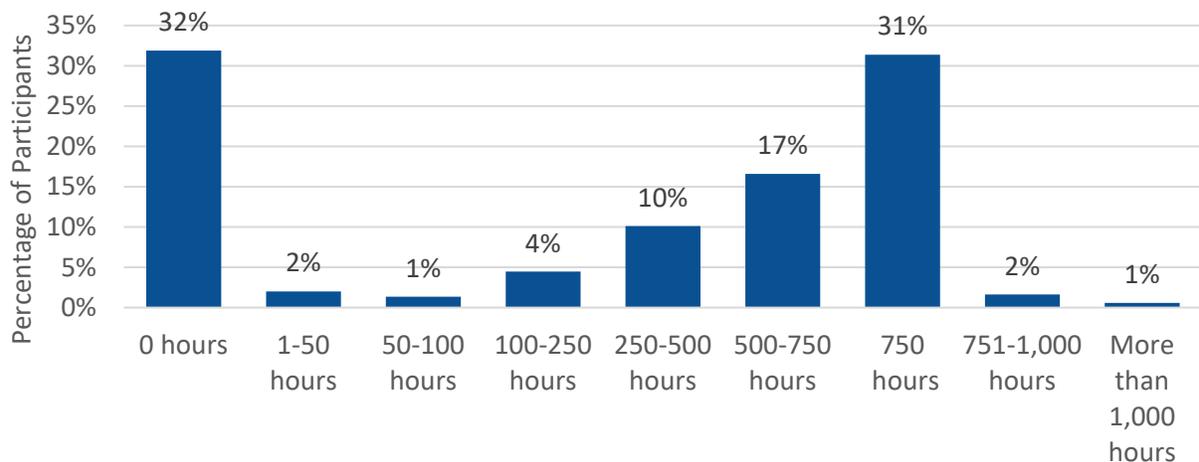
Family Living

The rate study proposes two policy changes for Family Living impacting payments: unbundling substitute care from the rate and establishing a minimum payment level to subcontracted home providers.

Unbundling Substitute Care

The current Family Living rates include (or ‘bundle’) funding for 750 hours of substitute care per year, meaning agencies receive this funding regardless of whether they provide the support. On average, Family Living providers participating in the provider survey reported delivering less than 60 percent of the substitute care hours for which they are paid (an average of 439 hours per year). Figure 17 reports the distribution of reported participants by level of substitute care hours received.

Figure 17: Distribution of Reported Participants by Grouping of Hours



As the chart shows, 31 percent of the participants were reported to receive exactly 750 annual hours of substitute care and fewer than three percent of participants received more than 750 hours. Providers reported providing no substitute care for nearly a third of participants. Further analysis of provider survey

responses found that fewer substitute care hours do not correlate with higher payments to contracted homes, which are paid a median of about \$2,600 - \$2,700 per month regardless of the number of substitute care hours they receive. That is, providers do not appear to be using savings from undelivered substitute care to increase payments to homes.

To better align payments with actual service delivery, the rate study proposes to unbundle substitute care from the Family Living rate. This change is not intended to limit the amount of substitute care that a Family Living subcontractor receives as 750 hours of substitute care would be separately authorized at the Respite rate, but agencies would only bill for the services they actually provide.

Payment Floor for Subcontracted Homes

The proposed Family Living rate model assumes that agencies pay their subcontracted homes \$3,250 per month (\$39,000 per year). This assumption exceeds the current median payment range of \$2,600 - \$2,700 reported through the provider survey to allow for increased payments similar to the higher wages assumed for direct support professionals.

As with other rate model assumptions, agencies are not required to pay exactly what the model assumes. However, to ensure that subcontracted homes are fairly compensated, the rate study recommends that agencies be required to pay their subcontracted homes at least 55 percent of the rate they receive. This floor is somewhat less than the 56.4 percent assumed in the proposed rate model to provide some flexibility (for example, agencies may pay lower amounts to shorter-tenured homes and higher amounts to longer-tenured homes).

Proposed Rates

Figure 18 compares the final proposed rate to the current rate.

Figure 18: Proposed Rates for Family Living (Rate per Day)

Service	Current Rate	Final Proposed Rate	Percent Change
Family Living	\$191.71	\$203.23	6.0%

As discussed above, the rate study proposes to unbundle substitute care from the Family Living rate. The evaluation of the proposed rates therefore requires consideration of the impact of additional billing for substitute care. If an agency provides 750 hours of substitute care, the total combined payment for Family Living and substitute care (billed at the proposed Respite rate) would be 55.9 percent greater than the current total.

In-Home Services

In-home services provided in the home of the participant or their family may be intermittent (less than 24 hours a day) or continuous (24-hour). The scope of supports differs across services:

- **Customized In-Home Supports (CIHS)** are intermittent services available through the DD Waiver. CIHS – which is not available as a 24-hour service – provides instruction and personal support to help participants live safely in their home and community, including assistance with activities of daily living, health-related supports, meal preparation, and money management.

- **In-Home Living Supports (IHLS)** in the Mi Via Waiver enable the participant to continue to live safely in their own home or their family (or other natural support) home. Supports include assistance with activities of daily living, general household tasks, accessing the community, and socialization. In fiscal year 2024, IHLS represented 56 percent of overall Mi Via Waiver spending. Services may be – and routinely are – provided 24 hours per day.
- **Homemaker/ Direct Support Services** covered through the Mi Via Waiver assists participants with activities of daily living, perform general household tasks, provide companionship, and assist participants in accessing the community.
- **Home Health Aide** services available to participants on the Mi Via and Medically Fragile Waivers provide assistance with activities of daily living, including meal planning and preparation, as well as medically-focused care such as assistance with bowel and bladder care. Home health aides do not administer medications, adjust oxygen, or perform intravenous procedures. These services are delivered by certified nursing assistants or others meeting home health aide requirements, and must be provided through a provider agency.

Proposed Rates

Due to similarities between continuous IHLS and Family Living, the proposed maximum daily rate for IHLS is equal to the proposed rate for Family Living, but is based on a 365-day billing year to maintain the current billing policy for IHLS (whereas the proposed Family Living daily rate is based on a 340-day billing year). The proposed low end of the IHLS daily rate range is tied to the assumed DSP hourly compensation in other agency rate models (including wages and benefits, but excluding payroll taxes that are added to the billed rate).

Homemaker/Direct Support Services payments cover a range of rates. The rate study proposes a minimum of \$12.00 per hour (to account for the current statewide minimum wage) and a maximum of \$25.01 per hour (equal to the rate modeling assumptions for DSP wages and benefits, excluding the cost of payroll taxes that are added to the billed rate).

Despite similar expectations for Home Health Aide services in the Mi Via Waiver and the Medically Fragile Waiver, the current payment rate is substantially higher in the Medically Fragile Waiver. Consistent with the goal of standardizing rates where appropriate, the rate study proposes to standardize rates for Home Health Aide services regardless of waiver.

Figure 19 presents the proposed rates.

Figure 19: Proposed Rates for In-Home Services

Service	Current Rate	Final Proposed Rate	Percent Change
<i>Developmental Disabilities Waiver</i>			
Customized In-Home Support (per 15 minutes)	\$8.42	\$11.95	41.9%
<i>Mi Via Waiver</i>			
In-Home Living Support (per day)	\$26.33 - \$191.48	\$25.01 - \$189.31	(5.0%) / (1.1%)*
Homemaker/Direct Support (per hour)	\$7.90 - \$15.38	\$12.00 - \$25.01	51.9% - 62.6%
Home Health Aide (per hour)	\$17.19	\$50.02	191.0%
<i>Medically Fragile Waiver</i>			
Home Health Aide (per hour)	\$45.23	\$50.02	10.6%

*DDSD does not intend to adopt rate reductions.

Respite

Respite provides a break for a participant’s unpaid caregiver. Supports include assistance with activities of daily living, leisure and community involvement, and social and recreational activities. Respite may be provided in the participant’s home, a provider’s home, a community setting such as a community center or park, or a respite home.

Respite-Group services on the DD Waiver may be provided for up to five participants at a time. The proposed rate for Respite-Group assumes 2.5 participants per direct support professional.

Consistent with the current rate methodology, the recommended rate for Respite-Facility is equal to the proposed rate for Intensive Medical Living Services on the DD Waiver, but is based on a 365-day billing year rather than a 340-day billing year.

Standardizing Rates for Services Provided by Home Health Aides and Nurses

Respite on the Medically Fragile Waiver is provided by a nurse or home health aide and services may include health services and medical care within the scope of practice for each profession. To ensure rate parity for services delivered by registered nurses (RNs) or licensed practical nurses (LPNs), the proposed Respite rates provided by an RN or LPN are equal to the proposed rates for Adult Nursing and Private Duty Nursing. The rate study similarly proposes to set the Respite-Home Health Aide rate equal to the rate proposed for the Home Health Aide service.

Proposed Rates

Figure 20 presents the proposed rates.

Figure 20: Proposed Rates for Respite (Rates per 15 minutes)

Service	Current Rate	Final Proposed Rate	Percent Change
Developmental Disabilities Waiver			
Respite-Individual	\$7.46	\$10.96	46.9%
Respite-Group	\$3.45	\$5.40	56.5%
Mi Via Waiver			
Respite-Standard	\$7.94	\$10.96	38.0%
Respite-LPN	\$11.48	\$20.36	184.8%
Respite-RN	\$7.15	\$26.42	130.1%
Medically Fragile Waiver			
Respite-Health Aide	\$45.23	\$50.02	10.6%
Respite-LPN	\$19.92	\$20.36	2.2%
Respite-RN	\$29.76	\$26.42	(11.2%)*
Respite Facility (per day)	\$492.90	\$493.28	0.1%

*DDSD does not intend to adopt rate reductions.

Customized Community Supports and Community Direct Support

Customized Community Supports (CCS) are day habilitation services that assist participants with increasing their independence, strengthening community ties and interpersonal relationships, and participating in community life. DDSD service policies encourage CCS to be delivered in the community to the extent possible. Community Direct Support (CDS) on the Mi Via Waiver is an individualized community-based service designed to assist participants to identify, develop, nurture, and maintain community connections, and to build social relationships outside of the participant’s residence.

Proposed Rates

The DD Waiver covers both individual and group CCS. CCS-Group rates vary based on program setting and staffing levels. The proposed rate models account for these differences and assume group sizes somewhat smaller than allowed by current standards:

- **Small Group** programs provide services in the community or remotely with group sizes of no more than three participants per DSP; the proposed rate model assumes one DSP for every two-and-a-half participants.
- **Category 1** services may be provided in both provider-owned and operated locations as well as community settings in groups of up to six participants for each DSP; the proposed rate model assumes one DSP for every five-and-a-half participants.

- **Category 2** services may be provided in both provider-owned and operated locations as well as community settings in groups of up to four participants for each DSP; the proposed rate model assumes one DSP for every three participants.

The proposed CCS-Group rate models adjust the staffing assumptions by applying an 85 percent attendance factor to recognize that, while providers must staff based on expected attendance, participants will occasionally be absent.

Additionally, the proposed rates bundle nursing supports into the cost of the service, assuming 12 hours per year for Category 1 and 36 annual hours for Category 2 and Small Group. Nursing supports can be authorized and paid for separately when CCS-Group services are delivered in the community.

The Medically Fragile Waiver covers only group services with a maximum of three participants per DSP. Since the staffing requirement mirrors the Small Group service on the DD Waiver, the same rate is proposed.

For services covered through the Mi Via Waiver:

- The rate study proposes to update the range of rates for CCS-Group to reflect the lowest and highest rate proposed for CCS-Group in the DD Waiver (that is, the Category 1 and Small Group rates).
- For CDS, the rate study proposes to establish a minimum of \$12.00 per hour (to account for the current statewide minimum wage) and a maximum of \$25.01 per hour (equal to the rate modeling assumptions for DSP wages and benefits, excluding the cost of payroll taxes that are added to the billed rate). The current range of rates is higher, between \$44.60 and \$65.20 per hour, based on the existing rate methodology that assumes a billable ratio of 64 percent (inflating the base wage assumption by more than 150 percent).

Figure 21 presents the proposed rates.

Figure 21: Customized Community Supports/ Community Direct Support (Rates per 15 Minutes)

Service	Current Rate	Final Proposed Rate	Percent Change
<i>Developmental Disabilities Waiver</i>			
CCS-Individual	\$12.22	\$12.30	0.7%
CCS-Category 1	\$2.96	\$4.70	58.8%
CCS-Category 2	\$6.75	\$6.93	2.7%
CCS-Small Group	\$6.03	\$7.73	28.2%
<i>Mi Via Waiver</i>			
Community Direct Supp.	\$11.15 - \$16.30	\$3.00 - \$6.25	(73.1%) / (61.7%)*
CCS-Group	\$2.69 - \$9.29	\$4.70 - \$7.73	74.7% / (16.8%)*
<i>Medically Fragile Waiver</i>			
CCS-Group	\$5.93	\$7.73	30.4%

*DDSD does not intend to adopt rate reductions.

Community Integrated Employment

Community Integrated Employment (CIE) services are available through the DD and Mi Via Waivers. CIE services assist individuals with gaining or increasing job skills, exploring and implementing necessary job accommodations (such as the use of assistive technology), and similar supports. Services may be delivered individually or in small groups.

There are multiple types of individual supports:

- Job Development through the DD Waiver assists individuals in planning for, exploring, and obtaining community integrated employment.
- Job Coaching through the DD Waiver and Mi Via Waiver is designed as a short-term support (generally lasting up to 3 months).
- Job Maintenance (including intensive Job Maintenance) through the DD Waiver is used as a long-term support.
- Self-Employment services assist participants with starting and maintaining a business.

The DD Waiver also covers group services with two rates based on staffing ratios:

- Category 1 services allow for up to six participants per job coach.
- Category 2 services allow for up to four participants per job coach.

Individual Community Integrated Employment

Given differing skillsets and job duties for job developers and job coaches, the rate study proposes different rate models for these positions.

Job Development services covered through the Mi Via Waiver are currently based on a total rate. The rate study recommends transitioning to a 15-minute unit to align with Job Development services on the DD Waiver in order to improve accountability and tracking of actual hours provided. Additionally, Job Development rates on the Mi Via Waiver are based on a range of rates, which the rate study proposes to update to:

- A minimum rate based on the hourly wage assumed for Job Development services on the DD Waiver.
- A maximum rate is based on the assumed job developer wage plus benefits, but excluding payroll taxes (which are added to the billed rate).

The proposed rate models for services provided by a Job Coach – Job Maintenance, Job Maintenance-Intensive, Job Coaching, and Self-Employment – include the same assumptions. However, consistent with current billing practices, the basis for billing varies by service.

- Job Coaching and Self-Employment supports are billed in 15-minute increments.
- Maintenance services are billed per month. To establish the monthly rate, the proposed rate model assumes an average of 22 hours of support per month, which is the average of the defined range of support (4 to 40 hour per month) and is consistent with the current rate.

- Intensive services are provided when an individual needs more than 40 hours of support in a month. Services are billed per hour.

Figure 22 presents the proposed rates for individual CIE.

Figure 22: Proposed Rates for Individual Competitive Integrated Employment

Service	Current Rate	Final Proposed Rate	Percent Change
<i>Developmental Disabilities Waiver</i>			
Job Dev. (per 15 min.)	\$12.07	\$18.58	53.9%
Job Maint. (per month)	\$1,363.11	\$1,304.82	(4.3%)*
Intensive (per hour)	\$59.42	\$59.31	(0.2%)*
Job Coach (per 15 min.)	\$12.07	\$14.83	22.9%
Self-Emp. (per 15 min.)	\$16.11	\$14.83	(7.9%)*
<i>Mi Via Waiver</i>			
Job Dev. (per 15 min.)	\$105-\$737 (each)	\$7.37 - \$9.14	-
Emp. Supp. (per 15 min.)	\$2.26 - \$7.30	\$6.30 - \$7.97	178.8% / 9.2%

*DDSD does not intend to adopt rate reductions.

Group Community Integrated Employment

The proposed rate models for shared employment services maintain the existing rate categories:

- The proposed Category 1 rate assumes five-and-a-half individuals per job coach (current standards allow up to six individuals per job coach).
- The proposed Category 2 rate assumes three individuals per job coach (current standards allow up to four individuals per job coach).

The proposed rate models adjust these staffing assumptions by applying an 85 percent attendance factor to recognize that, while providers must staff based on expected attendance, participants will occasionally be absent.

Figure 23 presents the proposed rates for group CIE.

Figure 23: Proposed Rates for Group Competitive Integrated Employment (Rates per 15 Minutes)

Service	Current Rate	Final Proposed Rate	Percent Change
Category 1	\$2.34	\$4.50	92.3%
Category 2	\$3.89	\$6.83	75.6%

Transportation

Transportation services allow participants to access waiver services and other non-medical community-based resources.

Proposed Rates

Consistent with existing practices, the rate study proposes to tie mileage reimbursement rates on the DD and Mi Via Waivers to the Internal Revenue Services’ standard mileage rate, which is \$0.725 in 2026.

On the Mi Via Waiver, the driver’s time may also be billed. As discussed at the beginning of this section, the rate study proposes to establish an hourly range of \$12.00 per hour (to account for the current statewide minimum wage) to \$25.01 (equal to the rate modeling assumptions for DSP wages and benefits, excluding the cost of payroll taxes that are added to the billed rate).

Figure 24 presents the proposed rates.

Figure 24: Proposed Rates for Transportation Services

Service	Current Rate	Final Proposed Rate	Percent Change
Per mile (DD and Mi Via Waivers)	\$0.66	\$0.725	9.8%
Hour (Mi Via Waiver)	\$12.00 - \$15.38	\$12.00 - \$25.01	0.0% - 62.6%

Consolidate DD Waiver Limits

The DD Waiver caps mileage reimbursement at \$850 per year. Additionally, the DD Waiver allows for up to \$460 per year in reimbursement for transportation passes or tickets such as bus passes. Based on research into other states’ waiver limits for similar services, the rate study proposes to combine the limits into a single annual limit of \$1,000.

Professional and Licensed Services

The waiver programs cover a number of services delivered by workers with professional license or other required certification and who meet education, training, and experience requirements.

Incentive Rates

The DD Waiver and Mi Via Waiver currently have higher ‘incentive’ rates for several professional services provided in certain, primarily rural, parts of the state. The incentive rates were first established as part of the 2012 rate study to address observed differences in access to services across New Mexico. There are currently incentive rates for Therapies and Therapy Assistants, Behavioral Support Consultation, Preliminary Risk Screening and Consultation, and Preliminary Risk Screening and Consultation services. The counties designated as incentive areas vary across services. The rate study does not propose any changes to the services for which there are incentive rates or the process for designating incentive counties.

The proposed rate models for incentive rates generally include the same cost assumptions as the corresponding standard rates, but add an additional 200 miles and six hours of travel per week.

To support consistency across programs, the rate study recommends DDSD adopt incentive rates for the same services covered in the Medically Fragile Waiver.

Therapies and Therapy Assistants

Therapies and Therapy Assistants services – including Physical Therapy (PT), Physical Therapy Assistant (PTA), Occupational Therapy (OT), Occupational Therapy Assistant (OTA), and Speech Language Pathology (SLP) – provide supportive and adaptive strategies and training for participants and their caregivers.

Standardized Rates Across Disciplines

Current rates vary for occupational therapists, physical therapists, and speech language pathologists based on differences in assumed wages for each discipline based on the Bureau of Labor Statistics data discussed in Section 3. To create parity across therapists, the rate study recommends standardizing the payment rates for these services. The proposed rate model uses the highest wage across these three disciplines (which was speech language pathologists in the May 2024 dataset).

The rate study similar proposes to standardize rates for occupational therapy assistants and physical therapy assistants based on the higher wage assumption for OTAs.

Adding Therapy Assistants to the Medically Fragile Waiver

While the DD Waiver and Mi Via Waiver allow OTAs and PTAs to deliver services, but the Medically Fragile Waiver covers only services provided by licensed therapists. To increase consistency across programs and to encourage the use of therapy assistants where appropriate, the rate study recommends that services provided by OTAs and PTAs be added to the Medically Fragile Waiver.

Proposed Rates

Figure 25 presents the proposed therapy and therapy assistant rates.

Figure 25: Proposed Rates for Therapy and Therapy Assistant (Rates per 15 Minutes)

Service	Current Rate	Final Proposed Rate	Percent Change
Developmental Disabilities Waiver			
Occ. Ther.-Standard	\$40.83	\$41.07	0.6%
Occ. Ther.-Incentive	\$52.07	\$56.82	9.1%
Occ. Ther. Asst.-Standard	\$27.05	\$27.34	1.1%
Occ. Ther. Asst.-Incentive	\$35.49	\$37.07	4.5%
Physical Ther.-Standard	\$49.66	\$41.07	(17.3%)*
Physical Ther.-Incentive	\$63.33	\$56.82	(10.3%)*
Phy. Ther. Asst.-Standard	\$27.80	\$27.34	(1.7%)*
Phy. Ther. Asst.-Incentive	\$36.47	\$37.07	1.6%
Speech Therapy-Standard	\$48.93	\$41.07	(16.1%)*
Speech Ther.-Incentive	\$62.39	\$56.82	(8.9%)*
Mi Via Waiver			
Occ. Ther.-Standard	\$13.42 - \$40.70	\$14.18 - \$41.07	5.7% / 0.9%
Occ. Ther.-Incentive	\$13.42 - \$52.07	\$14.18 - \$56.82	5.7% / 9.1%
Occ. Ther. Asst.-Standard	-	\$9.44 - \$27.34	

Figure 25: Proposed Rates for Therapy and Therapy Assistant (Rates per 15 Minutes)

Service	Current Rate	Final Proposed Rate	Percent Change
Occ. Ther. Asst.-Incentive	-	\$9.44 - \$37.07	
Physical Ther.-Standard	\$14.22 - \$49.74	\$14.18 - \$41.07	(0.3%) / (17.4%)*
Physical Ther.-Incentive	\$14.22 - \$63.33	\$14.18 - \$56.82	(0.3%) / (10.3%)*
Phy. Ther. Asst.-Standard	-	\$9.44 - \$27.34	
Phy. Ther. Asst.-Incentive	-	\$9.44 - \$37.07	
Speech Therapy-Standard	\$16.91 - \$48.72	\$14.18 - \$41.07	(16.1%) / (15.7%)*
Speech Ther.-Incentive	\$16.91 - \$62.39	\$14.18 - \$56.82	(16.1%) / (8.9%)*
Medically Fragile Waiver			
Occ. Ther.-Standard	\$40.83	\$41.07	0.6%
Occ. Ther.-Incentive	-	\$56.82	-
Occ. Ther. Asst.-Standard	\$27.05	\$27.34	1.1%
Occ. Ther. Asst.-Incentive	-	-	-
Physical Ther.-Standard	\$49.66	\$41.07	(17.3%)*
Physical Ther.-Incentive	-	\$56.82	-
Phy. Ther. Asst.-Standard	\$27.80	\$27.34	(1.7%)*
Phy. Ther. Asst.-Incentive	-	\$37.07	-
Speech Therapy-Standard	\$48.93	\$41.07	(16.1%)*
Speech Ther.-Incentive	-	\$56.82	-

*DDSD does not intend to adopt rate reductions.

The range of rates for therapies on the Mi Via Waiver are based on the following:

- **PTA/COTA.** The low end of the standard and incentive rate ranges are equal to the base wage for the therapy assistant position within the rate models, divided by 4. The high end of the standard rate and incentive rates will move to the corresponding proposed standard and incentive agency rates on the DD and MF Waivers.
- **PT/OT/SLP.** The low end of the standard and incentive rate ranges are equal to the Base wage for a therapist position within the rate models, divided by four. The high end of the standard and incentive rates are equal to the corresponding standard and incentive rates on the DD and MF Waivers.

Behavioral Support Consultation

Behavioral Support Consultation (BSC) services aim to improve the quality of life for participants through strategies designed to assist participants to develop functional and relational skills. Supports focus on identifying and addressing behaviors that interfere with quality of life through prevention and intervention strategies. Behavioral support consultants are responsible for assessing the individual and their environment, designing effective strategies, and training participants and their caregivers.

Standardizing Rates Across Waivers

The current BSC rate in the Medically Fragile Waiver is considerably lower than the rate the same service in the DD Waiver. As part of the overall recommendations to standardize rates for the same service across programs, the rate study proposes to increase the rate in the Medically Fragile Waiver to match the DD Waiver.

Proposed Rates

Figure 26 reports the proposed rates for Behavioral Support Consultation.

Figure 26: Proposed Rates for Behavioral Support Consultation (Rates per 15 Minutes)

Service	Current Rate	Final Proposed Rate	Percent Change
<i>Developmental Disabilities Waiver</i>			
Standard	\$31.08	\$31.72	2.1%
Incentive	\$40.09	\$44.69	11.5%
<i>Mi Via Waiver</i>			
Standard	\$22.04 - \$31.10	\$9.98 - \$31.72	(54.7%)* / 2.0%
Incentive	\$31.52 - \$40.09	\$9.98 - \$44.69	(68.3%)* / 11.5%
<i>Medically Fragile Waiver</i>			
Standard	\$25.66	\$31.72	23.6%
Incentive	-	\$44.69	-

*DDSD does not intend to adopt rate reductions.

The low ends of the standard and incentive rate ranges on the Mi Via Waiver are based on the assumed base wage in the proposed BSC rate model. The high ends of the standard and incentive rates reflect the corresponding proposed standard and incentive agency rates on the DD and Medically Fragile Waivers.

Nursing and Nutritional Counseling

Adult Nursing and Private Duty Nursing services cover nursing assessments and an array of supports for participants with chronic or acute health conditions. Services include nurse delegation; medication administration; and coordination. Rates vary for registered nurses and licensed practical nurses.

Nutritional Counseling services cover nutritional assessments and evaluations of participants and consultations with a participant’s caregivers to develop and implement a nutritional plan.

Standardizing Rates Across Waivers

The Mi Via Waiver currently pays much lower rates for nursing supports and nutritional counseling than the DD and Medically Fragile Waivers. As part of the overall recommendations to standardize rates for the same service across programs, the rate study proposes to align rates across waivers.

Proposed Rates

Figure 27 reports the proposed rates.

Figure 27: Proposed Rates for Nursing and Nutritional Counseling (Rates per 15 Min. Unless Noted)

Service	Current Rate	Final Proposed Rate	Pct. Change from Current
<i>Developmental Disabilities Waiver</i>			
Adult Nursing – RN	\$29.76	\$26.42	(11.2%)*
Adult Nursing – LPN	\$19.92	\$20.36	2.2%
Nutritional Counseling	\$22.22	\$20.95	(5.7%)*
<i>Mi Via Waiver</i>			
Private Duty Nursing – RN	\$11.48	\$26.42	130.1%
Private Duty Nursing – LPN	\$7.15	\$20.36	184.8%
Nutritional Counseling (per hour)	\$45.11	\$83.80	85.8%
<i>Medically Fragile Waiver</i>			
Private Duty Nursing – RN	\$29.76	\$26.42	(11.2%)*
Private Duty Nursing – LPN	\$19.92	\$20.36	2.2%
Nutritional Counseling (per hour)	\$88.89	\$83.80	(5.7%)*

*DDSD does not intend to adopt rate reductions.

Other Behaviorally-Focused Services

The DD Waiver covers several other behaviorally-related services:

- **Crisis** supports provide intensive supports for participants who are experiencing a behavioral or medical crisis and who require short-term intensive support. Crisis providers are required to have specialized training.
- **Preliminary Risk Screening and Consultation (PRSC)** is a specialized service conducted by licensed mental health professionals trained as risk evaluators with the goals of identifying and managing risks related to sexually inappropriate or offending behavior. The service includes risk screenings, assessments, and extensive collaboration with experts to develop individualized plans with a focus on community safety and the person's quality of life.
- **Socialization and Sexuality Education** is a comprehensive lifelong education program designed to promote healthy social networks and personal safety for participants. The courses utilize an inclusive learning environment with support guides and peer mentors to foster skill-building, informed decision-making, and interdependent relationships. The courses encourages collaboration with the student's individualized disciplinary team (IDT) to reinforce and expand skills across various settings. It also emphasizes participant rights, including protection from abuse, neglect, exploitation, and restrictive measures. Each series lasts eight weeks with participants attending one class per week for an average of two hours per class. DD Waiver service standards allow class sizes of up to 25 participants, but the rate models assume 8 participants per class based on input from during the rate study.

Proposed Rates

Figure 28 reports the rates for this group of services.

Figure 28: Proposed Rates for Other Behaviorally-Focused Services

Service	Current Rate	Final Proposed Rate	Percent Change
Crisis-Ind. Residence (per 15 min.)	\$10.22	\$12.65	23.8%
Crisis-Alt. Residence (per day)	\$490.25	\$936.83	91.1%
Prelim. Risk Screening-Standard (per 15 min.)	\$28.37	\$31.89	12.4%
Prelim. Risk Screening-Incentive (per 15 min.)	\$36.35	\$45.02	23.9%
Socialization/ Sex. Ed.- Standard (Series)	\$536.88	\$529.68	(1.3%)*
Socialization/ Sex. Ed.- Incentive (Series)	\$1,073.76	\$716.28	(33.3%)

*DDSD does not intend to adopt rate reductions.

Specialized Therapies

The Mi Via Waiver covers a number of Specialized Therapies provided by appropriately licensed staff:

- Acupuncture
- Bio-feedback
- Chiropractic
- Cognitive Rehabilitation Therapy
- Hippotherapy
- Massage Therapy
- Naprapathy
- Play Therapy

DDSD is adding these services to the MF Waiver, which currently covers only Massage Therapy, as well as Music Therapy.

Proposed Rates

Key aspects of the rate proposal for specialized therapies include:

- The Mi Via Waiver currently has minimum and maximum rates for these services; the rate study proposes a single maximum rate for each service.
- Current unit types vary across services; the rate study proposes that all of these services be billed in 15-minute units.
- The rate study recommends adoption of an explicit policy that prevents providers from billing waiver services at a higher rate than they charge others.

Proposed rates for these services are based on research into commercial rates in New Mexico. Figure 29 reports the proposed rates.

Figure 29: Specialized Therapies (Rates per 15 Minutes Unless Noted)

Service	Current Rate	Final Proposed Maximum Rate	Percent Change
Acupuncture	\$13.17 - \$26.33	\$37.50	184.7% - 42.4%
Bio-feedback	\$52.66 - \$105.32 (visit)	\$75.00	469.7% - 184.8%
Chiropractic	\$52.66 - \$105.32 (visit)	\$37.50	184.8% - 42.4%
Cognitive Rehab. Therapy	\$13.17 - \$26.33	\$56.25	327.1% - 113.6%
Hippotherapy	\$52.66 - \$105.32 (visit)	\$26.33	100% - 0%
Massage Therapy	\$13.17 - \$26.33	\$26.33	100% - 0%
Naprapathy	\$52.66 - \$105.32 (visit)	\$31.25	137.4% - 18.7%
Play Therapy	\$13.17 - \$26.33	\$37.50	184.7% - 42.4%
Music Therapy	-	\$37.50	-

Cost Based Services

The DD Waiver covers a number of services that allow individuals to purchase various goods and services intended to remove barriers to independence, promote health and safety, and increase access to home and community-based services and resources. Since these services cover a range of items, payments are not based on a fee schedule, but are based on actual costs.

The waivers establish spending limits for each service. To evaluate the reasonableness of these spending limits, the rate study researched other state waiver programs' limits. In general, New Mexico's limits were well below national averages. The rate study therefore proposes to increase limits for most services to better reflect typical standards. The rate study does not propose changes to applicable administrative fees described in standards and waiver applications, but these fees would continue to be included in the proposed limit for each service. Figure 30 presents the current and proposed limits.

Figure 30: Other Services

Service	Current Limit – DD Waiver	Current Limit – Mi Via Waiver	Current Limit – MF Waiver	Proposed Limit (All)
Environmental Modifications	\$5,000 / 5 years	\$5,000 / 5 years	\$5,000 / 5 years	\$25,000 / 5 years
Individual Directed Goods and Services	-	not specified	\$2,000 / year	\$2,000 / year
Specialized Medical Equipment (SME)	-	-	\$1,200 / year	\$3,500 / year
Specialized Med. Equip. and Ind. Goods/ Services-Fiscal Agent	-	-	\$120 per item per year	15% of SME or ID&G costs
Vehicle Modifications	-	-	\$5,000 / 5 years	\$20,000 / 5 years
Independent Living Transition	\$1,500 / lifetime	-	-	\$2,500 / lifetime
Assistive Technology	\$500 / year	-	-	\$5,000 / year
Remote Personal Support Technology	\$5,000 / year	-	-	\$5,000 / year
Fiscal Mgt. of Adult Ed. Opportunities	\$550 / year	-	-	\$750 / year

Section 5: Implementation and Future Considerations

The overarching goal of rate study was to evaluate existing waiver services and to ensure proposed payment rates represent the actual service costs in alignment with state and federal requirements. As noted in the previous section, the rate study brought forth several recommendations designed to support service quality and accountability. For example, the rate study recommended DDSD lower the maximum caseload for case managers and consultants from 50 to 35 to align the level of support received by participants with the rates. Additionally, the rate study recommends unbundling substitute care from the Family Living rate to improve accountability by ensuring payments for substitute care are aligned with actual service delivery.

This section describes additional implementation considerations, including an assessment of the fiscal impact of implementing the final proposed rates, recommendations for periodically ‘refreshing’ rate model assumptions between rate study cycles, and how rate methodologies may be leveraged in the future to further policy objectives and quality initiatives.

Fiscal Impact Analysis

To inform decision-making, the rate study included the development of the estimated cost of implementing the final proposed rates. The estimate incorporates DDSD’s intent to maintain current rates for any services for which the rate study proposes a rate decrease.

The estimate reflects fiscal year 2024 service levels. For each service, paid units with service dates in fiscal year 2024 were first re-priced at the current approved rates. The paid units were then re-priced at the proposed rates unless the proposal would result in a lower rate. The resulting totals were compared to estimate the cost of the proposed rate changes.

Several Mi Via services allow participants to negotiate their provider’s rate within a range of allowable rates. As discussed in the previous section, the rate study proposes to link the rate ranges for these services to the state’s minimum wage for paraprofessional services and to the assumed wage and benefit costs in the proposed corresponding rate models for agency-managed professional services in the DD Waiver. The fiscal estimates for Mi Via services with rate ranges therefore assume that spending will increase by the same percentage estimated for the corresponding agency-managed services on the DD Waiver.

Figure 31 provides the estimated fiscal impact of the proposed rates by waiver. The overall estimated increase - \$120.0 million (a 16.1 percent overall increase) – is inclusive of both state and federal funds, or \$34.2 million in state funds and \$85.8 million in federal funds.²² Since the estimate reflects fiscal year 2024 service levels, the projected percentage increase (16.1 percent) would need to be applied to current spending to estimate the impact at current service levels.

²² Based on fiscal year 2027 Federal Medical Assistance Percentage (FMAP) for New Mexico. See <https://www.kff.org/medicaid/state-indicator/federal-matching-rate-and-multiplier/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>.

Figure 31: Fiscal Impact Analysis (in millions)

Waiver/ Service	FY2024 Spending*	FY2024 Spending at Proposed Rates**	Increase	Pct. Increase
Grand Total	\$744.9	\$864.9	\$120.0	16.1%
DD Waiver Total	\$487.2	\$598.3	\$111.1	22.8%
Mi Via Waiver Total	\$254.3	\$263.0	\$8.7	3.4%
MF Waiver Total	\$3.4	\$3.5	\$0.2	4.5%

*FY2024 units were first re-priced at current rates.

**Proposed rates do not include GRT.

The complete fiscal impact analysis that includes estimates for each waiver and service is available in Attachment 11.

Individual Budgetary Allotments for Mi Via Waiver Participants

The Mi Via Waiver includes individual budgetary allotments (IBA) that establish the annual spending limit available to participants. Current IBAs are based on age grouping and, for those between 18 – 21 years, whether they use IHLS. Participants develop service and support plans (SSPs) within their IBA based on their needs and preferences. Participants may access funds above these limits if certain criteria are met (such as a medical justification).

As payment rates increase, IBA caps should be increased to ensure that participants can continue to access the same level of support. Once the state determines what payment rates to adjust, commensurate changes should be made to the IBAs.

Refresh Rate Model Assumptions Between Biennial Rate Studies

Providers’ costs increase over time so payment rates should be regularly revised to ensure payments continue to cover the cost of service delivery. 28-16A-16 NMSA requires DDSD to conduct a biennial rate study, which is more frequent than in most states. This requirement ensures regular evaluation of providers’ costs, but these costs still change in the intervening years.

Between biennial cost studies, the state should a rate ‘refresh’ that utilizes the final proposed rate model structures and revises key cost assumptions based on new data, such as wage and wage inflation data, health insurance cost information, the standard Internal Revenue Service mileage rate, workers’ compensation rates, and state unemployment insurance tax rates. Each of these sources releases updated data on an annual or more frequent basis, allowing for the new data to be substituted into the rate models as it becomes available.

Service Quality and Reimbursement

Services offered through DDSD’s waivers are critical in supporting the health, safety, and quality of life of waiver participants. Provider rates must be sufficient to support individual outcomes and provider compliance with state and federal requirements. Providers need robust internal quality management

systems to deliver high quality services that meet the needs and goals of participants. The final proposed rates include additional program support and administrative funding to support these efforts at the provider level.

In recent years, HCBS waiver systems nationally have adopted a broader view of quality, encompassing individual satisfaction and outcomes.

In July 2022, the federal Centers for Medicare and Medicaid Services (CMS) introduced the HCBS quality measure set developed in collaboration with states, advocates, and national experts. The resulting measures focus on service access, rebalancing efforts and community integration. In May 2024, the final Ensuring Access to Medicaid Services rule included a requirement that states adopt the HCBS measure set, with initial reporting to begin in July 2028, and continue every three years thereafter.

In November 2024, a New Mexico Legislative Finance Committee Progress Report evaluated the DD and Mi Via Waiver programs. Key quality improvement findings of the report indicate that DDS has improved its processes for identifying and responding to abuse and neglect, but gaps remain in monitoring participant outcomes and quality of life.²³ The report recommends DDS participate in the National Core Indicators survey for individuals with developmental disabilities (NCI-IDDD), which includes surveys of adults receiving HCBS as well as family members of adults and children receiving services. The NCI-IDDD provides an overall view of the experience of individuals in a participating state, as well as national comparisons across all participating states. The report also recommended that DDS work with the Legislative Finance Committee to create performance measures for client outcomes, quality of life, and provider quality.²⁴

As DDS considers development and implementation of satisfaction and individual experience measures, the state may want to consider future development and implementation of other value-based payment approaches for key outcomes. Examples that have been implemented in other states include:

- **Pay for reporting** incentivizes providers to participate in data collection that may be above what is normally required for contracting and other compliance reporting. For example, Missouri utilizes a pay for reporting strategy to collect quarterly participant-level employment data that may be used to monitor the efficacy of employment services and to inform future improvements.
- **Enhanced payments for higher qualified staff** create incentives for providers to support higher levels of training and certification for direct care workers. Workers who complete a prescribed training program (which may be through a national organization like the National Alliance of Direct Support Professionals or through state-developed training curricula). In California, the State Legislature included funding in the state’s fiscal year 2021–22 budget for a “direct support professional university” to develop and implement a previous rate study proposal that would pay a higher rate for DSPs who had completed different levels of training.

²³ New Mexico Legislative Finance Committee. (November 2024). Progress Report – Developmental Disabilities and Mi Via Waivers. Retrieved from <https://www.nmlegis.gov/handouts/ALFC%20111824%20Item%203%20DD%20and%20Mi%20Via%20Progress%20Report.pdf>.

²⁴ Ibid.

- **Outcome based payments** provide financial incentives based on a measurable participant outcome, such as employment outcomes. Employment outcomes may include multiple possible metrics, such as hours of support, hours worked per week, increased benefits, increased wages, reduced reliance on CCS or other paid supports, and similar measurable outcomes. For example, Oregon’s job coaching rates reimburse providers based on the number of hours a participant works rather than the number of support hours provided, which encourages providers to maximize participants’ work hours and to fade unnecessary supports. An analysis of the results of this payment approach found an increase in the number of individuals receiving services, increases in worked hours over time, and successful fading of supports. provider is less.

Introduction of the HCBS Quality Measure Set, adopting recommendations from the Legislative Finance Committee, and continued engagement with the ACQ offer opportunities to enhance DDSD’s quality management structures by adopting measures, benchmarks and identifying key data sources to assess people’s experiences and individual outcomes. Tracking these measures over time can provide important longitudinal data to track performance against any stated goals. Future rate studies should consider options for value-based payments tied to DDSD’s strategic policy and quality-related goals.

Addressing Federal Access to Medicaid Services Rule

CMS’ 2024 *Ensuring Access to Medicaid Services* rule includes expansive language designed to strengthen and improve access to HCBS.²⁵ A particular focus of the rule is a payment adequacy provision that requires providers to direct at least 80 percent of their Medicaid payments to direct care worker compensation for certain services, including homemaker, home health aide, and personal care services (referred to as the ‘80/20 rule’).

Subsequent federal guidance will be required to determine the services to which the 80/20 will apply and how costs will be categorized. In the absence of this guidance, the rate study did not include specific assumptions in response to the rule.

Once CMS provides the necessary clarifications, DDSD can utilize the rate models established as part of the rate study to re-evaluate rates. Although the 80/20 rule applies to providers rather than states, DDSD can support provider compliance by ensuring underlying rate models reflect the requirements of the rule. For example, the administrative and program support costs included in these rate models could be reduced to 20 percent of the overall rate with no changes to the direct care components of the rate. However, this would constitute a decrease in revenues providers rely upon to invest in their administrative and program support staff, training, quality assurance, and other indirect care expenses that are vital to operations and services. Therefore, it is instead advised that the administrative and program support costs remain fixed, while the direct care staff components of the rate model (wages and benefits) are increased.

²⁵ Centers for Medicare & Medicaid Services. (April 22, 2024). *Ensuring Access to Medicaid Services Final Rule* (CMS-2442-F). Retrieved from <https://www.cms.gov/newsroom/fact-sheets/ensuring-access-medicare-services-final-rule-cms-2442-f>.

Attachment 1 - Final Proposed Rate Models

Home and Community Based Services Rate Study

Final Proposed Rate Models

- prepared for -

New Mexico Health Care Authority
Developmental Disabilities Supports Division

- prepared by -

Burns & Associates, a Division of Health Management Associates
www.healthmanagement.com/about/burns-associates/

January 22, 2026

**Home and Community Based Services Rate Study
Final Proposed Rate Models
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division**

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**Home and Community Based Services Rate Study
Final Proposed Rate Models
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division**

Comparison of Current Published Rates to Proposed Rates - Developmental Disabilities Waiver

Service	Unit	Current	Proposed*	Notes
Case Management-DDW	Month	\$370.80	\$381.80	
Case Management-Pre-Eligibility	Month	\$143.00	\$152.72	Pre-Eligibility rate set at 40 percent of Ongoing rate
Supported Living				
Category 1-Basic	Day	\$221.54	\$312.16	
Category 2-Moderate	Day	\$272.45	\$357.54	Rate continues to be based on a 340-day billing year
Category 3-Extensive	Day	\$357.13	\$443.54	
Category 4-Medical and Behav.	Day	\$463.59	\$529.55	
Intensive Medical Living Services	Day	\$492.90	\$668.16	Rate continues to be based on a 340-day billing year
Non-Ambulatory Stipend	Day	\$65.22	\$124.61	
Family Living	Day	\$191.71	\$203.23	Proposed rate unbundles substitute care, which would be separately billed as Respite; rate continues to be based on a 340-day billing year
Customized In-Home Supports				
Living with Family or Natural Supports	15 min.	\$8.42	\$11.95	
Living Independently	15 min.	\$8.42	\$11.95	
Respite-Individual	15 min.	\$7.46	\$10.96	
Respite-Group	15 min.	\$3.45	\$5.40	
Customized Community Support-Individual	15 min.	\$12.22	\$12.30	
Customized Community Support-Group				
Category 1-Basic	15 min.	\$2.96	\$4.70	
Category 2-Extensive Support	15 min.	\$6.75	\$6.93	
Community-Small Group	15 min.	\$6.03	\$7.73	
Community Integrated Employment				
Job Development	15 min.	\$12.07	\$18.58	
Job Coaching	15 min.	\$12.07	\$14.83	
Job Maintenance	Month	\$1,363.11	\$1,304.82	
Intensive	Hour	\$59.42	\$59.31	
Self-Employment	15 min.	\$16.11	\$14.83	
Group Category 1	15 min.	\$2.34	\$4.50	
Group Category 2-Extensive Support	15 min.	\$3.89	\$6.83	
Crisis Support-Alternative Residence	Day	\$490.25	\$936.83	
Crisis Support-Individual's Residence	15 min.	\$10.22	\$12.65	

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Comparison of Current Published Rates to Proposed Rates - Developmental Disabilities Waiver

Service	Unit	Current	Proposed*	Notes
Behavior Support Consultation-Standard	15 min.	\$31.08	\$31.72	
Behavior Support Consultation-Incentive	15 min.	\$40.09	\$44.69	
Occupational Therapy-Standard	15 min.	\$40.83	\$41.07	
Occupational Therapy-Incentive	15 min.	\$52.07	\$56.82	
Occupational Therapy Assistant-Standard	15 min.	\$27.05	\$27.34	
Occupational Therapy Assistant-Incentive	15 min.	\$35.49	\$37.07	
Physical Therapist-Standard	15 min.	\$49.66	\$41.07	
Physical Therapist-Incentive	15 min.	\$63.33	\$56.82	
Physical Therapist Assistant-Standard	15 min.	\$27.80	\$27.34	
Physical Therapist Assistant-Incentive	15 min.	\$36.47	\$37.07	
Speech Therapist-Standard	15 min.	\$48.93	\$41.07	A single rate is proposed rather than rates that vary by standard and incentive
Speech Therapist-Incentive	15 min.	\$62.39	\$56.82	
Adult Nursing Services-Registered Nurse	15 min.	\$29.76	\$26.42	
Adult Nursing Services-Lic. Practical Nurse	15 min.	\$19.92	\$20.36	
Nutrition Counseling	15 min.	\$22.22	\$20.95	
Prelim. Risk Screening/ Consult.-Standard	15 min.	\$28.37	\$31.89	
Prelim. Risk Screening/ Consult.-Incentive	15 min.	\$36.35	\$45.02	
Social./Sexuality Education-Standard	Series	\$536.88	\$529.68	
Social./Sexuality Education-Incentive	Series	\$1,073.76	\$716.28	

**Home and Community Based Services Rate Study
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Comparison of Current Published Rates to Proposed Rates - Developmental Disabilities Waiver

Service	Unit	Current	Proposed*	Notes
Non-Medical Transportation (per mile)	Mile	\$0.66	\$0.725	Proposed rate reflects IRS' 2025 standard mileage rate
Cost-Based Services				
Environmental Modifications	Each	\$1.00	\$1.00	Current limit of \$5,000 per 5-year period is proposed to increase to \$25,000 per 5-year period.
Independent Living Transition	Each	\$1.00	\$1.00	Current lifetime limit of \$1,500 is proposed to increase to \$2,500 per lifetime.
Assistive Technology	Each	\$1.00	\$1.00	Current limit of \$500 per year is proposed to increase to \$5,000 per year
Personal Support Technology	Each	\$1.00	\$1.00	Current limit of \$5,000 per year is not proposed to change.
Fiscal Mgt. of Adult Ed. Opportunities	Each	\$1.00	\$1.00	Current limit of \$550 per year is proposed to increase to \$750 per year.
Non-Medical Transportation- (Mileage/ Pass or tickets)	Annual	\$850/ \$450	\$1,000.00	Current annual maximum for mileage (\$850) and pass/ tickets (\$450) proposed to be combined into a single annual limit of \$1,000.

* Although some proposed rates are less than current rates, DDSD does not intend to implement any reduced rates.

**Home and Community Based Services Rate Study
Final Proposed Rate Models
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division**

Comparison of Current to Proposed Rates - Medically Fragile Waiver

Service	Unit	Current	Proposed*	Notes
Case Management-MFW	Month	\$668.03	\$693.59	
Case Management-Pre-Assessment	Assmnt	\$106.08	\$108.09	
Case Management-Assessment	Month	\$143.00	\$529.68	Assessment rate set at 25 percent of Ongoing rate
Custom. Comm. Support-Group	15 min.	\$5.93	\$7.73	
Home Health Aide	Hour	\$45.23	\$50.02	
Respite				
Home Health Aide	Hour	\$45.23	\$50.02	
Registered Nurse	15 min.	\$29.76	\$26.42	
Licensed Practical Nurse	15 min.	\$19.92	\$20.36	
Facility	Day	\$492.90	\$493.28	
Behavior Support Consultation-Standard	15 min.	\$25.66	\$31.72	
Behavior Support Consultation-Incentive	15 min.	N/A	\$44.69	Incentive rates proposed (equal to DD Waiver incentive rate proposals)
Occupational Therapy-Standard	15 min.	\$40.83	\$41.07	
Occupational Therapy-Incentive	15 min.	N/A	\$56.82	Incentive rates proposed (equal to DD Waiver incentive rate proposals)
Occupational Therapy Assistant-Standard	15 min.	\$27.05	\$27.34	
Occupational Therapy Assistant-Incentive	15 min.	N/A	\$37.07	Incentive rates proposed (equal to DD Waiver incentive rate proposals)
Physical Therapist-Standard	15 min.	\$49.66	\$41.07	
Physical Therapist-Incentive	15 min.	N/A	\$56.82	Incentive rates proposed (equal to DD Waiver incentive rate proposals)
Physical Therapist Assistant-Standard	15 min.	\$27.80	\$27.34	
Physical Therapist Assistant-Incentive	15 min.	N/A	\$37.07	Incentive rates proposed (equal to DD Waiver incentive rate proposals)
Speech Therapy-Standard	15 min.	\$48.93	\$41.07	
Speech Therapy-Incentive	15 min.	N/A	\$56.82	Incentive rates proposed (equal to DD Waiver incentive rate proposals)
Private Duty Nursing-Registered Nurse	15 min.	\$29.76	\$26.42	
Private Duty Nursing-Licensed Practical Nurse	15 min.	\$19.92	\$20.36	
Nutrition Counseling	Hour	\$88.89	\$83.80	
Specialized Therapies				Under the rate proposal, all Specialized Therapies available on the Mi Via Waiver would be available on the MF Waiver.
Massage Therapy	15 min.	\$105.32 (session)	\$26.33	Proposed rate is one quarter of existing rate.
Music Therapy	15 min.	-	\$37.50	New service proposed for Medically Fragile Waiver.

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Comparison of Current to Proposed Rates - Medically Fragile Waiver

Service	Unit	Current	Proposed*	Notes
Cost-Based Services				
Environmental Modifications	Each	\$1.00	\$1.00	Current limit of \$5,000 per 5-year period is proposed to increase to \$25,000 per 5-year period.
Individual Directed Goods and Services	Each	\$1.00	\$1.00	Current limit of \$2,000 per year is not proposed to change.
Specialized Medical Equipment	Each	\$1.00	\$1.00	Current limit of \$1,200 per year is proposed to increase to \$3,500 per year.
SME and ID&G Fiscal Agent	Each	\$1.00	\$1.00	Current limit of \$120 per item per year is proposed to change to 15% of SME or ID&G costs.
Vehicle Modifications	Each	\$1.00	\$1.00	Current limit of \$5,000 per 5-year period is proposed to increase to \$20,000 per 5-year period.

* Although some proposed rates are less than current rates, DDSDD does not intend to implement any reduced rates.

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Comparison of Current to Proposed Rates (Mi Via Waiver)

Service	Unit	Current	Proposed*	Notes
Consultants Services - On-Going	Month	\$406.68	\$305.44	
Consultant Services - Pre-Eligibility	Month	\$150.61	\$122.18	Pre-Eligibility rate set at 40 percent of On-Going rate.
Personal Plan Facilitation	Year	\$105 - \$685 ea.	\$105 - \$685 ea.	No changes proposed to current rate range.
In-Home Living Supports	Day	\$26.33 - 191.48	\$25.01 - \$189.31	
Home Health Aide	Hour	\$17.19	\$50.02	
Homemaker/Direct Support	Hour	\$7.90 - \$15.38	\$12.00 - \$25.01	
Respite				
Standard	15 min.	\$7.94	\$10.96	
Registered Nurse	15 min.	\$11.48	\$26.42	
Licensed Practical Nurse	15 min.	\$7.15	\$20.36	
Community Supports				
Community Direct Support	15 min.	\$11.15 - \$16.30	\$3.00 - \$6.25	
Customized Community Group Supports	15 min.	\$2.69 - \$9.29	\$4.69 - \$7.70	
Employment				
Job Development	15 min.	\$105 - \$737 (ea.)	\$7.37 - \$9.14	Proposed change to unit type from 'each' to a 15-minute unit to align with Job Development on the DD Waiver.
Employment Supports (includes Job Coach)	15 min.	\$2.26 - \$7.30	\$6.30 - \$7.97	
Behavior Support Consultation-Standard	15 min.	\$22.04 - \$31.10	\$9.40 - \$31.72	
Behavior Support Consultation-Incentive	15 min.	\$31.52 - \$40.09	\$9.40 - \$44.69	
Occupational Therapy-Standard	15 min.	\$13.42 - \$40.70	\$14.18 - \$41.07	
Occupational Therapy-Incentive	15 min.	\$13.42 - \$52.07	\$14.18 - \$56.82	
Occupational Therapy Assistant-Standard	15 min.		\$9.44 - \$27.34	New proposed service to align with availability on other waivers
Occupational Therapy Assistant-Incentive	15 min.		\$9.44 - \$37.07	
Physical Therapy-Standard	15 min.	\$14.22 - \$49.74	\$14.18 - \$41.07	
Physical Therapy-Incentive	15 min.	\$14.22 - \$63.33	\$14.18 - \$56.82	
Physical Therapy Assistant-Standard	15 min.		\$9.44 - \$27.34	New proposed service to align with availability on other waivers
Physical Therapy Assistant-Incentive	15 min.		\$9.44 - \$37.07	

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Comparison of Current to Proposed Rates (Mi Via Waiver)

Service	Unit	Current	Proposed*	Notes
Speech Therapist-Standard	15 min.	\$16.91 - \$48.72	\$14.18 - \$41.07	
Speech Therapist-Incentive	15 min.	\$16.91 - \$62.39	\$14.18 - \$56.82	
Private Duty Nursing, Registered Nurse	15 min.	\$11.48	\$26.42	
Private Duty Nursing, Lic. Practical Nurse	15 min.	\$7.15	\$20.36	
Nutrition Counseling	Hour	\$45.11	\$83.80	
Transportation Time	Hour	\$12.00 - \$15.38	\$12.00 - \$25.01	
Transportation (per mile)	Mile	\$0.66	\$0.725	Proposed rate reflects IRS' 2025 standard mileage rate
Specialized Therapies				
Acupuncture	15 min.	\$13.17 - \$26.33	\$37.50	
Biofeedback	15 min.	\$52.66 - \$105.32 (visit)	\$75.00	Proposed change from a 'visit' unit type to a 15-minute unit.
Chiropractic	15 min.	\$52.66 - \$105.32 (visit)	\$37.50	Proposed change from a 'visit' unit type to a 15-minute unit.
Cognitive Rehab	15 min.	\$13.17 - \$26.33	\$56.25	
Hippotherapy	15 min.	\$52.66 - \$105.32 (visit)	\$26.33	Proposed change from a 'visit' unit type to a 15-minute unit.
Massage Therapy	15 min.	\$13.17 - \$26.33	\$26.33	Proposed rate is one quarter of existing rate.
Naprapathy	15 min.	\$52.66 - \$105.32 (visit)	\$31.25	Proposed rate is one quarter of existing rate. Proposed change from a 'visit' unit type to a 15-minute unit.
Play Therapy	15 min.	\$13.17 - \$26.33	\$37.50	
Cost-Based Services				
Environmental Modifications	Each	\$1.00	\$1.00	Current limit of \$5,000 per 5-year period is proposed to increase to \$25,000 per 5-year period.
Individual Directed Goods and Services	Each	\$1.00	\$1.00	Propose establishment of a \$2,000 annual spending limit.
Specialized Medical Equipment	Each	\$1.00	\$1.00	New proposed service to align with availability on other waivers. Proposed limit of \$3,500 per year.
SME and ID&G Fiscal Agent	Each	\$1.00	\$1.00	New proposed service to align with availability on other waivers. Proposed limit of 15% of SME or ID&G costs.
Vehicle Modifications	Each	\$1.00	\$1.00	New proposed service to align with availability on other waivers. Proposed limit of \$20,000 per 5-year period.

* Although some proposed rates are less than current rates, DDSD does not intend to implement any reduced rates.

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Case Management Ongoing (Developmental Disabilities Waiver)

	Unit of Service	Month
Case- load	Number of Cases per Case Manager	24
Case Mgr. Wages and Benefits	- Case Manager Hourly Wage	\$26.77
	- Employee Benefit Rate (as a percent of wages)	26.9%
	Hourly Staff Cost	\$33.97
	Staff Cost per Month	\$5,888.13
	Monthly Staff Cost per Member	\$245.34
Office Space	- Square Feet of Office Space	100
	- Cost per Square Foot	\$22.00
	Annual Cost of Office Space	\$2,200.00
	Facility Cost per Month	\$183.33
	Monthly Facility Cost per Member	\$7.64
Mileage	- Number of Miles Traveled per Month	900
	- Amount per Mile	\$0.725
	Mileage Cost per Month	\$652.50
	Monthly Mileage Cost per Member	\$27.19
Admin. and Program Support	Monthly Cost Before Admin. and Program Support	\$280.17
	- Program Support Cost per Day	\$35.00
	Program Support Cost per Month	\$1,064.58
	Monthly Program Support Cost per Member	\$44.36
	- Administration Percent	15.0%
	Monthly Administration Cost per Member	\$57.27
	Rate per Month	\$381.80

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Supported Living

		Category 1 Basic	Category 2 Moderate	Category 3 Extensive	Category 4 Med/Beh	
Unit of Service		Day	Day	Day	Day	
Direct Support Staff Wages and Benefits	- Direct Support Staff Hourly Wage	\$18.92	\$18.92	\$18.92	\$18.92	
	- Employee Benefit Rate (as a percent of wages)	33.8%	33.8%	33.8%	33.8%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$25.31	\$25.31	\$25.31	\$25.31	
	<i>Productivity Assumptions</i>					
	Total Hours	40.00	40.00	40.00	40.00	
	- Supervision and Other Employer Time	0.66	0.66	0.66	0.66	
	- Training	0.96	0.96	0.96	0.96	
	- Paid Time Off	3.85	3.85	3.85	3.85	
	"Billable" Hours	34.53	34.53	34.53	34.53	
	Productivity Adjustment	1.16	1.16	1.16	1.16	
	Staff Cost per Billable Hour	\$29.36	\$29.36	\$29.36	\$29.36	
	<i>Staffing (assuming an average of 3.5 members per home)</i>					
	- Staff Hours per Home per Week	167.00	191.50	240.50	289.50	
	Allocated Staff Hours per Member per Week	47.71	54.71	68.71	82.71	
	Weekly Staff Cost per Member	\$1,400.77	\$1,606.29	\$2,017.33	\$2,428.37	
Mileage	- Number of Miles per Week per Residence	250	250	250	250	
	Allocated Miles per Member per Week	83.3	83.3	83.3	83.3	
	- Amount per Mile	\$0.725	\$0.725	\$0.725	\$0.725	
	Weekly Mileage Cost per Member	\$60.39	\$60.39	\$60.39	\$60.39	
Nursing Supports	- Nursing Support Staff Hourly Wage	\$47.71	\$47.71	\$47.71	\$47.71	
	- Nursing Support Staff Benefit Rate	19.6%	19.6%	19.6%	19.6%	
	- Hours per Year per Member	18.0	60.0	120.0	180.0	
	Annual Cost of Nursing Supports	\$1,027.10	\$3,423.67	\$6,847.34	\$10,271.01	
Weekly Cost of Nursing Supports per Member	\$19.70	\$65.66	\$131.32	\$196.98		
Nutritional Counseling	- Nutritional Counselor Hourly Wage	\$36.42	\$36.42	\$36.42	\$36.42	
	- Nutritional Counselor Benefit Rate	22.5%	22.5%	22.5%	22.5%	
	- Hours per Year per Member	5.0	5.0	5.0	5.0	
	Annual Cost of Nutritional Counseling	\$223.07	\$223.07	\$223.07	\$223.07	
Weekly Cost of Nutritional Counseling per Member	\$4.28	\$4.28	\$4.28	\$4.28		
Admin. and Program Support	Weekly Cost per Member Before Admin. and Program Support	\$1,485.14	\$1,736.62	\$2,213.32	\$2,690.02	
	- Program Support Cost per Day per Member	\$35.00	\$35.00	\$35.00	\$35.00	
	Weekly Program Support Cost per Member	\$245.00	\$245.00	\$245.00	\$245.00	
	- Administration Percent	15.0%	15.0%	15.0%	15.0%	
Weekly Administrative Cost per Member	\$305.32	\$349.70	\$433.82	\$517.94		
Total Cost per Member per Week		\$2,035.46	\$2,331.32	\$2,892.14	\$3,452.96	
Total Cost per Day at 365 Days per Year		\$290.78	\$333.05	\$413.16	\$493.28	
Rate per Day at 340 Days Per Year		\$312.16	\$357.54	\$443.54	\$529.55	

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Intensive Medical Living Services

	Unit of Service	Day	
Direct Support Staff Wages and Benefits	- Direct Support Staff Hourly Wage	\$18.92	
	- Employee Benefit Rate (as a percent of wages)	33.8%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$25.31	
	<i>Productivity Assumptions</i>		
	Total Hours	40.00	
	- Supervision and Other Employer Time	0.66	
	- Training	0.96	
	- Paid Time Off	3.85	
	"Billable" Hours	34.53	
	Productivity Adjustment	1.16	
	Staff Cost per Billable Hour	\$29.36	
	<i>Staffing (assuming an average of 3.5 members per home)</i>		
	- Staff Hours per Residence per Week	336.00	
	Allocated Staff Hours per Member per Week	96.00	
Weekly Staff Cost per Member	\$2,818.56		
Mileage	- Number of Miles per Week per Residence	250	
	Allocated Miles per Member per Week	83.3	
	- Amount per Mile	\$0.725	
	Weekly Mileage Cost per Member	\$60.39	
Nursing Supports	- Nursing Support Staff Hourly Wage	\$47.71	
	- Nursing Support Staff Benefit Rate	19.6%	
	- Hours per Year per Member	520.0	
	Annual Cost of Nursing Supports	\$29,671.80	
Weekly Cost of Nursing Supports per Member	\$569.05		
Nutritional Counseling	- Nutritional Counselor Hourly Wage	\$36.42	
	- Nutritional Counselor Benefit Rate	22.5%	
	- Hours per Year per Member	12.0	
	Annual Cost of Nutritional Counseling	\$535.37	
Weekly Cost of Nutritional Counseling per Member	\$10.27		
Admin. and Program Support	Weekly Cost per Member Before Admin. and Program Support	\$3,458.27	
	- Program Support Cost per Day per Member	\$35.00	
	Weekly Program Support Cost per Member	\$245.00	
	- Administration Percent	15.0%	
Weekly Administrative Cost per Member	\$653.52		
	Total Cost per Member per Week	\$4,356.79	
	Total Cost per Day at 365 Days per Year	\$622.40	
	Rate per Day at 340 Days Per Year	\$668.16	

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Supported Living Non-Ambulatory Stipend

	Unit of Service	Day
Direct Support Staff Wages and Benefits	- Direct Support Staff Hourly Wage (state minimum wage)	\$12.00
	- Employee Benefit Rate (payroll taxes only; as a % of wages)	10.3%
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$13.24
	Hours per Day	8.00
	Staff Cost per Day	\$105.92
Admin. and Program Support	Cost per Day Before Admin. and Program Support	\$105.92
	- Program Support Cost	\$0.00
	Program Support Cost per Billable Hour	\$0.00
	- Administration Percent	15.0%
	Administrative Cost per Billable Hour	\$18.69
	Rate per Day	\$124.61

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Family Living

	Unit of Service	Day
Recruitment	- No. of Home Recruitments per Full-Time Recruiter per Year	24
	- Recruiter Hourly Wage	\$26.77
	- Employee Benefit Rate (as % of wages)	26.9%
	Annual Recruiter Cost (wages + benefits)	\$70,659.95
	Recruiter Cost per Home Recruitment	\$2,944.16
	- Number of Miles Traveled per Recruiter per Year	2,600
	- Amount per Mile	\$0.725
	Recruiter Mileage Cost per Home Recruitment	\$78.54
	- Average Number of Years that a Home Provides Care	8
	Amortized Annual Recruitment Cost per Home	\$377.84
Training	- Number of Homes (Members) per Full-Time Trainer	50
	- Trainer Hourly Wage	\$26.77
	- Employee Benefit Rate (as a percent of wages)	26.9%
	Annual Trainer Cost (wages + benefits)	\$70,659.95
	Annual Trainer Cost per Member	\$1,413.20
	- Number of Miles Traveled per Trainer per Year	2,600
	- Amount per Mile	\$0.725
	Annual Trainer Mileage Cost per Member	\$37.70
Annual Home Training Cost per Member	\$1,450.90	
Home Supervision	- Home Supervisor Caseload	16
	- Direct Staff Hourly Wage	\$26.77
	- Employee Benefit Rate (as a percent of wages)	26.9%
	Annual Home Supervisor Cost (wages + benefits)	\$70,659.95
	Annual Home Supervisor Cost per Member	\$4,416.25
	- Number of Miles Traveled per Home Supervisor per Year	10,800
	- Amount per Mile	\$0.725
	Annual Home Supervisor Mileage Cost per Member	\$489.38
Annual Home Supervisor Cost per Member	\$4,905.63	
Nutritional Counseling	- Nutritional Counselor Hourly Wage	\$36.42
	- Nutritional Counselor Benefit Rate	22.5%
	- Hours per Year per Member	5.0
	Annual Cost of Nutritional Counseling	\$223.07
Home Pay.	- Monthly Payment to Family Living Provider	\$3,250.00
	Annual Family Living Provider Payment	\$39,000.00
Admin. and Program Support	Annual Cost Before Admin. and Program Support	\$45,957.44
	- Program Support Cost per Day	\$35.00
	Annual Program Support Cost per Member	\$12,775.00
	- Administration Percent	15.0%
	Annual Administrative Cost per Member	\$10,364.55
	Total Annual Cost per Member	\$69,096.99
	Total Cost per Day	\$189.31
	Rate per Day at 340 Days Per Year	\$203.23

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**Customized In-Home Supports
(Living with Family or Natural Supports / Living Independently)**

	Unit of Service	15 Minute
Direct Support Staff Wages and Benefits	- Direct Support Staff Hourly Wage	\$18.92
	- Employee Benefit Rate (as a percent of wages)	33.8%
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$25.31
	<i>Productivity Assumptions</i>	
	Total Hours	40.00
	- Travel Time	2.64
	- Missed Appointments	0.22
	- Progress Notes/ Medical Records	0.66
	- Supervision and Other Employer Time	0.66
	- Training	0.96
	- Paid Time Off	3.85
"Billable" Hours	31.01	
Productivity Adjustment	1.29	
	Staff Cost After Productivity Adjustment	\$32.65
Mileage	- Number of Miles Traveled per Week	100
	- Amount per Mile	\$0.725
	Weekly Mileage Cost	\$72.50
	Mileage Cost per Billable Staff Hour	\$2.34
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$34.99
	- Daily Program Support Cost	\$35.00
	Program Support Cost per Billable Staff Hour	\$5.64
	- Administration Percent	15.0%
	Administrative Cost per Billable Staff Hour	\$7.17
	Total Base Cost per Billable Staff Hour	\$47.80
	Rate per 15 Minutes	\$11.95

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Respite

		Individual	Group	
	Unit of Service	15 Minute	15 Minute	
Direct Support Staff Wages and Benefits	- Direct Support Staff Hourly Wage	\$18.92	\$18.92	
	- Employee Benefit Rate (as a percent of wages)	33.8%	33.8%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$25.31	\$25.31	
	<i>Productivity Assumptions</i>			
	Total Hours	40.00	40.00	
	- Travel Time	1.10	1.10	
	- Progress Notes/ Medical Records	0.44	0.88	
	- Supervision and Other Employer Time	0.66	0.66	
	- Training	0.96	0.96	
	- Paid Time Off	3.85	3.85	
	"Billable" Hours	32.99	32.55	
Productivity Adjustment	1.21	1.23		
	Staff Cost After Productivity Adjustment	\$30.63	\$31.13	
Mileage	- Number of Miles Traveled per Week	60	60	
	- Amount per Mile	\$0.725	\$0.725	
	Weekly Mileage Cost	\$43.50	\$43.50	
	Mileage Cost per Billable Hour	\$1.32	\$1.34	
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$31.95	\$32.47	
	- Daily Program Support Cost	\$35.00	\$87.50	
	Program Support Cost per Billable Staff Hour	\$5.30	\$13.44	
	- Administration Percent	15.0%	15.0%	
	Administrative Cost per Billable Staff Hour	\$6.57	\$8.10	
	Total Cost per Billable Staff Hour	\$43.82	\$54.01	
	- Assumed Group Size	1.00	2.50	
	Rate per Member per 15 Minutes	\$10.96	\$5.40	

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Customized Community Support-Individual

	Unit of Service	15 Minute
Direct Support Staff Wages and Benefits	- Direct Support Staff Hourly Wage	\$18.92
	- Employee Benefit Rate (as a percent of wages)	33.8%
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$25.31
	<i>Productivity Assumptions</i>	
	Total Hours	40.00
	- Travel Time	2.64
	- Missed Appointments	0.22
	- Progress Notes/ Medical Records	0.66
	- Supervision and Other Employer Time	0.66
	- Training	0.96
- Paid Time Off	3.85	
"Billable" Hours	31.01	
Productivity Adjustment	1.29	
	Staff Cost per Billable Hour	\$32.65
Mileage	- Number of Miles Traveled per Week	150
	- Amount per Mile	\$0.725
	Weekly Mileage Cost	\$108.75
	Mileage Cost per Billable Staff Hour	\$3.51
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$36.16
	- Daily Program Support Cost	\$35.00
	Program Support Cost per Billable Staff Hour	\$5.64
	- Administration Percent	15.0%
	Administrative Cost per Billable Staff Hour	\$7.38
	Total Cost per Billable Staff Hour	\$49.18
	Rate per 15 Minutes	\$12.30

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Customized Community Supports-Group

		Category 1	Category 2	Small Group	
Unit of Service		15 Minute	15 Minute	15 Minute	
Direct Support Staff Wages and Benefits	- Direct Support Staff Hourly Wage	\$18.92	\$18.92	\$18.92	
	- Employee Benefit Rate (as a percent of wages)	33.8%	33.8%	33.8%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$25.31	\$25.31	\$25.31	
	<i>Productivity Assumptions</i>				
	Total Hours	40.00	40.00	40.00	
	- Program Set-Up/ Clean-Up	1.10	1.10	1.10	
	- Progress Notes/ Medical Records	1.76	1.32	1.10	
	- Supervision and Other Employer Time	0.66	0.66	0.66	
	- Training	0.96	0.96	0.96	
	- Paid Time Off	3.85	3.85	3.85	
	"Billable" Hours	31.67	32.11	32.33	
	Productivity Adjustment	1.26	1.25	1.24	
	Staff Cost per Billable Hour	\$31.89	\$31.64	\$31.38	
	<i>Staffing Ratio</i>				
	- Range of Group Sizes (DSP : Members)	1:5 - 1:6	1:2 - 1:4	1:2 - 1:3	
Average Group Size (DSP : Members)	5.50	3.00	2.50		
- Member Attendance Rate	85%	85%	85%		
Adjusted Average Number of Members per Staff	4.68	2.55	2.13		
Staff Cost per Member per Billable Hour		\$6.81	\$12.41	\$14.73	
Attendance	- Days per Year of Program Operations	250.0	250	250	
	- Days per Year of Member Attendance	212.5	212.5	212.5	
	- Hours per Day of Member Attendance	6.00	6.00	6.00	
	Hours per Year of Member Attendance	1,275	1,275	1,275	
Mileage	- Number of Miles Traveled per Group per Week	200	200	200	
	Allocated Miles per Member per Week	36.4	66.7	80.0	
	- Amount per Mile	\$0.725	\$0.725	\$0.725	
	Annual Mileage Cost per Member (at 250 days of operation)	\$1,372.28	\$2,514.59	\$3,016.00	
Mileage Cost per Member per Attendance Hour		\$1.08	\$1.97	\$2.37	
Facility	-Square Feet of Service Space per Member	100	100	100	
	- Cost per Square Foot	\$22.00	\$22.00	\$22.00	
	Annual Facility Cost per Member	\$2,200.00	\$2,200.00	\$2,200.00	
Facility Cost per Member per Attendance Hour		\$1.73	\$1.73	\$1.73	
Nursing Support	- Nursing Support Staff Hourly Wage	\$47.71	\$47.71	\$47.71	
	- Nursing Support Staff Benefit Rate	19.6%	19.6%	19.6%	
	- Annual Hours of Nursing Support	12	36	36	
	Annual Nursing Support Cost per Member	\$684.73	\$2,054.20	\$2,054.20	
Nursing Support Cost per Member per Attendance Hour		\$0.54	\$1.61	\$1.61	
Admin. and Program Support	Cost per Member per Hour Before Admin. and Program Support	\$10.16	\$17.72	\$20.44	
	- Daily Program Support Cost per Member	\$35.00	\$35.00	\$35.00	
	Program Support Cost per Member per Billable Hour	\$5.83	\$5.83	\$5.83	
	- Administration Percent	15.0%	15.0%	15.0%	
Administrative Cost per Member Billable Hour		\$2.82	\$4.16	\$4.64	
Total Cost per Member per Billable Hour		\$18.81	\$27.71	\$30.91	
Rate per Member per 15 Minutes		\$4.70	\$6.93	\$7.73	

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Community Integrated Employment-Job Development

	Unit of Service	15 Minute	
Job Developer Wages and Benefits	- Job Developer Hourly Wage	\$29.46	
	- Employee Benefit Rate (as a percent of wages)	25.4%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$36.94	
	<i>Productivity Assumptions</i>		
	Total Hours	40.00	
	- Travel Time	1.76	
	- Missed Appointments	0.22	
	- Program Development	4.40	
	- Progress Notes/ Medical Records	1.32	
	- Supervision and Other Employer Time	0.66	
	- Training	0.96	
	- Paid Time Off	3.85	
	"Billable" Hours	26.83	
	Productivity Adjustment	1.49	
Staff Cost per Billable Hour		\$55.04	
Mileage	- Number of Miles Traveled per Week	60	
	- Amount per Mile	\$0.725	
	Weekly Mileage Cost	\$43.50	
	Mileage Cost per Billable Staff Hour	\$1.62	
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$56.66	
	- Daily Program Support Cost	\$35.00	
	Program Support Cost per Billable Staff Hour	\$6.52	
	- Administration Percent	15.0%	
	Administrative Cost per Billable Staff Hour	\$11.15	
Total Cost per Billable Staff Hour		\$74.33	
Rate per 15 Minutes		\$18.58	

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Community Integrated Employment

		Job Coaching	Job Maintenance	Intensive	Self-Employment	
Unit of Service		15 Minute	Month	Hour	15 Minute	
Job Coach Wages and Benefits	- Direct Support Staff Hourly Wage	\$25.20	\$25.20	\$25.20	\$25.20	
	- Employee Benefit Rate (as a percent of wages)	27.9%	27.9%	27.9%	27.9%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$32.23	\$32.23	\$32.23	\$32.23	
	<i>Productivity Assumptions</i>					
	Total Hours	40.00	40.00	40.00	40.00	
	- Travel Time	2.20	2.20	2.20	2.20	
	- Missed Appointments	0.22	0.22	0.22	0.22	
	- Progress Notes/ Medical Records	1.32	1.32	1.32	1.32	
	- Supervision and Other Employer Time	0.66	0.66	0.66	0.66	
	- Training	0.96	0.96	0.96	0.96	
	- Paid Time Off	3.85	3.85	3.85	3.85	
	"Billable" Hours	30.79	30.79	30.79	30.79	
	Productivity Adjustment	1.30	1.30	1.30	1.30	
Staff Cost per Billable Hour		\$41.90	\$41.90	\$41.90	\$41.90	
Mileage	- Number of Miles Traveled per Week	120	120	120	120	
	- Amount per Mile	\$0.725	\$0.725	\$0.725	\$0.725	
	Weekly Mileage Cost	\$87.00	\$87.00	\$87.00	\$87.00	
	Mileage Cost per Billable Staff Hour	\$2.83	\$2.83	\$2.83	\$2.83	
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$44.73	\$44.73	\$44.73	\$44.73	
	- Daily Program Support Cost	\$35.00	\$35.00	\$35.00	\$35.00	
	Program Support Cost per Billable Staff Hour	\$5.68	\$5.68	\$5.68	\$5.68	
	- Administration Percent	15.0%	15.0%	15.0%	15.0%	
	Administrative Cost per Billable Staff Hour	\$8.90	\$8.90	\$8.90	\$8.90	
Total Cost per Billable Staff Hour		\$59.31	\$59.31	\$59.31	\$59.31	
- Hours of Monthly Support			22.0			
Rate per Defined Unit		\$14.83	\$1,304.82	\$59.31	\$14.83	

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Community Integrated Employment-Group

		Category 1	Category 2	
Unit of Service		15 Minute	15 Minute	
Job Coach Wages and Benefits	- Job Coach Hourly Wage	\$25.20	\$25.20	
	- Employee Benefit Rate (as a percent of wages)	27.9%	27.9%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$32.23	\$32.23	
	<i>Productivity Assumptions</i>			
	Total Hours	40.00	40.00	
	- Program Set-Up/ Clean-Up	1.10	1.10	
	- Progress Notes/ Medical Records	1.76	1.32	
	- Supervision and Other Employer Time	0.66	0.66	
	- Training	0.96	0.96	
	- Paid Time Off	3.85	3.85	
	"Billable" Hours	31.67	32.11	
	Productivity Adjustment	1.26	1.25	
	Staff Cost per Billable Hour	\$40.61	\$40.29	
	<i>Staffing Ratio</i>			
	- Range of Group Sizes (Job Coach : Members)	1:5 - 1:6	1:2 - 1:4	
	Average Group Size (Job Coach : Members)	5.5	3.0	
- Member Attendance Rate	85%	85%		
Adjusted Average Number of Members per Staff	4.68	2.55		
Staff Cost per Member per Billable Hour		\$8.68	\$15.80	
Attendance	- Days per Year of Program Operations	250.0	250.0	
	- Days per Year of Member Attendance	212.5	212.5	
	- Hours per Day of Member Attendance	6.00	6.00	
	Hours per Year of Member Attendance	1,275	1,275	
Mileage	- Number of Miles Traveled per Group per Week	200	200	
	Allocated Miles per Member per Week	36.4	66.7	
	- Amount per Mile	\$0.725	\$0.725	
	Annual Mileage Cost per Member (at 250 days of operation)	\$1,372.28	\$2,514.59	
	Mileage Cost per Member per Attendance Hour	\$1.08	\$1.97	
Admin. and Program Support	Cost per Member per Hour Before Admin. and Program Support	\$9.76	\$17.77	
	- Daily Program Support Cost per Member	\$35.00	\$35.00	
	Program Support Cost per Member per Billable Hour	\$5.53	\$5.45	
	- Administration Percent	15.0%	15.0%	
	Administrative Cost per Member Billable Hour	\$2.70	\$4.10	
Total Cost per Member per Billable Hour		\$17.99	\$27.32	
Rate per 15 Minutes		\$4.50	\$6.83	

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Crisis Support-Alternative Residence

	Unit of Service	Day	
Direct Support Staff Wages and Benefits	- Direct Support Staff Hourly Wage	\$20.16	
	- Employee Benefit Rate (as a percent of wages)	32.3%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$26.67	
	<i>Productivity Assumptions</i>		
	Total Hours	40.00	
	- Supervision and Other Employer Time	0.66	
	- Training	1.15	
	- Paid Time Off	3.85	
	"Billable" Hours	34.34	
	Productivity Adjustment	1.16	
	Staff Cost per Billable Hour - Primary Staff	\$30.94	
	- Staff Hours per Member per Day	24.00	
	Weekly Staff Cost per Member	\$5,197.92	
Nursing Supports	- Nursing Support Staff Hourly Wage	\$47.71	
	- Nursing Support Staff Benefit Rate	19.6%	
	- Hours per Week per Member	2.3	
	Weekly Cost of Nursing Support per Member	\$131.24	
Admin. and Program Support	Weekly Cost per Member Before Admin. and Program Support	\$5,329.16	
	- Daily Program Support Cost per Member	\$35.00	
	Weekly Program Support Cost per Member	\$245.00	
	- Administration Percent	15.0%	
	Weekly Administrative Cost per Member	\$983.68	
	Total Cost per Member per Week	\$6,557.84	
	Rate per Day	\$936.83	

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Crisis Support-Individual Residence

	Unit of Service	15 Minute
Direct Support Staff Wages and Benefits	- Direct Support Staff Hourly Wage	\$20.16
	- Employee Benefit Rate (as a percent of wages)	32.3%
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$26.67
	<i>Productivity Assumptions</i>	
	Total Hours	40.00
	- Travel Time	2.19
	- Supervision and Other Employer Time	0.66
	- Training	1.15
	- Paid Time Off	3.85
	"Billable" Hours	32.15
Productivity Adjustment	1.24	
	Staff Cost After Productivity Adjustment	\$33.07
On-Call Costs	- Weekly On-Call Pay (for a single worker)	\$175.00
	- Number of Workers Covered by On-Call Rotation	3
	On-Call Cost per Billable Staff Hour	\$1.81
Mileage	- Number of Miles Traveled per Week	120
	- Amount per Mile	\$0.725
	Weekly Mileage Cost	\$87.00
	Mileage Cost per Billable Staff Hour	\$2.71
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$37.59
	- Daily Program Support Cost	\$35.00
	Program Support Cost per Billable Staff Hour	\$5.40
	- Administration Percent	15.0%
	Administrative Cost per Billable Staff Hour	\$7.59
	Total Cost per Billable Staff Hour	\$50.58
	Rate per 15 Minutes	\$12.65

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Behavioral Support Consultation

		Standard	Incentive	
Unit of Service		15 Minute	15 Minute	
Behavioral Consultant Wages and Benefits	- Behavioral Consultant Hourly Wage	\$39.93	\$39.93	
	- Employee Benefit Rate (as a percent of wages)	21.4%	21.4%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$48.48	\$48.48	
	<i>Productivity Assumptions</i>			
	Total Hours	40.00	40.00	
	- Travel Time	7.70	12.98	
	- Collateral Contacts	1.10	1.10	
	- Progress Notes/ Medical Records	3.52	3.52	
	- Supervision and Other Employer Time	0.66	0.66	
	- Missed Appointments	0.88	0.88	
	- Training	0.96	0.96	
	- Paid Time Off	3.85	3.85	
	"Billable" Hours	21.33	16.05	
	Productivity Adjustment	1.88	2.49	
Staff Cost per Billable Hour		\$91.14	\$120.72	
Mileage	- Number of Miles Traveled per Week	250	450	
	- Amount per Mile	\$0.725	\$0.725	
	Weekly Mileage Cost	\$181.25	\$326.25	
	Mileage Cost per Billable Staff Hour	\$8.50	\$20.33	
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$99.64	\$141.05	
	- Daily Program Support Cost	\$35.00	\$35.00	
	Program Support Cost per Billable Staff Hour	\$8.20	\$10.90	
	- Administration Percent	15.0%	15.0%	
	Administrative Cost per Billable Staff Hour	\$19.03	\$26.81	
Total Cost per Billable Staff Hour		\$126.87	\$178.76	
Rate per 15 Minutes		\$31.72	\$44.69	

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Preliminary Risk Screening and Consultation for Inappropriate Sexual Behavior

	Unit of Service	15 Minute Standard	15 Minute Incentive	
Clinician Wages and Benefits	- Clinician Hourly Wage	\$39.93	\$39.93	
	- Employee Benefit Rate (as a percent of wages)	21.4%	21.4%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$48.48	\$48.48	
	<i>Productivity Assumptions</i>			
	Total Hours	40.00	40.00	
	- Travel Time	7.66	12.91	
	- Collateral Contacts	1.09	1.09	
	- Progress Notes/ Medical Records	3.50	3.50	
	- Supervision and Other Employer Time	0.66	0.66	
	- Missed Appointments	0.88	0.88	
	- Training	1.15	1.15	
	- Paid Time Off	3.85	3.85	
	"Billable" Hours	21.21	15.96	
	Productivity Adjustment	1.89	2.51	
	Staff Cost per Billable Hour	\$91.63	\$121.68	
Mileage	- Number of Miles Traveled per Week	250	450	
	- Amount per Mile	\$0.725	\$0.725	
	Weekly Mileage Cost	\$181.25	\$326.25	
	Mileage Cost per Billable Staff Hour	\$8.55	\$20.44	
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$100.18	\$142.12	
	- Daily Program Support Cost	\$35.00	\$35.00	
	Program Support Cost per Billable Staff Hour	\$8.25	\$10.96	
	- Administration Percent	15.0%	15.0%	
	Administrative Cost per Billable Staff Hour	\$19.13	\$27.01	
	Total Cost per Billable Staff Hour	\$127.56	\$180.09	
	Rate per 15 Minutes	\$31.89	\$45.02	

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Socialization and Sexuality Education

Unit of Service		Series Standard	Series Incentive
Class Size	- Members per Class	8	8
	Clinician Wages and Benefits		
	- Clinician Hourly Wage	\$39.93	\$47.71
	- Employee Benefit Rate (as a percent of wages)	21.4%	19.6%
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$48.48	\$57.06
	<i>Productivity Assumptions</i>		
	Total Hours	40.00	40.00
	- Program Development	1.75	1.75
	- Supervision and Other Employer Time	0.66	0.66
	- Training	1.15	1.15
	- Paid Time Off	3.85	3.85
	"Billable" Hours	32.59	32.59
	Productivity Adjustment	1.23	1.23
	Adjusted Staff Cost per Hour	\$59.63	\$70.18
	<i>Hours per Series</i>		
	- Number of Classes per Series	8	8
	- Number of Hours per Class (incl. travel, set-up, etc.)	5.00	6.25
	Total Hours per Series	40.00	50.00
	Staff Cost per Series	\$2,385.20	\$3,509.00
	Staff Cost per Member per Series	\$298.15	\$438.63
Peer Wages and Benefits	Peer Wages and Benefits		
	- Peer Hourly Wage	\$18.92	\$18.92
	- Employee Benefit Rate (as a percent of wages)	33.8%	33.8%
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$25.31	\$25.31
	<i>Productivity Assumptions</i>		
	Total Hours	40.00	40.00
	- Supervision and Other Employer Time	0.66	0.66
	- Training	1.15	1.15
	- Paid Time Off	3.85	3.85
	"Billable" Hours	34.34	34.34
	Productivity Adjustment	1.16	1.16
	Adjusted Staff Cost per Hour	\$29.36	\$29.36
	<i>Hours per Series</i>		
	- Number of Classes per Series	8	8
- Number of Hours per Classes (incl. travel, set-up, etc.)	3.00	3.00	
Total Hours per Series	24.00	24.00	
Staff Cost per Series	\$704.64	\$704.64	
Staff Cost per Member per Series	\$88.08	\$88.08	
Mileage	Mileage		
	- Number of Miles Traveled per Series (Clinician and Peer)	320	520
	- Amount per Mile	\$0.725	\$0.725
	Mileage Cost per Series	\$232.00	\$377.00
	Mileage Cost per Member per Series	\$29.00	\$47.13
Admin. and Prog. Support	Admin. and Prog. Support		
	Cost per Member per Series Before Admin. and Program Support	\$415.23	\$573.84
	- Program Support Cost per Member per Series	\$35.00	\$35.00
	- Administration Percent	15.0%	15.0%
	Administrative Cost per Series	\$79.45	\$107.44
	Rate per Member per Series (Standard)	\$529.68	\$716.28

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Therapies

		Therapist (OT/PT/SLP)		Therapy Asst. (COTA/PTA)		
		Standard	Incentive	Standard	Incentive	
Unit of Service		15 Minute	15 Minute	15 Minute	15 Minute	
Therapist / Therapy Assistant Wages and Benefits	- Therapist / Therapy Assistant Hourly Wage	\$56.72	\$56.72	\$37.76	\$37.76	
	- Employee Benefit Rate (as a percent of wages)	18.1%	18.1%	22.1%	22.1%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$66.99	\$66.99	\$46.10	\$46.10	
	<i>Productivity Assumptions</i>					
	Total Hours	40.00	40.00	40.00	40.00	
	- Travel Time	7.70	12.98	7.70	12.98	
	- Missed Appointments	0.44	0.44	0.44	0.44	
	- Collateral Contacts	1.10	1.10	-	-	
	- Progress Notes/ Medical Records	3.52	3.52	1.76	1.76	
	- Supervision and Other Employer Time	0.66	0.66	0.88	0.88	
	- Training	0.96	0.96	0.96	0.96	
	- Paid Time Off	3.85	3.85	3.85	3.85	
	"Billable" Hours	21.77	16.49	24.41	19.13	
	Productivity Adjustment	1.84	2.43	1.64	2.09	
	Staff Cost per Billable Hour	\$123.26	\$162.79	\$75.60	\$96.35	
Mileage	- Number of Miles Traveled per Week	250	450	250	450	
	- Amount per Mile	\$0.725	\$0.725	\$0.725	\$0.725	
	Weekly Mileage Cost	\$181.25	\$326.25	\$181.25	\$326.25	
	Mileage Cost per Billable Staff Hour	\$8.33	\$19.78	\$7.43	\$17.05	
Therapist Oversight	- Hours per Week of Oversight from a Therapist			1.00	1.00	
	- Therapist Wage and Benefit Cost			\$66.99	\$66.99	
	Weekly Therapist Oversight Cost			\$66.99	\$66.99	
	Therapist Oversight Cost per Billable Staff Hour			\$2.74	\$3.50	
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$131.59	\$182.57	\$85.77	\$116.90	
	- Daily Program Support Cost	\$35.00	\$35.00	\$35.00	\$35.00	
	Program Support Cost per Billable Staff Hour	\$8.04	\$10.61	\$7.17	\$9.15	
	- Administration Percent	15.0%	15.0%	15.0%	15.0%	
	Administrative Cost per Billable Staff Hour	\$24.64	\$34.09	\$16.40	\$22.24	
Total Cost per Billable Staff Hour		\$164.27	\$227.27	\$109.34	\$148.29	
Rate per 15 Minutes		\$41.07	\$56.82	\$27.34	\$37.07	

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Adult Nursing

		Registered Nurse	Licensed Practical Nurse	
Unit of Service		15 Minute	15 Minute	
Nurse Wages and Benefits	- Nurse Hourly Wage	\$47.71	\$32.85	
	- Employee Benefit Rate (as a percent of wages)	19.6%	23.8%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$57.06	\$40.67	
	<i>Productivity Assumptions</i>			
	Total Hours	40.00	40.00	
	- Travel Time	3.96	3.96	
	- Progress Notes/ Medical Records	1.32	1.32	
	- Collateral Contacts	0.44	0.44	
	- Supervision and Other Employer Time	0.66	0.88	
	- Missed Appointments	0.44	0.44	
	- Training	0.96	0.96	
	- Paid Time Off	3.85	3.85	
	"Billable" Hours	28.37	28.15	
	Productivity Adjustment	1.41	1.42	
Staff Cost per Billable Hour		\$80.45	\$57.75	
Mileage	- Number of Miles Traveled per Week	125	125	
	- Amount per Mile	\$0.725	\$0.725	
	Weekly Mileage Cost	\$90.63	\$90.63	
	Mileage Cost per Billable Staff Hour	\$3.19	\$3.22	
RN Oversight	- Hours per Week of Registered Nurse Oversight		1.00	
	- Registered Nurse Wage and Benefit Cost		\$57.06	
	Weekly Registered Nurse Oversight Cost		\$57.06	
	Registered Nurse Oversight Cost per Billable Staff Hour		\$2.03	
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$83.64	\$63.00	
	- Daily Program Support Cost	\$35.00	\$35.00	
	Program Support Cost per Billable Staff Hour	\$6.17	\$6.22	
	- Administration Percent	15.0%	15.0%	
	Administrative Cost per Billable Staff Hour	\$15.85	\$12.22	
Total Cost per Billable Staff Hour		\$105.66	\$81.44	
Rate per 15 Minutes		\$26.42	\$20.36	

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Nutrition Counseling

	Unit of Service	15 Minute	
Direct Support Staff Wages and Benefits	- Direct Support Staff Hourly Wage	\$36.42	
	- Employee Benefit Rate (as a percent of wages)	22.5%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$44.61	
	<i>Productivity Assumptions</i>		
	Total Hours	40.00	
	- Travel Time	3.96	
	- Progress Notes/ Medical Records	1.32	
	- Supervision and Other Employer Time	0.66	
	- Missed Appointments	0.44	
	- Training	0.96	
	- Paid Time Off	3.85	
"Billable" Hours	28.81		
Productivity Adjustment	1.39		
	Staff Cost per Billable Hour	\$62.01	
Mileage	- Number of Miles Traveled per Week	125	
	- Amount per Mile	\$0.725	
	Weekly Mileage Cost	\$90.63	
	Mileage Cost per Billable Staff Hour	\$3.15	
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$65.16	
	- Daily Program Support Cost	\$35.00	
	Program Support Cost per Billable Staff Hour	\$6.07	
	- Administration Percent	15.0%	
	Administrative Cost per Billable Staff Hour	\$12.57	
	Total Cost per Billable Staff Hour	\$83.80	
	Rate per 15 Minutes	\$20.95	

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Case Management Ongoing (Medically Fragile Waiver)

	Unit of Service	Month
Case- load	Number of Cases per Case Manager	20
Case Mgr. Wages and Benefits	- Case Manager Hourly Wage	\$47.71
	- Employee Benefit Rate (as a percent of wages)	19.6%
	Hourly Staff Cost	\$57.06
	Staff Cost per Month	\$9,890.40
	Monthly Staff Cost per Member	\$494.52
Office Space	- Square Feet of Office Space	100
	- Cost per Square Foot	\$22.00
	Annual Cost of Office Space	\$2,200.00
	Facility Cost per Month	\$183.33
	Monthly Facility Cost per Member	\$9.17
Mileage	- Number of Miles Traveled per Month	900
	- Amount per Mile	\$0.725
	Mileage Cost per Month	\$652.50
	Monthly Mileage Cost per Member	\$32.63
Admin. and Program Support	Monthly Cost Before Admin. and Program Support	\$536.32
	- Program Support Cost per Day	\$35.00
	Program Support Cost per Month	\$1,064.58
	Monthly Program Support Cost per Member	\$53.23
	- Administration Percent	15.0%
	Monthly Administration Cost per Member	\$104.04
	Rate per Month	\$693.59

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Case Management-Pre Assessment/ Assessment (MFW)

	Unit of Service	Hour
Case Manager Wages and Benefits	- Case Manager Hourly Wage	\$47.71
	- Employee Benefit Rate (as a percent of wages)	19.6%
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$57.06
	<i>Productivity Assumptions</i>	
	Total Hours	40.00
	- Travel Time	5.28
	- Missed Appointments	0.44
	- Supervision and Other Employer Time	0.66
	- Training	0.96
	- Paid Time Off	3.85
	"Billable" Hours	28.81
Productivity Adjustment	1.39	
	Staff Cost per Billable Hour	\$79.31
Office Space	- Square Feet of Office Space	100
	- Cost per Square Foot	\$22.00
	Annual Cost of Office Space	\$2,200.00
	Office Space Cost per Billable Hour	\$1.47
Mileage	- Number of Miles Traveled per Week	200
	- Amount per Mile	\$0.725
	Weekly Mileage Cost	\$145.00
	Mileage Cost per Billable Hour	\$5.03
Admin. and Program Support	Cost per Billable Hour Before Admin. and Program Support	\$85.81
	- Daily Program Support Cost	\$35.00
	Program Support Cost per Billable Staff Hour	\$6.07
	- Administration Percent	15.0%
	Administrative Cost per Billable Staff Hour	\$16.21
	Rate per Hour	\$108.09

**Home and Community Based Services Rate Study
Final Proposed Rate Models
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Developmental Disabilities Supports Division**

Customized Community Supports-Group

	Unit of Service	15 Minute	
Direct Support Staff Wages and Benefits	- Direct Support Staff Hourly Wage	\$18.92	
	- Employee Benefit Rate (as a percent of wages)	33.8%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$25.31	
	<i>Productivity Assumptions</i>		
	Total Hours	40.00	
	- Program Set-Up/ Clean-Up	1.10	
	- Progress Notes/ Medical Records	1.10	
	- Supervision and Other Employer Time	0.66	
	- Training	0.96	
	- Paid Time Off	3.85	
	"Billable" Hours	32.33	
	Productivity Adjustment	1.24	
	Hourly Staff Cost per Billable Hour	\$31.38	
	<i>Staffing Ratio</i>		
	- Range of Group Sizes (DSP : Members)	1:2 - 1:3	
Average Group Size (DSP : Members)	2.50		
- Member Attendance Rate	85%		
Adjusted Average Number of Members per Staff	2.13		
Staff Cost per Member per Billable Hour		\$14.73	
Attendance	- Days per Year of Program Operations	250	
	- Days per Year of Member Attendance	212.5	
	- Hours per Day of Member Attendance	6.00	
	Hours per Year of Member Attendance	1,275	
Mileage	- Number of Miles Traveled per Group per Week	200	
	Allocated Miles per Member per Week	80.0	
	Amount per Mile	\$0.725	
	Annual Mileage Cost per Member (at 250 days of operation)	\$3,016.00	
	Mileage Cost per Member per Attendance Hour	\$2.37	
Facility	-Square Feet of Service Space per Member	100.0	
	- Cost per Square Foot	\$22.00	
	Annual Capital Cost per Member	\$2,200.00	
	Capital Cost per Member per Attendance Hour	\$1.73	
Nursing Support	- Nursing Support Staff Hourly Wage	\$47.71	
	- Nursing Support Staff Benefit Rate	19.6%	
	- Annual Hours of Nursing Support	36	
	Annual Nursing Support Cost per Member	\$2,054.20	
	Nursing Support Cost per Member per Attendance Hour	\$1.61	
Admin. and Program Support	Cost per Hour Before Admin. and Program Support	\$20.44	
	- Daily Program Support Cost	\$35.00	
	Program Support Cost per Billable Staff Hour	\$5.83	
	- Administration Percent	15.0%	
	Administrative Cost per Billable Staff Hour	\$4.64	
Total Cost per Billable Staff Hour		\$30.91	
Rate per 15 Minutes		\$7.73	

**Home and Community Based Services Rate Study
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Home Health Aide

	Unit of Service	Hour	
Direct Support Staff Wages and Benefits	- Direct Support Staff Hourly Wage	\$20.02	
	- Employee Benefit Rate (as a percent of wages)	32.5%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$26.53	
	<i>Productivity Assumptions</i>		
	Total Hours	40.00	
	- Travel Time	2.64	
	- Progress Notes/ Medical Records	0.66	
	- Supervision and Other Employer Time	0.66	
	- Missed Appointments	0.44	
	- Training	0.96	
	- Paid Time Off	3.85	
	"Billable" Hours	30.79	
	Productivity Adjustment	1.30	
	Staff Cost per Billable Hour	\$34.49	
Mileage	- Number of Miles Traveled per Week	100	
	- Amount per Mile	\$0.725	
	Weekly Mileage Cost	\$72.50	
	Mileage Cost per Billable Staff Hour	\$2.35	
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$36.84	
	- Daily Program Support Cost	\$35.00	
	Program Support Cost per Billable Staff Hour	\$5.68	
	- Administration Percent	15.0%	
	Administrative Cost per Billable Staff Hour	\$7.50	
	Rate per Billable Hour	\$50.02	

**Home and Community Based Services Rate Study
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Respite-Home Health Aide

	Unit of Service	Hour	
Direct Support Staff Wages and Benefits	- Direct Support Staff Hourly Wage	\$20.02	
	- Employee Benefit Rate (as a percent of wages)	32.5%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$26.53	
	<i>Productivity Assumptions</i>		
	Total Hours	40.00	
	- Travel Time	2.64	
	- Progress Notes/ Medical Records	0.66	
	- Supervision and Other Employer Time	0.66	
	- Missed Appointments	0.44	
	- Training	0.96	
	- Paid Time Off	3.85	
	"Billable" Hours	30.79	
	Productivity Adjustment	1.30	
	Staff Cost per Billable Hour	\$34.49	
Mileage	- Number of Miles Traveled per Week	100	
	- Amount per Mile	\$0.725	
	Weekly Mileage Cost	\$72.50	
	Mileage Cost per Billable Staff Hour	\$2.35	
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$36.84	
	- Daily Program Support Cost	\$35.00	
	Program Support Cost per Billable Staff Hour	\$5.68	
	- Administration Percent	15.0%	
	Administrative Cost per Billable Staff Hour	\$7.50	
	Rate per Billable Hour	\$50.02	

**Home and Community Based Services Rate Study
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Respite Nursing

		Registered Nurse	Lic. Prac. Nurse	
Unit of Service		15 Minute	15 Minute	
Nurse Wages and Benefits	- Nurse Hourly Wage	\$47.71	\$32.85	
	- Employee Benefit Rate (as a percent of wages)	19.6%	23.8%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$57.06	\$40.67	
	<i>Productivity Assumptions</i>			
	Total Hours	40.00	40.00	
	- Travel Time	3.96	3.96	
	- Progress Notes/ Medical Records	1.32	1.32	
	- Collateral Contacts	0.44	0.44	
	- Supervision and Other Employer Time	0.66	0.88	
	- Missed Appointments	0.44	0.44	
	- Training	0.96	0.96	
	- Paid Time Off	3.85	3.85	
	"Billable" Hours	28.37	28.15	
Productivity Adjustment	1.41	1.42		
Staff Cost per Billable Hour		\$80.45	\$57.75	
Mileage	- Number of Miles Traveled per Week	125	125	
	- Amount per Mile	\$0.725	\$0.725	
	Weekly Mileage Cost	\$90.63	\$90.63	
	Mileage Cost per Billable Staff Hour	\$3.19	\$3.22	
RN Oversight	- Hours per Week of Registered Nurse Oversight		1.00	
	- Registered Nurse Wage and Benefit Cost		\$57.06	
	Weekly Registered Nurse Oversight Cost		\$57.06	
	Registered Nurse Oversight Cost per Billable Staff Hour		\$2.03	
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$83.64	\$63.00	
	- Daily Program Support Cost	\$35.00	\$35.00	
	Program Support Cost per Billable Staff Hour	\$6.17	\$6.22	
	- Administration Percent	15.0%	15.0%	
	Administrative Cost per Billable Staff Hour	\$15.85	\$12.22	
Total Cost per Billable Staff Hour		\$105.66	\$81.44	
Rate per 15 Minutes		\$26.42	\$20.36	

**Home and Community Based Services Rate Study
Final Proposed Rate Models
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Behavioral Support Consultation

		Standard	Incentive	
Unit of Service		15 Minute	15 Minute	
Behavioral Consultant Wages and Benefits	- Behavioral Consultant Hourly Wage	\$39.93	\$39.93	
	- Employee Benefit Rate (as a percent of wages)	21.4%	21.4%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$48.48	\$48.48	
	<i>Productivity Assumptions</i>			
	Total Hours	40.00	40.00	
	- Travel Time	7.70	12.98	
	- Collateral Contacts	1.10	1.10	
	- Progress Notes/ Medical Records	3.52	3.52	
	- Supervision and Other Employer Time	0.66	0.66	
	- Missed Appointments	0.88	0.88	
	- Training	0.96	0.96	
	- Paid Time Off	3.85	3.85	
	"Billable" Hours	21.33	16.05	
	Productivity Adjustment	1.88	2.49	
Staff Cost per Billable Hour		\$91.14	\$120.72	
Mileage	- Number of Miles Traveled per Week	250	450	
	- Amount per Mile	\$0.725	\$0.725	
	Weekly Mileage Cost	\$181.25	\$326.25	
	Mileage Cost per Billable Staff Hour	\$8.50	\$20.33	
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$99.64	\$141.05	
	- Daily Program Support Cost	\$35.00	\$35.00	
	Program Support Cost per Billable Staff Hour	\$8.20	\$10.90	
	- Administration Percent	15.0%	15.0%	
	Administrative Cost per Billable Staff Hour	\$19.03	\$26.81	
Total Cost per Billable Staff Hour		\$126.87	\$178.76	
Rate per 15 Minutes		\$31.72	\$44.69	

**Home and Community Based Services Rate Study
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Therapies

		Therapist (OT/PT/SLP)		Therapy Asst. (COTA/PTA)		
		Standard	Incentive	Standard	Incentive	
Unit of Service		15 Minute	15 Minute	15 Minute	15 Minute	
Therapist / Therapy Assistant Wages and Benefits	- Therapist / Therapy Assistant Hourly Wage	\$56.72	\$56.72	\$37.76	\$37.76	
	- Employee Benefit Rate (as a percent of wages)	18.1%	18.1%	22.1%	22.1%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$66.99	\$66.99	\$46.10	\$46.10	
	<i>Productivity Assumptions</i>					
	Total Hours	40.00	40.00	40.00	40.00	
	- Travel Time	7.70	12.98	7.70	12.98	
	- Missed Appointments	0.44	0.44	0.44	0.44	
	- Collateral Contacts	1.10	1.10	-	-	
	- Progress Notes/ Medical Records	3.52	3.52	1.76	1.76	
	- Supervision and Other Employer Time	0.66	0.66	0.88	0.88	
	- Training	0.96	0.96	0.96	0.96	
	- Paid Time Off	3.85	3.85	3.85	3.85	
	"Billable" Hours	21.77	16.49	24.41	19.13	
	Productivity Adjustment	1.84	2.43	1.64	2.09	
	Staff Cost per Billable Hour	\$123.26	\$162.79	\$75.60	\$96.35	
Mileage	- Number of Miles Traveled per Week	250	450	250	450	
	- Amount per Mile	\$0.725	\$0.725	\$0.725	\$0.725	
	Weekly Mileage Cost	\$181.25	\$326.25	\$181.25	\$326.25	
	Mileage Cost per Billable Staff Hour	\$8.33	\$19.78	\$7.43	\$17.05	
Therapist Oversight	- Hours per Week of Oversight from a Therapist			1.00	1.00	
	- Therapist Wage and Benefit Cost			\$66.99	\$66.99	
	Weekly Therapist Oversight Cost			\$66.99	\$66.99	
Therapist Oversight Cost per Billable Staff Hour			\$2.74	\$3.50		
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$131.59	\$182.57	\$85.77	\$116.90	
	- Daily Program Support Cost	\$35.00	\$35.00	\$35.00	\$35.00	
	Program Support Cost per Billable Staff Hour	\$8.04	\$10.61	\$7.17	\$9.15	
	- Administration Percent	15.0%	15.0%	15.0%	15.0%	
Administrative Cost per Billable Staff Hour	\$24.64	\$34.09	\$16.40	\$22.24		
Total Cost per Billable Staff Hour		\$164.27	\$227.27	\$109.34	\$148.29	
Rate per 15 Minutes		\$41.07	\$56.82	\$27.34	\$37.07	

**Home and Community Based Services Rate Study
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Private Duty Nursing

		Registered Nurse	Licensed Practical Nurse	
Unit of Service		15 Minute	15 Minute	
Nurse Wages and Benefits	- Nurse Hourly Wage	\$47.71	\$32.85	
	- Employee Benefit Rate (as a percent of wages)	19.6%	23.8%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$57.06	\$40.67	
	<i>Productivity Assumptions</i>			
	Total Hours	40.00	40.00	
	- Travel Time	3.96	3.96	
	- Progress Notes/ Medical Records	1.32	1.32	
	- Collateral Contacts	0.44	0.44	
	- Supervision and Other Employer Time	0.66	0.88	
	- Missed Appointments	0.44	0.44	
	- Training	0.96	0.96	
	- Paid Time Off	3.85	3.85	
	"Billable" Hours	28.37	28.15	
	Productivity Adjustment	1.41	1.42	
Staff Cost per Billable Hour		\$80.45	\$57.75	
Mileage	- Number of Miles Traveled per Week	125	125	
	- Amount per Mile	\$0.725	\$0.725	
	Weekly Mileage Cost	\$90.63	\$90.63	
	Mileage Cost per Billable Staff Hour	\$3.19	\$3.22	
RN Oversight	- Hours per Week of Registered Nurse Oversight		1.00	
	- Registered Nurse Wage and Benefit Cost		\$57.06	
	Weekly Registered Nurse Oversight Cost		\$57.06	
	Registered Nurse Oversight Cost per Billable Staff Hour		\$2.03	
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$83.64	\$63.00	
	- Daily Program Support Cost	\$35.00	\$35.00	
	Program Support Cost per Billable Staff Hour	\$6.17	\$6.22	
	- Administration Percent	15.0%	15.0%	
	Administrative Cost per Billable Staff Hour	\$15.85	\$12.22	
Total Cost per Billable Staff Hour		\$105.66	\$81.44	
Rate per 15 Minutes		\$26.42	\$20.36	

**Home and Community Based Services Rate Study
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Nutrition Counseling

	Unit of Service	Hour
Direct Support Staff Wages and Benefits	- Direct Support Staff Hourly Wage	\$36.42
	- Employee Benefit Rate (as a percent of wages)	22.5%
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$44.61
	<i>Productivity Assumptions</i>	
	Total Hours	40.00
	- Travel Time	3.96
	- Progress Notes/ Medical Records	1.32
	- Supervision and Other Employer Time	0.66
	- Missed Appointments	0.44
	- Training	0.96
	- Paid Time Off	3.85
"Billable" Hours	28.81	
Productivity Adjustment	1.39	
	Staff Cost per Billable Hour	\$62.01
Mileage	- Number of Miles Traveled per Week	125
	- Amount per Mile	\$0.725
	Weekly Mileage Cost	\$90.63
	Mileage Cost per Billable Staff Hour	\$3.15
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$65.16
	- Daily Program Support Cost	\$35.00
	Program Support Cost per Billable Staff Hour	\$6.07
	- Administration Percent	15.0%
	Administrative Cost per Billable Staff Hour	\$12.57
	Rate per Hour	\$83.80

**Home and Community Based Services Rate Study
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Consultant Services

	Unit of Service	Month
Case-load	Number of Cases per Consultant	30
Consultant Wages and Benefits	- Consultant Hourly Wage	\$26.77
	- Employee Benefit Rate (as a percent of wages)	26.9%
	Hourly Staff Cost	\$33.97
	Staff Cost per Month	\$5,888.13
	Monthly Staff Cost per Member	\$196.27
Office Space	- Square Feet of Office Space	100
	- Cost per Square Foot	\$22.00
	Annual Cost of Office Space	\$2,200.00
	Facility Cost per Month	\$183.33
	Monthly Facility Cost per Member	\$6.11
Mileage	- Number of Miles Traveled per Month	900
	- Amount per Mile	\$0.725
	Mileage Cost per Month	\$652.50
	Monthly Mileage Cost per Member	\$21.75
Admin. and Program Support	Monthly Cost Before Admin. and Program Support	\$224.13
	- Program Support Cost per Day	\$35.00
	Program Support Cost per Month	\$1,064.58
	Monthly Program Support Cost per Member	\$35.49
	- Administration Percent	15.0%
Monthly Administration Cost per Member	\$45.82	
	Rate per Month	\$305.44

**Home and Community Based Services Rate Study
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Home Health Aide

	Unit of Service	Hour	
Direct Support Staff Wages and Benefits	- Direct Support Staff Hourly Wage	\$20.02	
	- Employee Benefit Rate (as a percent of wages)	32.5%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$26.53	
	<i>Productivity Assumptions</i>		
	Total Hours	40.00	
	- Travel Time	2.64	
	- Progress Notes/ Medical Records	0.66	
	- Supervision and Other Employer Time	0.66	
	- Missed Appointments	0.44	
	- Training	0.96	
	- Paid Time Off	3.85	
"Billable" Hours	30.79		
Productivity Adjustment	1.30		
	Staff Cost per Billable Hour	\$34.49	
Mileage	- Number of Miles Traveled per Week	100	
	- Amount per Mile	\$0.725	
	Weekly Mileage Cost	\$72.50	
	Mileage Cost per Billable Staff Hour	\$2.35	
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$36.84	
	- Daily Program Support Cost	\$35.00	
	Program Support Cost per Billable Staff Hour	\$5.68	
	- Administration Percent	15.0%	
	Administrative Cost per Billable Staff Hour	\$7.50	
	Rate per Billable Hour	\$50.02	

**Home and Community Based Services Rate Study
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Respite-Standard

	Unit of Service	Hour
Direct Support Staff Wages and Benefits	- Direct Support Staff Hourly Wage	\$18.92
	- Employee Benefit Rate (as a percent of wages)	33.8%
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$25.31
	<i>Productivity Assumptions</i>	
	Total Hours	40.00
	- Travel Time	1.10
	- Progress Notes/ Medical Records	0.44
	- Supervision and Other Employer Time	0.66
	- Training	0.96
	- Paid Time Off	3.85
"Billable" Hours	32.99	
Productivity Adjustment	1.21	
	Staff Cost per Billable Hour	\$30.63
Mileage	- Number of Miles Traveled per Week	60
	- Amount per Mile	\$0.725
	Weekly Mileage Cost	\$43.50
	Mileage Cost per Billable Staff Hour	\$1.32
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$31.95
	- Daily Program Support Cost	\$35.00
	Program Support Cost per Billable Staff Hour	\$5.30
	- Administration Percent	15.0%
	Administrative Cost per Billable Staff Hour	\$6.57
	Total Cost per Hour	\$43.82
	Rate per 15 Minutes	\$10.96

**Home and Community Based Services Rate Study
Final Proposed Rate Models
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Respite Nursing

		Registered Nurse	Lic. Prac. Nurse	
Unit of Service		15 Minute	15 Minute	
Nurse Wages and Benefits	- Nurse Hourly Wage	\$47.71	\$32.85	
	- Employee Benefit Rate (as a percent of wages)	19.6%	23.8%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$57.06	\$40.67	
	<i>Productivity Assumptions</i>			
	Total Hours	40.00	40.00	
	- Travel Time	3.96	3.96	
	- Progress Notes/ Medical Records	1.32	1.32	
	- Collateral Contacts	0.44	0.44	
	- Supervision and Other Employer Time	0.66	0.88	
	- Missed Appointments	0.44	0.44	
	- Training	0.96	0.96	
	- Paid Time Off	3.85	3.85	
	"Billable" Hours	28.37	28.15	
Productivity Adjustment	1.41	1.42		
Staff Cost per Billable Hour		\$80.45	\$57.75	
Mileage	- Number of Miles Traveled per Week	125	125	
	- Amount per Mile	\$0.725	\$0.725	
	Weekly Mileage Cost	\$90.63	\$90.63	
	Mileage Cost per Billable Staff Hour	\$3.19	\$3.22	
RN Oversight	- Hours per Week of Registered Nurse Oversight		1.00	
	- Registered Nurse Wage and Benefit Cost		\$57.06	
	Weekly Registered Nurse Oversight Cost		\$57.06	
	Registered Nurse Oversight Cost per Billable Staff Hour		\$2.03	
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$83.64	\$63.00	
	- Daily Program Support Cost	\$35.00	\$35.00	
	Program Support Cost per Billable Staff Hour	\$6.17	\$6.22	
	- Administration Percent	15.0%	15.0%	
	Administrative Cost per Billable Staff Hour	\$15.85	\$12.22	
Total Cost per Billable Staff Hour		\$105.66	\$81.44	
Rate per 15 Minutes		\$26.42	\$20.36	

**Home and Community Based Services Rate Study
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Private Duty Nursing

		Registered Nurse	Licensed Practical Nurse	
Unit of Service		15 Minute	15 Minute	
Nurse Wages and Benefits	- Nurse Hourly Wage	\$47.71	\$32.85	
	- Employee Benefit Rate (as a percent of wages)	19.6%	23.8%	
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$57.06	\$40.67	
	<i>Productivity Assumptions</i>			
	Total Hours	40.00	40.00	
	- Travel Time	3.96	3.96	
	- Progress Notes/ Medical Records	1.32	1.32	
	- Collateral Contacts	0.44	0.44	
	- Supervision and Other Employer Time	0.66	0.88	
	- Missed Appointments	0.44	0.44	
	- Training	0.96	0.96	
	- Paid Time Off	3.85	3.85	
	"Billable" Hours	28.37	28.15	
	Productivity Adjustment	1.41	1.42	
Staff Cost per Billable Hour		\$80.45	\$57.75	
Mileage	- Number of Miles Traveled per Week	125	125	
	- Amount per Mile	\$0.725	\$0.725	
	Weekly Mileage Cost	\$90.63	\$90.63	
	Mileage Cost per Billable Staff Hour	\$3.19	\$3.22	
RN Oversight	- Hours per Week of Registered Nurse Oversight		1.00	
	- Registered Nurse Wage and Benefit Cost		\$57.06	
	Weekly Registered Nurse Oversight Cost		\$57.06	
	Registered Nurse Oversight Cost per Billable Staff Hour		\$2.03	
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$83.64	\$63.00	
	- Daily Program Support Cost	\$35.00	\$35.00	
	Program Support Cost per Billable Staff Hour	\$6.17	\$6.22	
	- Administration Percent	15.0%	15.0%	
	Administrative Cost per Billable Staff Hour	\$15.85	\$12.22	
Total Cost per Billable Staff Hour		\$105.66	\$81.44	
Rate per 15 Minutes		\$26.42	\$20.36	

**Home and Community Based Services Rate Study
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Nutrition Counseling

	Unit of Service	Hour
Direct Support Staff Wages and Benefits	- Direct Support Staff Hourly Wage	\$36.42
	- Employee Benefit Rate (as a percent of wages)	22.5%
	Hourly Staff Cost Before Productivity Adj. (wages + benefits)	\$44.61
	<i>Productivity Assumptions</i>	
	Total Hours	40.00
	- Travel Time	3.96
	- Progress Notes/ Medical Records	1.32
	- Supervision and Other Employer Time	0.66
	- Missed Appointments	0.44
	- Training	0.96
	- Paid Time Off	3.85
"Billable" Hours	28.81	
Productivity Adjustment	1.39	
	Staff Cost per Billable Hour	\$62.01
Mileage	- Number of Miles Traveled per Week	125
	- Amount per Mile	\$0.725
	Weekly Mileage Cost	\$90.63
	Mileage Cost per Billable Staff Hour	\$3.15
Admin. and Program Support	Cost per Billable Staff Hour Before Admin. and Program Support	\$65.16
	- Daily Program Support Cost	\$35.00
	Program Support Cost per Billable Staff Hour	\$6.07
	- Administration Percent	15.0%
	Administrative Cost per Billable Staff Hour	\$12.57
	Rate per Hour	\$83.80

Home and Community Based Services Rate Study

Appendices to Final Proposed Rate Models

- prepared for -

New Mexico Health Care Authority
Developmental Disabilities Supports Division

- prepared by -

Burns & Associates, a Division of Health Management Associates

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January 22, 2026

Home and Community Based Services Rate Study
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Appendix A - Wage Assumptions

Wage Data for Select Job Classifications that Include Duties Related to Waiver Service Job Requirements

BLS Code and Title	Typical Education	Typical Experience	Typical On-The-Job Training	Bureau of Labor Statistics Wages (May 2024)				
				10th %-ile	25th %-ile	50th %-ile	75th %-ile	90th %-ile
11-9151 Social and community service manager	Bachelor's	Under 5 yrs	None	\$27.03	\$31.60	\$37.10	\$46.34	\$54.40
19-3033 Clinical and counseling psychologist	Doctoral/prof	None	Intern/resident	\$23.49	\$23.77	\$35.51	\$52.62	\$73.62
21-1012 Educational/ voc./ school counselor	Master's	None	None	\$22.24	\$27.37	\$36.78	\$40.61	\$54.84
21-1013 Marriage and family therapist	Master's	None	Intern/resident	\$25.12	\$27.79	\$32.69	\$36.57	\$40.89
21-1015 Rehabilitation counselor	Master's	None	None	\$17.65	\$19.06	\$24.78	\$30.66	\$35.84
21-1018 Substance/ behav./ mental hlth. counselor	Master's	None	Intern/resident	\$23.03	\$26.47	\$34.02	\$38.86	\$44.48
21-1021 Child/ family/ school social worker	Bachelor's	None	None	\$16.88	\$21.16	\$23.81	\$33.45	\$44.14
21-1022 Healthcare social worker	Master's	None	Intern/resident	\$20.02	\$23.12	\$31.77	\$38.53	\$43.12
21-1023 Mental hlth/ substance abuse social worker	Master's	None	Intern/resident	\$17.38	\$26.47	\$31.54	\$39.05	\$59.75
21-1091 Health education specialist	Bachelor's	None	None	\$19.22	\$23.45	\$29.68	\$36.61	\$46.47
21-1093 Social and human service assistant	High school	None	Short-term OTJ	\$15.23	\$17.68	\$21.62	\$25.34	\$29.30
21-1094 Community health worker	High school	None	Short-term OTJ	\$21.13	\$26.14	\$34.23	\$41.60	\$41.60
29-1031 Dietitians and nutritionists	Bachelor's	None	Intern/resident	\$23.97	\$28.60	\$32.39	\$36.80	\$42.18
29-1122 Occupational therapist	Master's	None	None	\$32.43	\$39.05	\$47.70	\$60.26	\$66.90
29-1123 Physical therapist	Doctoral/prof	None	None	\$27.42	\$36.47	\$48.62	\$59.44	\$65.89
29-1127 Speech-language pathologist	Master's	None	Intern/resident	\$36.39	\$40.45	\$50.44	\$61.15	\$66.55
29-1141 Registered nurse	Bachelor's	None	None	\$33.96	\$39.72	\$42.43	\$50.35	\$58.27
29-1031 Dietitian/ nutritionist	Bachelor's	None	Intern/resident	\$23.97	\$28.60	\$32.39	\$36.80	\$42.18
29-2053 Psychiatric technicians	Postsec award	Under 5 yrs	Short-term OTJ	\$14.57	\$14.57	\$17.93	\$18.10	\$22.54
29-2061 Licensed practical/ vocational nurse	Postsec award	None	None	\$18.26	\$18.62	\$29.21	\$31.68	\$36.37
31-1120 Home health/ personal care aide	High school	None	Short-term OTJ	\$12.28	\$12.53	\$13.17	\$14.40	\$16.99
31-1131 Nursing assistant	Postsec award	None	None	\$14.82	\$16.97	\$17.80	\$20.49	\$22.33
31-2011 Occupational therapy assistant	Associate's	None	None	\$17.20	\$26.52	\$33.58	\$39.11	\$41.54
31-2021 Physical therapist assistant	Associate's	None	None	\$17.01	\$24.49	\$28.53	\$33.69	\$39.09
31-2022 Physical therapist aide	High school	None	Short-term OTJ	\$13.42	\$14.15	\$17.19	\$19.20	\$36.26
31-9092 Medical assistant	Postsec award	None	None	\$15.94	\$17.53	\$18.75	\$21.50	\$24.14
37-2012 Maid/ housekeeping cleaner	None	None	Short-term OTJ	\$12.52	\$13.28	\$14.31	\$16.11	\$18.00
39-1022 First-line supervisor of pers. svc. workers	High school	Under 5 yrs	None	\$16.17	\$19.58	\$23.85	\$28.55	\$33.95
39-9032 Recreation worker	High school	None	Short-term OTJ	\$12.16	\$12.16	\$15.15	\$20.59	\$23.99
39-9041 Residential advisor	High school	None	Short-term OTJ	\$14.27	\$16.11	\$17.17	\$18.11	\$22.09

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**Appendix A: Wage Assumptions
BLS Wage Adjustment Assumption**

Adjustment of Wage Inflation

Weighted Annual Average ¹	4.50%
BLS Dataset Month	May-24
Midpoint of Initial Year of Implementation	Jan-27
Number of Months Between BLS Dataset and Implementation Midpoint	32
Total Inflation Factor	12.45%

¹ Compound annual growth rate for net earnings in New Mexico 2014 – 2024 (queried November 2025);
Source: <https://apps.bea.gov/regional/bearfacts/action.cfm>

Minimum Wage Adjustments

Highest Minimum Wage in State (all wage values below this will be raised to this floor)²	\$17.50
Statewide Minimum Wage	\$12.00
150% of Minimum Wage (non-mandatory benchmark for wage assumptions)	\$18.00

² Santa Fe living wage ordinance for 2027

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**Appendix A - Wage Assumptions
BLS Wage Data Adjusted for Inflation¹**

BLS Code and Title	Bureau of Labor Statistics Wages (May 2024 Inflated to January 2027)				
	10th %-ile	25th %-ile	50th %-ile	75th %-ile	90th %-ile
11-9151 Social and community service manager	\$30.40	\$35.53	\$41.72	\$52.11	\$61.17
19-3033 Clinical and counseling psychologist	\$26.41	\$26.73	\$39.93	\$59.17	\$82.79
21-1012 Educational/ voc./ school counselor	\$25.01	\$30.78	\$41.36	\$45.67	\$61.67
21-1013 Marriage and family therapist	\$28.25	\$31.25	\$36.76	\$41.12	\$45.98
21-1015 Rehabilitation counselor	\$19.85	\$21.43	\$27.87	\$34.48	\$40.30
21-1018 Substance/ behav./ mental hlth. counselor	\$25.90	\$29.77	\$38.26	\$43.70	\$50.02
21-1021 Child/ family/ school social worker	\$18.98	\$23.79	\$26.77	\$37.61	\$49.64
21-1022 Healthcare social worker	\$22.51	\$26.00	\$35.73	\$43.33	\$48.49
21-1023 Mental hlth/ substance abuse social worker	\$19.54	\$29.77	\$35.47	\$43.91	\$67.19
21-1091 Health education specialist	\$21.61	\$26.37	\$33.38	\$41.17	\$52.26
21-1093 Social and human service assistant	\$17.50	\$19.88	\$24.31	\$28.49	\$32.95
21-1094 Community health worker	\$23.76	\$29.39	\$38.49	\$46.78	\$46.78
29-1031 Dietitians and nutritionists	\$26.95	\$32.16	\$36.42	\$41.38	\$47.43
29-1122 Occupational therapist	\$36.47	\$43.91	\$53.64	\$67.76	\$75.23
29-1123 Physical therapist	\$30.83	\$41.01	\$54.67	\$66.84	\$74.09
29-1127 Speech-language pathologist	\$40.92	\$45.49	\$56.72	\$68.76	\$74.84
29-1141 Registered nurse	\$38.19	\$44.67	\$47.71	\$56.62	\$65.52
29-1031 Dietitian/ nutritionist	\$26.95	\$32.16	\$36.42	\$41.38	\$47.43
29-2053 Psychiatric technicians	\$17.50	\$17.50	\$20.16	\$20.35	\$25.35
29-2061 Licensed practical/ vocational nurse	\$20.53	\$20.94	\$32.85	\$35.62	\$40.90
31-1120 Home health/ personal care aide	\$17.50	\$17.50	\$17.50	\$17.50	\$19.11
31-1131 Nursing assistant	\$17.50	\$19.08	\$20.02	\$23.04	\$25.11
31-2011 Occupational therapy assistant	\$19.34	\$29.82	\$37.76	\$43.98	\$46.71
31-2021 Physical therapist assistant	\$19.13	\$27.54	\$32.08	\$37.88	\$43.96
31-2022 Physical therapist aide	\$17.50	\$17.50	\$19.33	\$21.59	\$40.77
31-9092 Medical assistant	\$17.92	\$19.71	\$21.08	\$24.18	\$27.15
37-2012 Maid/ housekeeping cleaner	\$17.50	\$17.50	\$17.50	\$18.12	\$20.24
39-1022 First-line supervisor of pers. svc. workers	\$18.18	\$22.02	\$26.82	\$32.10	\$38.18
39-9032 Recreation worker	\$17.50	\$17.50	\$17.50	\$23.15	\$26.98
39-9041 Residential advisor	\$17.50	\$18.12	\$19.31	\$20.36	\$24.84

¹ Wages adjusted to account for highest minimum wage in the state are highlighted.

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**Appendix A: Wage Assumptions
Development of Job Requirements by Service
(Using BLS Job Codes)**

Developmental Disabilities Waiver

	Case Management	Supported Living	Intensive Medical Living Services	Family Living (Recruiters, Trainers, Supervisors)	Crisis Support-Alternative Residence	Crisis Support-Individual Residence	Customized In-Home Supports	Respite (Individual and Group)
BLS Code and Title								
11-9151 Social and community service manager								
19-3033 Clinical and counseling psychologist								
21-1012 Educational/ voc./ school counselor								
21-1013 Marriage and family therapist								
21-1015 Rehabilitation counselor								
21-1018 Substance/ behav./ mental hlth. counselor								
21-1021 Child/ family/ school social worker	100%			100%				
21-1022 Healthcare social worker								
21-1023 Mental hlth/ substance abuse social worker								
21-1091 Health education specialist								
21-1093 Social and human service assistant		15%	15%				15%	15%
21-1094 Community health worker								
29-1031 Dietitians and nutritionists								
29-1122 Occupational therapist								
29-1123 Physical therapist								
29-1127 Speech-language pathologist								
29-1141 Registered nurse								
29-1031 Dietitian/ nutritionist								
29-2053 Psychiatric technicians		15%	15%		100%	100%	15%	15%
29-2061 Licensed practical/ vocational nurse								
31-1120 Home health/ personal care aide		55%	55%				55%	55%
31-1131 Nursing assistant								
31-2011 Occupational therapy assistant								
31-2021 Physical therapist assistant								
31-2022 Physical therapist aide								
31-9092 Medical assistant								
37-2012 Maid/ housekeeping cleaner								
39-1022 First-line supervisor of pers. svc. workers								
39-9032 Recreation worker		15%	15%				15%	15%
39-9041 Residential advisor								
	100%	100%	100%	100%	100%	100%	100%	100%

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**Appendix A: Wage Assumptions
Development of Job Requirements by Service
(Using BLS Job Codes)**

Developmental Disabilities Waiver

Customized Community Support (Individual and Group)	Community Integrated Employment-Job Development	Community Integrated Employment-Job Coaching	Community Integrated Employment-Job Maintenance	Community Integrated Employment-Intensive	Community Integrated Employment-Self-Employment	Community Integrated Employment-Group	Behavior Support Consultation
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BLS Code and Title

11-9151 Social and community service manager								100%
19-3033 Clinical and counseling psychologist								
21-1012 Educational/ voc./ school counselor	25%							
21-1013 Marriage and family therapist								
21-1015 Rehabilitation counselor	25%	25%	25%	25%	25%	25%		
21-1018 Substance/ behav./ mental hlth. counselor								
21-1021 Child/ family/ school social worker								
21-1022 Healthcare social worker								
21-1023 Mental hlth/ substance abuse social worker								
21-1091 Health education specialist								
21-1093 Social and human service assistant	15%	50%	75%	75%	75%	75%	75%	
21-1094 Community health worker								
29-1031 Dietitians and nutritionists								
29-1122 Occupational therapist								
29-1123 Physical therapist								
29-1127 Speech-language pathologist								
29-1141 Registered nurse								
29-1031 Dietitian/ nutritionist								
29-2053 Psychiatric technicians	15%							
29-2061 Licensed practical/ vocational nurse								
31-1120 Home health/ personal care aide	55%							
31-1131 Nursing assistant								
31-2011 Occupational therapy assistant								
31-2021 Physical therapist assistant								
31-2022 Physical therapist aide								
31-9092 Medical assistant								
37-2012 Maid/ housekeeping cleaner								
39-1022 First-line supervisor of pers. svc. workers								
39-9032 Recreation worker	15%							
39-9041 Residential advisor								
	100%							

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**Appendix A: Wage Assumptions
Development of Job Requirements by Service
(Using BLS Job Codes)**

Developmental Disabilities Waiver

	Therapists (OT/PT/SLP)	Therapy Assistants (COTA/PTA)	Nursing - Licensed Practical Nurse	Nursing - Registered Nurse	Nutrition Counseling	Prelim. Risk Screen./ Consult. for Inappropriate Sexual Behavior	Socialization and Sexuality Education-Clinician	Socialization and Sexuality Education-Peer
BLS Code and Title								
11-9151 Social and community service manager								
19-3033 Clinical and counseling psychologist						100%	100%	
21-1012 Educational/ voc./ school counselor								
21-1013 Marriage and family therapist								
21-1015 Rehabilitation counselor								
21-1018 Substance/ behav./ mental hlth. counselor								
21-1021 Child/ family/ school social worker								
21-1022 Healthcare social worker								
21-1023 Mental hlth/ substance abuse social worker								
21-1091 Health education specialist								
21-1093 Social and human service assistant								15%
21-1094 Community health worker								
29-1031 Dietitians and nutritionists					100%			
29-1122 Occupational therapist								
29-1123 Physical therapist								
29-1127 Speech-language pathologist	100%							
29-1141 Registered nurse				100%				
29-1031 Dietitian/ nutritionist								
29-2053 Psychiatric technicians								15%
29-2061 Licensed practical/ vocational nurse			100%					
31-1120 Home health/ personal care aide								55%
31-1131 Nursing assistant								
31-2011 Occupational therapy assistant		100%						
31-2021 Physical therapist assistant								
31-2022 Physical therapist aide								
31-9092 Medical assistant								
37-2012 Maid/ housekeeping cleaner								
39-1022 First-line supervisor of pers. svc. workers								
39-9032 Recreation worker								15%
39-9041 Residential advisor								
	100%	100%	100%	100%	100%	100%	100%	100%

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**Appendix A: Wage Assumptions
Development of Job Requirements by Service
(Using BLS Job Codes)**

Medically Fragile Waiver

Case Management	Customized Community Support (Group)	Home Health Aid	Respite - Home Health Aid	Respite - Licensed Practical Nurse	Respite - Registered Nurse
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BLS Code and Title					
11-9151 Social and community service manager					
19-3033 Clinical and counseling psychologist					
21-1012 Educational/ voc./ school counselor					
21-1013 Marriage and family therapist					
21-1015 Rehabilitation counselor					
21-1018 Substance/ behav./ mental hlth. counselor					
21-1021 Child/ family/ school social worker					
21-1022 Healthcare social worker					
21-1023 Mental hlth/ substance abuse social worker					
21-1091 Health education specialist					
21-1093 Social and human service assistant		15%			
21-1094 Community health worker					
29-1031 Dietitians and nutritionists					
29-1122 Occupational therapist					
29-1123 Physical therapist					
29-1127 Speech-language pathologist					
29-1141 Registered nurse	100%				100%
29-1031 Dietitian/ nutritionist					
29-2053 Psychiatric technicians		15%			
29-2061 Licensed practical/ vocational nurse				100%	
31-1120 Home health/ personal care aide		55%			
31-1131 Nursing assistant			100%	100%	
31-2011 Occupational therapy assistant					
31-2021 Physical therapist assistant					
31-2022 Physical therapist aide					
31-9092 Medical assistant					
37-2012 Maid/ housekeeping cleaner					
39-1022 First-line supervisor of pers. svc. workers					
39-9032 Recreation worker		15%			
39-9041 Residential advisor					
	100%	100%	100%	100%	100%

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**Appendix A: Wage Assumptions
Development of Job Requirements by Service
(Using BLS Job Codes)**

Medically Fragile Waiver

Therapists (OT/PT/SLP)	Occupational Therapy - Asst	Physical Therapy - Asst	Private Duty Nursing - Licensed Practical Nurse	Private Duty Nursing - Registered Nurse	Behavior Support Consultation	Nutrition Counseling
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BLS Code and Title

11-9151 Social and community service manager						
19-3033 Clinical and counseling psychologist					100%	
21-1012 Educational/ voc./ school counselor						
21-1013 Marriage and family therapist						
21-1015 Rehabilitation counselor						
21-1018 Substance/ behav./ mental hlth. counselor						
21-1021 Child/ family/ school social worker						
21-1022 Healthcare social worker						
21-1023 Mental hlth/ substance abuse social worker						
21-1091 Health education specialist						
21-1093 Social and human service assistant						
21-1094 Community health worker						
29-1031 Dietitians and nutritionists						100%
29-1122 Occupational therapist						
29-1123 Physical therapist						
29-1127 Speech-language pathologist	100%					
29-1141 Registered nurse				100%		
29-1031 Dietitian/ nutritionist						
29-2053 Psychiatric technicians						
29-2061 Licensed practical/ vocational nurse			100%			
31-1120 Home health/ personal care aide						
31-1131 Nursing assistant						
31-2011 Occupational therapy assistant	100%	100%				
31-2021 Physical therapist assistant						
31-2022 Physical therapist aide						
31-9092 Medical assistant						
37-2012 Maid/ housekeeping cleaner						
39-1022 First-line supervisor of pers. svc. workers						
39-9032 Recreation worker						
39-9041 Residential advisor						
	100%	100%	100%	100%	100%	100%

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**Appendix A: Wage Assumptions
Development of Job Requirements by Service
(Using BLS Job Codes)**

Mi Via Waiver

Consultant	Home Health Aid	Respite - Standard	Respite - Licensed Practical Nurse	Respite - Registered Nurse	Private Duty Nursing - Licensed Practical Nurse	Private Duty Nursing - Registered Nurse	Nutrition Counseling
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BLS Code and Title

11-9151 Social and community service manager							
19-3033 Clinical and counseling psychologist							
21-1012 Educational/ voc./ school counselor							
21-1013 Marriage and family therapist							
21-1015 Rehabilitation counselor							
21-1018 Substance/ behav./ mental hlth. counselor							
21-1021 Child/ family/ school social worker	100%						
21-1022 Healthcare social worker							
21-1023 Mental hlth/ substance abuse social worker							
21-1091 Health education specialist							
21-1093 Social and human service assistant		15%					
21-1094 Community health worker							
29-1031 Dietitians and nutritionists							100%
29-1122 Occupational therapist							
29-1123 Physical therapist							
29-1127 Speech-language pathologist							
29-1141 Registered nurse				100%		100%	
29-1031 Dietitian/ nutritionist							
29-2053 Psychiatric technicians		15%					
29-2061 Licensed practical/ vocational nurse			100%		100%		
31-1120 Home health/ personal care aide		55%					
31-1131 Nursing assistant	100%						
31-2011 Occupational therapy assistant							
31-2021 Physical therapist assistant							
31-2022 Physical therapist aide							
31-9092 Medical assistant							
37-2012 Maid/ housekeeping cleaner							
39-1022 First-line supervisor of pers. svc. workers							
39-9032 Recreation worker		15%					
39-9041 Residential advisor							
	100%						

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**Appendix A: Wage Assumptions¹
Rate Model Wage Assumptions
(based on BLS data adjusted for inflation and assumed crosswalk to job requirements)**

Developmental Disabilities Waiver

	Case Management	Supported Living	Intensive Medical Living Services	Family Living (Recruiters, Trainers, Supervisors)	Crisis Support-Alternative Residence	Crisis Support-Individual Residence	Customized In-Home Supports	Respite (Individual and Group)	Customized Community Support (Individual and Group)	Community Integrated Employment-Job Development	Community Integrated Employment-Job Coaching	Community Integrated Employment-Job Maintenance	Community Integrated Employment-Intensive
10th %ile	\$18.98	\$17.50	\$17.50	\$18.98	\$17.50	\$17.50	\$17.50	\$17.50	\$17.50	\$19.97	\$18.09	\$18.09	\$18.09
25th %ile	\$23.79	\$17.86	\$17.86	\$23.79	\$17.50	\$17.50	\$17.86	\$17.86	\$17.86	\$22.99	\$20.27	\$20.27	\$20.27
50th %ile	\$26.77	\$18.92	\$18.92	\$26.77	\$20.16	\$20.16	\$18.92	\$18.92	\$18.92	\$29.46	\$25.20	\$25.20	\$25.20
75th %ile	\$37.61	\$20.42	\$20.42	\$37.61	\$20.35	\$20.35	\$20.42	\$20.42	\$20.42	\$34.28	\$29.99	\$29.99	\$29.99
90th %ile	\$49.64	\$23.30	\$23.30	\$49.64	\$25.35	\$25.35	\$23.30	\$23.30	\$23.30	\$41.97	\$34.79	\$34.79	\$34.79

¹Wage assumptions reflect BLS wage data based on the median (50th percentile) hourly wage.

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Appendix A: Wage Assumptions¹

Rate Model Wage Assumptions

(based on BLS data adjusted for inflation and assumed crosswalk to job requirements)

Developmental Disabilities Waiver

Community Integrated Employment-Self-Employment	Community Integrated Employment-Group	Behavior Support Consultation	Therapists (OT/PT/SLP)	Therapy Assistants (COTA/PTA)	Nursing - Licensed Practical Nurse	Nursing - Registered Nurse	Nutrition Counseling	Prelim. Risk Screen./ Consult. for Inappropriate Sexual Behavior	Socialization and Sexuality Education Clinician	Socialization and Sexuality Education Peer
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10th %ile	\$18.09	\$18.09	\$26.41	\$40.92	\$19.34	\$20.53	\$38.19	\$26.95	\$26.41	\$26.41	\$17.50
25th %ile	\$20.27	\$20.27	\$26.73	\$45.49	\$29.82	\$20.94	\$44.67	\$32.16	\$26.73	\$26.73	\$17.86
50th %ile	\$25.20	\$25.20	\$39.93	\$56.72	\$37.76	\$32.85	\$47.71	\$36.42	\$39.93	\$39.93	\$18.92
75th %ile	\$29.99	\$29.99	\$59.17	\$68.76	\$43.98	\$35.62	\$56.62	\$41.38	\$59.17	\$59.17	\$20.42
90th %ile	\$34.79	\$34.79	\$82.79	\$74.84	\$46.71	\$40.90	\$65.52	\$47.43	\$82.79	\$82.79	\$23.30

¹Wage assumptions reflect BLS wage data based on the median (50th percentile) hourly wage.

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**Appendix A: Wage Assumptions¹
Rate Model Wage Assumptions
(based on BLS data adjusted for inflation and assumed crosswalk to job requirements)**

Medically Fragile Waiver

	Case Management (Nurse)	Customized Community Support (Group)	Home Health Aide	Respite - Home Health Aide	Respite - Licensed Practical Nurse	Respite - Registered Nurse	Therapists (OT/PT/SLP)	Occupational Therapy - Asst	Physical Therapy - Asst	Private Duty Nursing - Licensed Practical Nurse	Private Duty Nursing - Registered Nurse	Behavior Support Consultation	Nutrition Counseling
10th %ile	\$38.19	\$17.50	\$17.50	\$17.50	\$20.53	\$38.19	\$40.92	\$19.34	\$19.34	\$20.53	\$38.19	\$26.41	\$26.95
25th %ile	\$44.67	\$17.86	\$19.08	\$19.08	\$20.94	\$44.67	\$45.49	\$29.82	\$29.82	\$20.94	\$44.67	\$26.73	\$32.16
50th %ile	\$47.71	\$18.92	\$20.02	\$20.02	\$32.85	\$47.71	\$56.72	\$37.76	\$37.76	\$32.85	\$47.71	\$39.93	\$36.42
75th %ile	\$56.62	\$20.42	\$23.04	\$23.04	\$35.62	\$56.62	\$68.76	\$43.98	\$43.98	\$35.62	\$56.62	\$59.17	\$41.38
90th %ile	\$65.52	\$23.30	\$25.11	\$25.11	\$40.90	\$65.52	\$74.84	\$46.71	\$46.71	\$40.90	\$65.52	\$82.79	\$47.43

¹Wage assumptions reflect BLS wage data based on the median (50th percentile) hourly wage.

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Appendix A: Wage Assumptions¹

Rate Model Assumptions

(based on BLS data adjusted for inflation and assumed crosswalk to job requirements)

Mi Via Waiver

Consultant	Home Health Aide	Respite - Standard	Respite - Licensed Practical Nurse	Respite - Registered Nurse	Private Duty Nursing - Licensed Practical Nurse	Private Duty Nursing - Registered Nurse	Nutrition Counseling
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10th %ile	\$18.98	\$17.50	\$17.50	\$20.53	\$38.19	\$20.53	\$38.19	\$26.95
25th %ile	\$23.79	\$19.08	\$17.86	\$20.94	\$44.67	\$20.94	\$44.67	\$32.16
50th %ile	\$26.77	\$20.02	\$18.92	\$32.85	\$47.71	\$32.85	\$47.71	\$36.42
75th %ile	\$37.61	\$23.04	\$20.42	\$35.62	\$56.62	\$35.62	\$56.62	\$41.38
90th %ile	\$49.64	\$25.11	\$23.30	\$40.90	\$65.52	\$40.90	\$65.52	\$47.43

¹Wage assumptions reflect BLS wage data based on the median (50th percentile) hourly wage.

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**Appendix B: Benefits Assumptions
Assumptions for Individual Benefits to Establish Benefit Rates**

	% of Employees with Access		% of Employees Who Participate (Take-Up)		Benefit Level for Participating Employees		Effective Benefit Level for All Employees	
	BLS Data ¹	Rate Model	BLS Data ¹	Rate Model	BLS Data ¹	Rate Model	BLS Data ¹	Rate Model
Mandatory Benefits					<i>Percent of Wages</i>		<i>Percent of Wages</i>	
FICA ²	-	100%	-	100%	-	7.65%	-	7.65%
Federal UI ³	-	100%	-	100%	-	0.60%	-	0.60%
State UI ⁴	-	100%	-	100%	-	1.00%	-	1.00%
Workers' Comp. ⁵	-	100%	-	100%	-	2.64%	-	2.64%
Paid Time Off⁶					<i>Days per year</i>		<i>Days per year</i>	
Holidays	80%	100%	80%	100%	8.0	10.0	6.4	10.0
Vacation Leave	78%	100%	78%	100%	8.0	15.0	6.2	15.0
Sick Leave	92%	100%	92%	100%	8.0		7.4	
Total	-	-	-	-	24.0	25.0	20.0	25.0
Health Insurance⁷					<i>Employer cost per month</i>		<i>Employer cost per month</i>	
Employee Only				37.6%		\$650.00		
Employee + One				10.3%		\$1,125.00		
Family				16.4%		\$1,700.00		
All Coverages	76%	100%	65%	64.3%				\$639.08
Other Benefits⁸					<i>Employer cost per month</i>		<i>Employer cost per month</i>	
	-	100%	-	100%	-	\$100	-	\$100

¹BLS' March 2024 Employee Benefits in the United States (<https://www.bls.gov/ebs/publications/employee-benefits-in-the-united-states-march-2024.htm>); data reported is for private employers in the West region unless otherwise noted.

²Combined Social Security tax rate of 6.2% and Medicare tax rate of 1.45%

³Applies to first \$7,000 in wages

⁴Reflects the tax rate for new employers; applies to first \$33,200 in wages based on 2025 taxable wage base (<https://www.dws.state.nm.us/UI-Tax-Information>)

⁵Based on Class Code 8835 (Home, Public, and Traveling Healthcare--All Employees) effective January 1, 2025 in New Mexico. Retrieved from <http://ncci.com>.

⁶BLS data for vacation and sick leave is based on the western regional average for private employers' employees. The number of vacation days is the average for employees with 1-5 years of experience (the average for those with 6-10 experience is 13 days of vacation); it is assumed that all staff with access to paid time off 'participate.'

⁷Based on the U.S. Department of Health and Human Services Medical Expenditure Panel Survey for 2023 (most recent available at publication <https://datatools.ahrq.gov/meps-ic/#table-series>), which reports average monthly employer contributions in New Mexico of \$555 for an employee-only plan, \$972 for employee-plus-one plans, and \$1,486 for family plans. Percent of employees receiving each coverage type assumes all staff are full-time and eligible for health insurance (see Tables II.B.3.b.(1).(a), II.C.4, II.D.4, and II.E.4). Additionally, the BLS National Compensation Survey (March 2024) identifies an average monthly employer premium of \$565 (single coverage) and \$1,391 (family coverage) for the West region (<https://www.bls.gov/ebs/publications/employee-benefits-in-the-united-states-march-2024.htm>).

⁸BLS provides information for a variety of other benefits that cannot be combined

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Appendix B: Benefits Assumptions
Benefit Rates by Wage

Hourly Wage	Full-Time Annual Salary	Effective Benefit Rate - Model Assumptions ^{1,2}	
		w/ Paid Time Off	w/o Paid Time Off
\$17	\$35,360	45.3%	35.7%
\$18	\$37,440	43.9%	34.3%
\$19	\$39,520	42.6%	33.0%
\$20	\$41,600	41.5%	31.9%
\$21	\$43,680	40.5%	30.9%
\$22	\$45,760	39.5%	29.9%
\$23	\$47,840	38.7%	29.1%
\$24	\$49,920	37.9%	28.3%
\$25	\$52,000	37.2%	27.6%
\$26	\$54,080	36.5%	26.9%
\$27	\$56,160	35.9%	26.3%
\$28	\$58,240	35.3%	25.7%
\$29	\$60,320	34.8%	25.2%
\$30	\$62,400	34.3%	24.7%
\$31	\$64,480	33.8%	24.2%
\$32	\$66,560	33.4%	23.8%
\$33	\$68,640	33.0%	23.4%
\$34	\$70,720	32.6%	23.0%
\$35	\$72,800	32.2%	22.6%
\$36	\$74,880	31.9%	22.3%
\$37	\$76,960	31.6%	22.0%
\$38	\$79,040	31.3%	21.7%
\$39	\$81,120	31.0%	21.4%
\$40	\$83,200	30.7%	21.1%
\$41	\$85,280	30.4%	20.8%
\$42	\$87,360	30.2%	20.6%
\$43	\$89,440	29.9%	20.3%
\$44	\$91,520	29.7%	20.1%
\$45	\$93,600	29.5%	19.9%
\$46	\$95,680	29.3%	19.7%
\$47	\$97,760	29.1%	19.5%
\$48	\$99,840	28.9%	19.3%
\$49	\$101,920	28.7%	19.1%
\$50	\$104,000	28.5%	18.9%
\$51	\$106,080	28.4%	18.8%
\$52	\$108,160	28.2%	18.6%
\$53	\$110,240	28.0%	18.4%
\$54	\$112,320	27.9%	18.3%
\$55	\$114,400	27.7%	18.1%
\$56	\$116,480	27.6%	18.0%
\$57	\$118,560	27.5%	17.9%
\$58	\$120,640	27.3%	17.7%
\$59	\$122,720	27.2%	17.6%
\$60	\$124,800	27.1%	17.5%

¹This table illustrates benefit rates in one dollar wage increments, but the benefit rates in the rate models are calculated to the penny based on the actual hourly wage.

²The benefit rates in the rate models exclude paid time off, which is incorporated in the models as a productivity adjustment.

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Appendix C: Productivity Assumptions (Developmental Disabilities Waiver)

Supported Living	Intensive Medical Living Services	Customized In-Home Supports	Respite-Individual	Respite-Group	Customized Community Support-Individual	Customized Community Supports-Group Category 1	Customized Community Supports-Group Category 2	Customized Community Supports-Small Group	Community Integrated Employment-Job Development	Community Integrated Employment-Job Coaching
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'Typical Workweek' Without Training and PTO

Direct (Billable)Services	39.25	39.25	35.25	37.50	37.00	35.25	36.00	36.50	36.75	30.50	35.00
Travel Time	-	-	3.00	1.25	1.25	3.00	-	-	-	2.00	2.50
Program Set-Up/ Clean-Up	-	-	-	-	-	-	1.25	1.25	1.25	-	-
Program Development	-	-	-	-	-	-	-	-	-	5.00	-
Missed Appointments	-	-	0.25	-	-	0.25	-	-	-	0.25	0.25
Progress Notes/ Medical Records	-	-	0.75	0.50	1.00	0.75	2.00	1.50	1.25	1.50	1.50
Supervision and Other Employer Time	0.75	0.75	0.75	0.75	0.75	0.75	0.75	0.75	0.75	0.75	0.75
Collateral Contacts	-	-	-	-	-	-	-	-	-	-	-
Total	40.00										

Annual Hours for Training and PTO

Training	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00
Paid Time Off	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00

Workweek Adjusted for Training and PTO

Direct (Billable)Services	34.53	34.53	31.01	32.99	32.55	31.01	31.67	32.11	32.33	26.83	30.79
Travel Time	-	-	2.64	1.10	1.10	2.64	-	-	-	1.76	2.20
Program Set-Up/ Clean-Up	-	-	-	-	-	-	1.10	1.10	1.10	-	-
Program Development	-	-	-	-	-	-	-	-	-	4.40	-
Missed Appointments	-	-	0.22	-	-	0.22	-	-	-	0.22	0.22
Progress Notes/ Medical Records	-	-	0.66	0.44	0.88	0.66	1.76	1.32	1.10	1.32	1.32
Supervision and Other Employer Time	0.66	0.66	0.66	0.66	0.66	0.66	0.66	0.66	0.66	0.66	0.66
Collateral Contacts	-	-	-	-	-	-	-	-	-	-	-
Training	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96
Paid Time Off	3.85	3.85	3.85	3.85	3.85	3.85	3.85	3.85	3.85	3.85	3.85
Total Hours	40.00										

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Appendix C: Productivity Assumptions (Developmental Disabilities Waiver)

Community Integrated Employment-Job Maintenance	Community Integrated Employment-Intensive	Community Integrated Employment-Self-Employment	Community Integrated Employment-Group Category 1	Community Integrated Employment-Group Category 2	Crisis Support-Alternative Residence	Crisis Support-Individual Residence	Behavioral Support Consultation	Behavioral Support Consultation (Incentive)	Therapist (OT/PT/SLP)	Therapist (OT/PT/SLP - Incentive)
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'Typical Workweek' Without Training and PTC

Direct (Billable)Services	35.00	35.00	35.00	36.00	36.50	39.25	36.75	24.25	18.25	24.75	18.75
Travel Time	2.50	2.50	2.50	-	-	-	2.50	8.75	14.75	8.75	14.75
Program Set-Up/ Clean-Up	-	-	-	1.25	1.25	-	-	-	-	-	-
Program Development	-	-	-	-	-	-	-	-	-	-	-
Missed Appointments	0.25	0.25	0.25	-	-	-	-	1.00	1.00	0.50	0.50
Progress Notes/ Medical Records	1.50	1.50	1.50	2.00	1.50	-	-	4.00	4.00	4.00	4.00
Supervision and Other Employer Time	0.75	0.75	0.75	0.75	0.75	0.75	0.75	0.75	0.75	0.75	0.75
Collateral Contacts	-	-	-	-	-	-	-	1.25	1.25	1.25	1.25
Total	40.00										

Annual Hours for Training and PTO

Training	50.00	50.00	50.00	50.00	50.00	60.00	60.00	50.00	50.00	50.00	50.00
Paid Time Off	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00

Workweek Adjusted for Training and PTO

Direct (Billable)Services	30.79	30.79	30.79	31.67	32.11	34.34	32.15	21.33	16.05	21.77	16.49
Travel Time	2.20	2.20	2.20	-	-	-	2.19	7.70	12.98	7.70	12.98
Program Set-Up/ Clean-Up	-	-	-	1.10	1.10	-	-	-	-	-	-
Program Development	-	-	-	-	-	-	-	-	-	-	-
Missed Appointments	0.22	0.22	0.22	-	-	-	-	0.88	0.88	0.44	0.44
Progress Notes/ Medical Records	1.32	1.32	1.32	1.76	1.32	-	-	3.52	3.52	3.52	3.52
Supervision and Other Employer Time	0.66	0.66	0.66	0.66	0.66	0.66	0.66	0.66	0.66	0.66	0.66
Collateral Contacts	-	-	-	-	-	-	-	1.10	1.10	1.10	1.10
Training	0.96	0.96	0.96	0.96	0.96	1.15	1.15	0.96	0.96	0.96	0.96
Paid Time Off	3.85	3.85	3.85	3.85	3.85	3.85	3.85	3.85	3.85	3.85	3.85
Total Hours	40.00										

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Appendix C: Productivity Assumptions (DD Waiver)

Therapy Assistant (COTA/PTA)	Therapy Assistant (COTA/PTA - Incentive)	Adult Nursing-Registered Nurse	Adult Nursing-Licensed Practical Nurse	Nutrition Counseling	Socialization and Sexuality Education-Clinician	Socialization and Sexuality Education-Peer	Prelim. Risk Screen./ Consult. for Inappropriate Sexual Behavior	Prelim. Risk Screen./ Consult. for Inappropriate Sexual Behavior (Incentive)
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'Typical Workweek' Without Training and PTC

Direct (Billable)Services	27.75	21.75	32.25	32.00	32.75	37.25	39.25	24.25	18.25
Travel Time	8.75	14.75	4.50	4.50	4.50	-	-	8.75	14.75
Program Set-Up/ Clean-Up	-	-	-	-	-	-	-	-	-
Program Development	-	-	-	-	-	2.00	-	-	-
Missed Appointments	0.50	0.50	0.50	0.50	0.50	-	-	1.00	1.00
Progress Notes/ Medical Records	2.00	2.00	1.50	1.50	1.50	-	-	4.00	4.00
Supervision and Other Employer Time	1.00	1.00	0.75	1.00	0.75	0.75	0.75	0.75	0.75
Collateral Contacts	-	-	0.50	0.50	-	-	-	1.25	1.25
Total	40.00								

Annual Hours for Training and PTO

Training	50.00	50.00	50.00	50.00	50.00	60.00	60.00	60.00	60.00
Paid Time Off	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00

Workweek Adjusted for Training and PTO

Direct (Billable)Services	24.41	19.13	28.37	28.15	28.81	32.59	34.34	21.21	15.96
Travel Time	7.70	12.98	3.96	3.96	3.96	-	-	7.66	12.91
Program Set-Up/ Clean-Up	-	-	-	-	-	-	-	-	-
Program Development	-	-	-	-	-	1.75	-	-	-
Missed Appointments	0.44	0.44	0.44	0.44	0.44	-	-	0.88	0.88
Progress Notes/ Medical Records	1.76	1.76	1.32	1.32	1.32	-	-	3.50	3.50
Supervision and Other Employer Time	0.88	0.88	0.66	0.88	0.66	0.66	0.66	0.66	0.66
Collateral Contacts	-	-	0.44	0.44	-	-	-	1.09	1.09
Training	0.96	0.96	0.96	0.96	0.96	1.15	1.15	1.15	1.15
Paid Time Off	3.85	3.85	3.85	3.85	3.85	3.85	3.85	3.85	3.85
Total Hours	40.00								

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Appendix C: Productivity Assumptions (Medically Fragile Waiver)

Case Management-Pre Assessment/ Assessment (MFW)	Customized Community Supports-Group	Home Health Aidw	Respite-Home Health Aide	Respite Nursing-Licensed Practical Nurse	Respite Nursing-Registered Nurse	Therapist (OT/PT/SLP)	Therapist (OT/PT/SLP - Incentive)	Therapy Assistant (COTA/PTA)	Therapy Assistant (COTA/PTA - Incentive)
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'Typical Workweek' Without Training and PTO

Direct (Billable) Services	32.75	36.75	35.00	35.00	32.00	32.25	24.75	18.75	27.75	21.75
Travel Time	6.00	-	3.00	3.00	4.50	4.50	8.75	14.75	8.75	14.75
Program Set-Up/ Clean-Up	-	1.25	-	-	-	-	-	-	-	-
Missed Appointments	0.50	-	0.50	0.50	0.50	0.50	0.50	0.50	0.50	0.50
Progress Notes/ Medical Records	-	1.25	0.75	0.75	1.50	1.50	4.00	4.00	2.00	2.00
Supervision and Other Employer Time	0.75	0.75	0.75	0.75	1.00	0.75	0.75	0.75	1.00	1.00
Collateral Contacts	-	-	-	-	0.50	0.50	1.25	1.25	-	-
Total	40.00									

Annual Hours for Training and PTO

Training	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00
Paid Time Off	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00

Workweek Adjusted for Training and PTO

Direct (Billable) Services	28.81	32.33	30.79	30.79	28.15	28.37	21.77	16.49	24.41	19.13
Travel Time	5.28	-	2.64	2.64	3.96	3.96	7.70	12.98	7.70	12.98
Program Set-Up/ Clean-Up	-	1.10	-	-	-	-	-	-	-	-
Missed Appointments	0.44	-	0.44	0.44	0.44	0.44	0.44	0.44	0.44	0.44
Progress Notes/ Medical Records	-	1.10	0.66	0.66	1.32	1.32	3.52	3.52	1.76	1.76
Supervision and Other Employer Time	0.66	0.66	0.66	0.66	0.88	0.66	0.66	0.66	0.88	0.88
Collateral Contacts	-	-	-	-	0.44	0.44	1.10	1.10	-	-
Training	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96
Paid Time Off	3.85	3.85	3.85	3.85	3.85	3.85	3.85	3.85	3.85	3.85
Total Hours	40.00									

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App. C: Prod. Assump. (MF Waiver)

Private Duty Nursing-Registered Nurse	Private Duty Nursing-Licensed Practical Nurse	Behavioral Support Consultation	Behavioral Support Consultation - Incentive	Nutrition Counseling
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'Typical Workweek' Without Training and PTO

Direct (Billable) Services	32.25	32.00	24.25	18.25	32.75
Travel Time	4.50	4.50	8.75	14.75	4.50
Program Set-Up/ Clean-Up	-	-	-	-	-
Missed Appointments	0.50	0.50	1.00	1.00	0.50
Progress Notes/ Medical Records	1.50	1.50	4.00	4.00	1.50
Supervision and Other Employer Time	0.75	1.00	0.75	0.75	0.75
Collateral Contacts	0.50	0.50	1.25	1.25	-
Total	40.00	40.00	40.00	40.00	40.00

Annual Hours for Training and PTO

Training	50.00	50.00	50.00	50.00	50.00
Paid Time Off	200.00	200.00	200.00	200.00	200.00

Workweek Adjusted for Training and PTO

Direct (Billable) Services	28.37	28.15	21.33	16.05	28.81
Travel Time	3.96	3.96	7.70	12.98	3.96
Program Set-Up/ Clean-Up	-	-	-	-	-
Missed Appointments	0.44	0.44	0.88	0.88	0.44
Progress Notes/ Medical Records	1.32	1.32	3.52	3.52	1.32
Supervision and Other Employer Time	0.66	0.88	0.66	0.66	0.66
Collateral Contacts	0.44	0.44	1.10	1.10	-
Training	0.96	0.96	0.96	0.96	0.96
Paid Time Off	3.85	3.85	3.85	3.85	3.85
Total Hours	40.00	40.00	40.00	40.00	40.00

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Appendix C: Productivity Assumptions (Mi Via Waiver)

Home Health Aide	Respite-Standard	Respite Nursing-Licensed Practical Nurse	Respite Nursing-Registered Nurse	Private Duty Nursing-Registered Nurse	Private Duty Nursing-Registered Nurse (Telehealth)	Private Duty Nursing-Licensed Practical Nurse	Nutrition Counseling
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'Typical Workweek' Without Training and PTO

Direct (Billable)Services	35.00	37.50	32.00	32.25	32.25	36.75	32.00	32.75
Travel Time	3.00	1.25	4.50	4.50	4.50	-	4.50	4.50
Missed Appointments	0.50	-	0.50	0.50	0.50	0.50	0.50	0.50
Progress Notes/ Medical Records	0.75	0.50	1.50	1.50	1.50	1.50	1.50	1.50
Supervision and Other Employer Time	0.75	0.75	1.00	0.75	0.75	0.75	1.00	0.75
Collateral Contacts	-	-	0.50	0.50	0.50	0.50	0.50	-
Total	40.00							

Annual Hours for Training and PTO

Training	50.00	50.00	50.00	50.00	50.00	50.00	50.00	50.00
Paid Time Off	200.00	200.00	200.00	200.00	200.00	200.00	200.00	200.00

Workweek Adjusted for Training and PTO

Direct (Billable)Services	30.79	32.99	28.15	28.37	28.37	32.33	28.15	28.81
Travel Time	2.64	1.10	3.96	3.96	3.96	-	3.96	3.96
Missed Appointments	0.44	-	0.44	0.44	0.44	0.44	0.44	0.44
Progress Notes/ Medical Records	0.66	0.44	1.32	1.32	1.32	1.32	1.32	1.32
Supervision and Other Employer Time	0.66	0.66	0.88	0.66	0.66	0.66	0.88	0.66
Collateral Contacts	-	-	0.44	0.44	0.44	0.44	0.44	-
Training	0.96	0.96	0.96	0.96	0.96	0.96	0.96	0.96
Paid Time Off	3.85	3.85	3.85	3.85	3.85	3.85	3.85	3.85
Total Hours	40.00							

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Appendix D: Supported Living and Specialty Residential Staffing Assumptions

	Category 1 Basic	Category 2 Moderate	Category 3 Intensive	Category 4 Med/Behav	Intensive Medical
<u>Baseline Staff Hours</u>					
Hours in a Week	168.00	168.00	168.00	168.00	168.00
- Unstaffed Hours (time residents are out of the home)	(30.00)	(30.00)	(30.00)	(30.00)	0.00
- Allowance for Resident Absences/Day Program Holidays ¹	4.50	4.50	4.50	4.50	0.00
Net Baseline Hours	142.50	142.50	142.50	142.50	168.00
(Sleep Hours) ¹	56.00	56.00	56.00	56.00	0.00
(Awake Hours) ¹	86.50	86.50	86.50	86.50	168.00
<u>Additional Staff Hours (Secondary Staff)</u>					
1:1 Hours per Resident per Week	7.00	14.00	28.00	42.00	48.00
Total 1:1 Hours in the Home (average of 3.5 residents)	24.50	49.00	98.00	147.00	168.00
Total Hours per Home per Week	167.00	191.50	240.50	289.50	336.00
Hours per Resident per Week²	47.71	54.71	68.71	82.71	96.00

¹Sleep and awake hours are noted for informational purposes only; the model assumes that all staff hours are 'awake' and funds all staff hours at the same wage and benefit costs.

²All models assume a 3.5-bed home size.

Attachment 2 - Public Comments and Responses

HOME AND COMMUNITY BASED SERVICES RATE STUDY

PUBLIC COMMENTS AND RESPONSES

– PREPARED FOR –

NEW MEXICO HEALTH CARE AUTHORITY
DEVELOPMENTAL DISABILITIES SUPPORTS DIVISION

– PREPARED BY –

BURNS & ASSOCIATES

A DIVISION OF HEALTH MANAGEMENT ASSOCIATES

WWW.HEALTHMANAGEMENT.COM/ABOUT/BURNS-ASSOCIATES/

JANUARY 13, 2026

PROJECT BACKGROUND

Pursuant to the requirements of 28-16A-16 NMSA (House Bill 395), the New Mexico Health Care Authority's Developmental Disabilities Supports Division (DDSD) conducted a comprehensive review of payment methodologies and rates for services covered by the Developmental Disabilities, Mi Via, and Medically Fragile waivers. Burns & Associates, a division of Health Management Associates (HMA-Burns), was contracted to assist with this effort.

The rate study encompassed several tasks, including:

- A review of service requirements and payment policies for all covered services
- Meetings with DDSD to identify rate study goals
- Four meetings with a rate study subcommittee of the Advisory Council on Quality Supports for Individuals with Developmental Disabilities (ACQ), which included service providers, family members and self-advocates, and other system advocates
- Development and administration of a provider survey and time study to collect information regarding service designs, costs, direct care worker productivity, and other factors
- Identification of other data sources to provide market-based cost assumptions, including cross-industry wage and benefit standards
- Research of rates paid for comparable services in other New Mexico programs and in other states
- Analyses of claims data and other systems data

Based on this work, detailed rate models were developed. These rate models include the specific assumptions regarding the costs that providers incur in the delivery of each service, such as direct care workers' wages, benefits, and billable time; staffing ratios; travel; and agency overhead.

On December 3, 2025, HMA-Burns presented the draft rate models and an overview of the rate study and methodology to the ACQ rate study subcommittee. On December 5, HMA-Burns published a webinar that walked through the same presentation. The webinar included an overview of the rate study process, methodology, and recommendations. HMA-Burns additionally published the proposed rate models, provider survey, and time study results. This initiated a two-week public comment period in which interested stakeholders were given an opportunity to submit written comments. In total, comments from 43 individuals (representing 40 provider organizations, 2 parents, and 1 advocacy group representative) were submitted.

DDSD and HMA-Burns reviewed all comments. This document summarizes those comments and responds to each. In response to public comments, the following changes to the rate study recommendations were made:

- The proposal to standardize rates for several professional and licensed services across the state's counties was withdrawn and rate models were developed for services that currently have 'incentive' rates.
- The proposal to establish different telehealth rates for professional services was withdrawn.
- The assumed wage for behavior support consultants was increased.

- The proposal to change the methodology for allocating billable days when an individual changes their Supported Living or Family Living provider during their plan year was withdrawn; the existing approach will continue to be used.

Although the rate study recommends increasing payment rates for most services, there are a few services for which rate decreases are recommended. As discussed in the presentation of the draft recommendations, DDS/D does not intend to adopt any rate reductions.

The remainder of this document responds to each submitted comment.

RATE STUDY PROCESS AND IMPLEMENTATION

- 1. Several commenters stated the rate study recommendations issued for public comment did not contain all the necessary information to fully evaluate the information including productivity and administrative time assumptions; travel assumptions and data sources; and sensitivity analyses demonstrating the impact of changes to wage, productivity, administrative, and program support cost assumptions. One commenter stated the public comment period did not provide adequate time to fully evaluate the recommendations given the volume of material to review and understand.***

All research and data collection tasks culminating in the drafting of the rate models concluded in early December 2025. On December 5, 2025, HMA-Burns published a webinar that walked through the rate study process and recommendations. This kicked-off a two-week public comment period for interested stakeholders to offer feedback.

The rate models published for comment detailed the individual cost assumptions made to develop the overall rates. The appendices included in the packet provide additional detail: Appendix A details wage assumptions, Appendix B details the benefits package for direct care staff, Appendix C details productivity assumptions, and Appendix details Supported Living staffing assumptions. HMA-Burns also recorded and published a presentation explaining the recommendations. The analyses of provider survey and time study results were also made available.

In total, comments from 43 individuals (representing 40 provider organizations, two parents, and an advocacy group) were submitted and are summarized and addressed in this document. Stakeholders will have additional opportunities to provide input as the rate study is considered as part of the state's budgeting and waiver amendment processes.

- 2. Multiple commenters objected to any rate model that produces a rate lower than the current rate, stating that reductions would force agencies to reduce or eliminate quality-based service components, such as clinical supervision, quality improvement and compliance, and risk management. Multiple commenters requested clarification regarding DDS/D's hold-harmless policy with respect to rate reductions. Providers requested specific details about the duration of the hold harmless policy with some expressing concern that HB 395 may force adoption of the lower rates. Some commenters asked for the rate calculations that produced the lower rates.***

The rate study recommends that rates for most services be increased; fully implementing the recommendations would increase spending by 16.1 percent. However, the rate study does recommend that payment rates for a small number of services be reduced.

The rate calculations and assumptions that generated all rate models are found in the rate model packet. HMA-Burns believes the wage, benefit, productivity, administration and program support, and other assumptions remain accurate, reasonable, and supported by current market-based data.

However, to prevent service disruptions, DDS/D does not intend to implement any rate reductions from being implemented. With the hold-harmless, the total cost of implementation would increase to 16.5 percent.

3. *Multiple commenters requested details regarding how budgets would be increased to match the total amount allocated to an individual to accommodate the proposed rate increases.*

DDS/D intends to accompany any approved rate increases with increases to individual budgets so that individuals remain able to access the same level of support.

4. *One commenter stated waiver rates should include automatic cost of living adjustments.*

State law requires that DDS/D conduct an independent biennial cost study (28-16A-16 NMSA), ensuring regular review of payment rates. The rate models developed as part of this rate study detail individual cost components and data sources, which is intended to allow for evaluation of the appropriateness of payment rates during years when a rate study is not conducted. As one minor example, the rate models use the Internal Revenue Service's standard mileage rate to reflect vehicle-related costs. Since the IRS generally publishes the mileage rate annually, the rate model could be adjusted when the new amount is released. However, adjustments to payment rates – whether based on the biennial rate studies or updates in the interim years – are subject to the availability of funding as determined through the state's appropriations processes.

RATE FRAMEWORKS

5. *One commenter stated rates must reflect actual service delivery costs, including wage competition, recruitment and retention challenges, rising minimum wage baselines, turnover costs, and productivity losses.*

The proposed rate models rely on various market-based cost benchmarks intended to ensure providers have the resources needed to recruit and retain qualified staff and to deliver high-quality services. In particular, the rate models include competitive wages, a competitive benefits package that substantially exceeds current average benefits offered by providers today, productivity factors that fairly represent (and generally exceed) productivity levels reported in the time study, and increased administrative and program support funding.

6. *Multiple commenters stated payment rates should be consistent across the DD and Mi Via waivers as they serve the same population.*

A key objective of the rate study was standardizing rates across waivers for services with comparable scopes and staff qualifications. Based on this goal, the rate study recommends standardizing rates for the following services:

- Adult Nursing and Respite provided by nurses
- Therapy Services
- Behavior Support Consultation
- Nutrition Counseling
- Home Health Aide services and Respite provided by home health aides

7. *Multiple commenters suggested there should be higher rates for delivering services in rural and tribal areas due to higher travel costs and smaller provider pools.*

As noted by the commenters, travel costs are generally greater in rural areas. However, these higher costs may be offset by other costs that are lower. For example, wages in rural parts of the state tend to be lower as demonstrated in wage data from the Bureau of Labor Statistics. Thus, consistent with the current rate structure for most waiver services (excepting certain professional and licensed services), the rate study did not recommend rates that vary by region.

DIRECT CARE STAFF WAGES, BENEFITS, AND PRODUCTIVITY

8. *One commenter asked why DSPs who are employees have a 46 percent turnover rate while DSPs classified as contractors have a 19 percent turnover rate.*

The turnover figures reflect data reported through the provider survey administered as part of the rate study. The survey collected staffing details and requested that all reported staff be classified as either employees or contractors. Providers were asked to report turnover rates for staff during the most recent fiscal year, and the median turnover rates among employees classified as DSPs was 46 percent, compared to a median of 19 percent for DSPs classified as contractors. The provider survey did not ask providers to comment as to the reasons for turnover or differences across staff classifications.

9. *Multiple commenters expressed support for the direct support professional (DSP) wage assumed in the proposed rate models. Other commenters disagreed with the wage methodology and resulting assumption, including:*

- *Objections to the Bureau of Labor Statistics' (BLS) occupational classifications used to benchmark the DSP wage assumption.*
- *A suggestion to conduct a time study to determine whether the weighting of BLS classifications is appropriate.*
- *A suggestion to use the 90th percentile wages reported by the BLS instead of the 50th percentile for wages, at least for the occupational classification with the greatest weight (home health and personal care aides).*

As observed by the commenters, the rate model wage assumptions are based on New Mexico specific wage data from the most recent publication of the Bureau of Labor Statistics Occupational Employment and Wage Statistics from May 2024 (published in April 2025).

The rate study makes two adjustments to the BLS wage data:

- Because the BLS wage data reflects May 2024, an inflationary factor was applied to ensure current wage estimates. Specifically, the rate study uses the 10-year compound annual growth rate for net earnings in New Mexico reported by the Bureau of Economic Analysis. At the 4.5 percent annual rate, the proposed rate models include a total adjustment of 12.45 percent to inflate the wages to January 2027, which is the mid-point of the first fiscal year in which the rate models could be implemented.
- After application of the inflationary adjustment, any wage lower than the highest expected minimum wage in New Mexico in January 2027 was increased to that minimum. The highest identified minimum wage was \$17.50 per hour in Santa Fe so any inflated wage value below that amount was increased to \$17.50.

The BLS reports wage data for more than 800 occupations. For many services, there is a direct relationship between the qualifications for staff delivering direct care and one of the BLS’ occupational classifications. For example, there is a BLS classification for registered nurses, which is used in the rate models for Adult Nursing services provided by a registered nurse. For some waiver services, there is not a single occupation that reflects the responsibilities of the direct care staff. For these services, the rate study uses a weighted average of multiple BLS classifications.

The BLS combines direct support professionals with a number of other positions in the home health and personal care aide occupational classification. However, that occupation alone may not fully account for the varied responsibilities of DSPs and will produce low wage assumptions because DSPs and other staff in the home health and personal care aides classification tend to earn relatively low wages. The rate study therefore creates a composite of multiple BLS classifications to establish wage assumptions for DSPs as shown in the following table:

BLS Standard Occupational Classification	Weight	Median Wage (Adjusted)
Social and human service assistant (21-1093)	15%	\$24.31
Psychiatric technicians (29-2053)	15%	\$20.16
Home health/ personal care aide (31-1120)	55%	\$17.50
Recreation worker (39-9032)	15%	\$17.50
Weighted Average Wage		\$18.92

Since DSPs are categorized as home health and personal care aides in the BLS data and the description of the occupation describes many of the responsibilities of DSPs, the heaviest weighting – 55 percent – is applied to this occupation. Additionally, the rate study applies a 15 percent weight for three other classifications: social and human service assistants, psychiatric aides (to reflect assistance in managing behaviors), and recreation workers (to reflect assistance in accessing the community).

The BLS reports wage values at several different levels (the 10th percentile, 25th percentile, 50th percentile, 75th percentile, and 90th percentile). The rate study relies on the median (50th percentile) reported wages to reflect a reasonable market-based estimate since these are the wages at which half of the workers in the occupations are expected to earn more, and half are expected to earn less.

For DSPs, this methodology produces a composite wage of \$18.92 per hour, which is 12.2 percent higher than the weighted average DSP wage reported in the provider survey. Additionally, HB 395 requires the rate study to consider the impact of setting the DSP wage assumption at 150 percent of the state minimum wage. As of January 2026, the New Mexico state minimum wage was \$12.00 per hour, meaning the DSP wage assumed in the rate models exceeds the HB 395 benchmark of \$18.00.

10. Several commenters stated the increased rates for services provided by direct support professionals – particularly Supported Living services – should include the establishment of wage floors to ensure accountability and sufficient wages for front line staff.

As discussed in the response to comment 9, the rate models for services provided by direct support professionals assumes an average wage of \$18.92 per hour (as well as comprehensive benefits including paid time off and health insurance), which reflects a competitive, market-based compensation package. These assumptions represent a substantial increase over the assumptions included in the current rate models, which is driving the higher rates proposed for many services.

In general, rate model assumptions are not intended to dictate providers' business practices, including the wages and benefits they offer their staff. Instead, providers must operate within the overall rates and deliver services consistent with DDS's requirements and individuals' service plan, but they otherwise have flexibility to manage their business in a manner that best supports their operations. For example, staff at a given organization may value paid time off more than health insurance so that provider might offer more vacation time than assumed in the rates, but pay lower wages.

Thus, although the proposed rate increases are designed to result in greater investment in the direct care workforce to increase staff stability and enhance service quality, the rate study does not propose the establishment of wage floors. However, DDS intends to continue monitoring DSP wages through annual HB 395 wage reporting. If any approved rate increases do not result in increased DSP compensation, wage floors may be considered in the future.

11. Multiple commenters objected to the therapist wage assumption, stating it does not reflect existing workforce shortages, higher caseloads, and participant complexity. Some of these commenters suggested that the use of the median (50th percentile) wage for therapists does not align with current workforce realities for waiver therapists and that a higher wage benchmark should be used. Other commenters stated the use of BLS wages resulted in artificially low rates since they reflect wage data from hospital, school, outpatient clinics, and similar settings that have higher achievable productivity due to minimal travel, more predictable schedules, and similar factors.

As discussed in the response to comment 9, the rate models rely on New Mexico-specific wage data published by the Bureau of Labor Statistics. The rate study uses median wage values as these are the wages at which half of the workers in a given occupation earn more and half earn less. In short, median wages reflect the market-based midpoint for each occupation.

As part of the recommendation to standardize payment rates for Occupational Therapy, Physical Therapy, and Speech Therapy services, the rate study uses the highest published median wage across these three disciplines, which was speech language pathologists. After the application of the inflationary adjustment described in the response to comment 9, the median wage for speech language pathologists was \$56.72 per hour (about \$118,000 per year), which provides a six percent increase to the occupational therapist wage (\$53.64 per hour / \$112,000 per year) and a four percent increase to the physical therapist wage (\$54.67 / \$114,000).

As noted by commenters, the BLS wage is not comparable to the business model of some therapy providers in which therapists are only paid for billable hours. Instead, as discussed in the response to comment 27, the rate models for all services (including Therapy Services) assume direct care staff (including therapists) are employees rather than contractors. That is, the rate models assume therapists receive benefits and are paid for all hours they work rather than only billable hours. Overall, the rate models assume that full-time therapists earn about \$118,000 per year and receive benefits including health insurance and paid time off.

HMA-Burns conducted a review of job postings for therapists in New Mexico and found the \$56.72 per hour wage assumed in the rate model is towards the higher end of the identified ranges:

- Physical therapist wages ranged from \$34.00 to \$60.10 per hour
- Occupational therapist wages ranged from \$38.46 to \$65.00 per hour
- Speech language pathologist wages ranged from \$36.54 to \$75.00 per hour

12. One commenter stated the 4.5 percent annual inflation rate used to increase the Bureau of Labor Statistics wage data was based on all occupations, but that therapist wages have grown at a faster rate.

As discussed in the response to comment 9, the rate study uses wage data from the Bureau of Labor Statistics to establish the wage assumption for the direct care staff in each rate model. Because the most recent BLS data reflects May 2024, an inflationary factor was applied to ensure current wage estimates. Specifically, the rate study used the 10-year compound annual growth rate for net earnings in New Mexico reported by the Bureau of Economic Analysis. At the 4.5 percent annual rate, the proposed rate models include a total adjustment of 12.45 percent for the 32-month period between the BLS data set in May 2024 and January 2027 (the mid-point of the first fiscal year in which the proposed rates could be implemented) to inflate the therapist wage assumption to \$56.72 per hour.

The rate study applies the same adjustment to all wage assumptions. A review of BLS wage data for therapists in particulars show that wages for these occupations have grown at a lower rate than the 4.5 percent assumption. Between 2014 and 2024 BLS datasets, wages grew an average of 2.6 percent annually for occupational therapists, 1.5 percent for physical therapists, and 4.0 percent for speech language pathologists.

13. Multiple commenters objected to the assumed wage level for behavior support consultants. One commenter stated that two of the four occupational classifications selected in the rate proposal did not require licensing, but licensing was generally required for this service within DDS's standards. Another commenter suggested that the wage assumption should be equal to the assumption for occupational, physical, and speech therapists.

To reflect the varied qualifications of staff who can provide Behavior Support Consultation, the wage assumption in the draft rate models reflected the average of four Bureau of Labor Statistics occupational classifications as shown in the following table:

BLS Standard Occupational Classification	Weight	Median Wage (Adjusted)
Clinical and counseling psychologist (19-3033)	25%	\$39.93
Marriage and family therapist (21-1013)	25%	\$36.76
Substance/ behavioral/ mental health counselor (21-1018)	25%	\$38.26
Mental health/ substance abuse social worker (21-1023)	25%	\$35.47
Weighted Average Wage		\$37.61

In response to public comments, the wage assumption in the final rate model uses only the highest paid occupation from the original list (clinical and counseling psychologist), resulting in an inflation-adjusted wage assumption of \$39.93.

14. Multiple commenters stated that the health insurance premium cost assumptions in the rate models do not account for increasing cost of health care and the use of 2023 MEPS data does not reflect costs in 2026. One commenter emphasized the scheduled expiration of Affordable Care Act subsidies and the cost increases contracted providers will face. Commenters stated that using employer contributions only as a model for contracted employees is not appropriate, as contractors incur health insurance costs that range from \$500 to \$1,000 per month.

The health insurance cost assumptions in the proposed rate models were derived from New Mexico-specific data from the annual Medical Expenditure Panel Survey (MEPS) published by the U.S.

Department of Health and Human Services’. The most recent data release is from 2023, so the costs were increased by about 15 percent (before rounding) to account for inflation.

The rate models include the following assumptions:

- 100 percent of employees are eligible for health insurance through their employer.
- An employee participation rate of 64.3 percent.
- A mix of plan types: 37.6 percent of all employees elect an employee-only plan, 10.3 percent elect an employee plus one plan, and 16.4 percent elect a family plan.
- Employer contributions of \$650 per month for an employee-only plan, \$1,125 for an employee plus one plan, and \$1,700 for a family plan.

These assumptions produce an overall cost of \$639 per employee per month (including non-participating employees). In comparison, providers reported an average cost of only \$176 per month (after adjusting for access and participation) for each full-time employee and even less for part-time employees.

As observed by commenters, the rate models reflect an employment-based model. It is acknowledged that contractor models will have different cost structures; for example, providers typically pay higher hourly payments to account for the lack of benefits, providers often do not pay contractors for non-billable time, and administrative costs such as human resources and training may be lower. Though the rate models assume an employment-based approach, agencies can choose to employ or contract with staff (consistent with applicable laws and regulations) based on what works best for their organization.

15. One commenter suggested that productivity factors should be applied to the assumed direct care worker wage prior to any other cost assumptions. This commenter stated that applying the productivity factor later in the rate model understates the effective hourly wage and other costs.

Most rate models include a productivity factor to account for the time that direct care workers (including direct support professionals, therapists, nurses, and others who provide billable services) spend on non-billable activities. As shown in Appendix C of the rate model packet, the assumptions are based on the amount of time a direct care worker spends on various activities during a ‘typical’ workweek. These figures are then adjusted for assumed annual hours of training and paid time off.

The productivity factor is calculated by dividing a 40-hour work week by the assumed number of billable hours. The productivity factor is used to inflate wage and benefit costs to spread costs associated with non-billable tasks over the direct care worker’s billable time. Thus, as productivity declines, payment rates increase.

Applying the productivity factor first to the wage assumption (as suggested by the commenter) or to the combined wage and benefit cost (as included in the proposed rate models) produces an identical result as shown in the example below (based on illustrative examples of a \$20 per hour wage, a 25 percent benefit rate, a productivity factor of 1.25, and a 10 percent administrative rate).

Productivity After Wage		Productivity After Wage and Benefits	
Wage	\$20.00	Wage	\$20.00
Productivity (1.25)	\$5.00		
Adj. Wage	\$25.00		

Benefits (at 25%)	\$6.25	Benefits (at 25%)	\$5.00
		Wage + Benefits	\$25.00
		Productivity (1.25)	\$6.25
Wage + Benefits w/ Prod.	\$31.25	Wage + Benefits w/ Prod.	\$31.25
Overhead (at 10%)	\$3.47	Overhead (at 10%)	\$3.47
Total	\$34.72	Total	\$34.72

As the comparison shows, applying the productivity factor before or after the addition of the benefit costs does not change the total.

ADMINISTRATION AND PROGRAM SUPPORT

16. Multiple commenters stated that the administration and program support cost assumptions included in the rate models were not sufficient to cover agency operating costs, particularly in rural areas.

Overall, the rate models include an average of 28 percent for overhead (administration and program support) costs, excluding the gross receipts tax (GRT), which is added to the payment rate as applicable. This total exceeds the amounts reported in the provider survey.

The rate models include \$35.00 per day in program support, equal to an average of 12.7 percent of providers' costs based on current rates (because this is a fixed amount, the percentage of total costs varies by service). This funding level represents a significant increase compared to the amounts reported in the provider survey through which case management and consultant agencies reported an average program support rate of 7.5 percent and all other HCBS providers reported an average of 9.0 percent. The increase is intended to account for growth in wages and other expenses for program support personnel and to support investment in program infrastructure.

The rate models generally include 15 percent of the overall rate for administrative expenses, which also exceeds the amounts reported in the provider survey. Case management and consultant agencies reported an average of 11.6 percent in administrative expenses (excluding GRT), and all other providers reported an average of 12.6 percent (excluding GRT). As with the increased funding for program support, this increase is meant to accommodate growth in providers' administrative costs and responsibilities.

MI VIA WAIVER CONSULTANT SERVICES

17. One commenter objected to the recommendation to reduce the payment rate for Consultant Services covered by the Mi Via Waiver.

As discussed in the response to comment 2, DDSD does not intend to implement any of the rate decreases recommended by the rate study. Thus, DDSD proposes to maintain the current rate for Consultant Services.

The rate study recommends a decrease in the Consultant rate based primarily on two factors.

First, based on the provider survey results, Consultants carry an average of 31.7 cases (the proposed rate model therefore assumes an average caseload of 30). In comparison, the current rate assumes an

average of 5.778 hours per month per participant and that 70 percent of consultants' time is spent on direct and indirect activities supporting individuals, translating to an average caseload of only 22. Since the assumed monthly costs for a consultant are spread over their assumed caseload, the per-person rate declines as the assumed caseload increases.

Second, the current methodology assumed a 47.6 percent overhead rate for Consultant services compared to the 31.2 percent assumed for all other services, including Developmental Disabilities Waiver Case Management. The proposed rate models include a total of 26.7 percent for overhead, which exceeds the costs reported through the provider survey.

SUPPORTED LIVING

18. Several commenters requested clarification about how the assumption that 42 hours of weekly one-to-one support in the Category 4 rate model was determined.

The Supported Living rate models incorporate assumptions about staffing levels needed to support individuals in each rate category. Appendix D of the rate model packet details these assumptions, including the assumed number of weekly hours per week of one-to-one support. These assumptions are based on the current DD Waiver Service Standards, which specify the following weekly service hours of focused (one-to-one) DSP attention by service category:

- Category 1 (Basic Support): Up to 7 hours per week
- Category 2 (Moderate Support): 8 – 14 hours per week
- Category 3 (Extensive Support): 15 – 28 hours per week
- Category 4 (Extraordinary Medical/ Behavioral Support): More than 28 hours per week

The rate models adopt the high-end of each range for Categories 1 through 3 (that is, 7, 14, and 28 hours, respectively). To determine the appropriate assumption for Category 4, HMA-Burns analyzed the staffing levels reported through the provider survey, conducting a best fit analysis that accounts for the varied sizes and composition of homes. Based on the results of this analysis, the Category 4 rate model includes an assumed 42 hours of weekly one-to-one support.

19. One commenter stated that the overtime rate reported in the provider survey for Supported Living should be compared to overtime rates in other states.

Provider survey respondents reported an average overtime rate of 17.5 percent for direct support professionals delivering Supported Living. Comprehensive overtime data from other state programs is not available for comparison purposes.

The Supported Living rate models do not include a specific assumption related to overtime. Instead, the assumed hourly wage of \$18.92 is meant to reflect the overall average, including shift differentials, overtime, and other wages. As noted in the response to comment 9, this represents an increase of 12.2 percent compared to current wages reported in the provider survey (which also include overtime and other costs).

20. Multiple commenters stated that rate increases for Supported Living providers should be sufficient to cover rent paid by participants, such that providers should no longer be permitted to charge rent.

The proposed rates do not include costs associated with room and board as such costs are specifically disallowed as a reimbursable expense under Medicaid rules. The rate study does not propose any

changes to policies related to the landlord-tenant relationship between providers and the individuals they serve.

21. *One commenter asked whether there will be changes to the methodology for adjusting authorized days of support when a participant moves to a new Supported Living agency during their plan year.*

DDSD's existing payment rates for Supported Living and Family Living are based on a 340-day billing year. That is, the assumed annual cost of service delivery is divided by 340 days rather than 365 days, resulting in rates about 7.4 percent higher than they would be based on a 365-day billing year. This methodology recognizes that provider costs are mostly fixed when an individual experiences a temporary absence and ensures that providers are fully paid for a year of support as long as the participant is in the home for at least 340 days. Since providers are fully paid for a full year of service after 340 billing days, they cannot bill for more than 340 days in a year. The proposed rate models continue to assume a 340-day billing policy.

Individuals occasionally change their residential services provider during their plan year. To avoid disadvantaging the new provider, DDSD's policy includes a methodology for prorating days. Specifically, the policy requires that the initial provider bill the number of calendar days services were provided multiplied by 93 percent. The new provider bills the remaining days in the year up to 340 days. The rate study originally proposed to change this methodology by resetting the billing limit when an individual changes providers, but after further consideration, that recommendation has been withdrawn.

FAMILY LIVING

22. *One commenter asked whether the Family Living rate will decrease if substitute care is no longer bundled.*

The rate study proposes to unbundle substitute care from the Family Living payment rates. Instead, up to 750 annual hours of substitute care (respite) could be authorized for individuals receiving Family Living and providers would bill for the supports actually provided.

The proposed Family Living rate (\$203.23) without the cost of substitute care is 6.0 percent higher than the current rate (\$191.71). If an agency provides 750 hours of substitute care, the total combined payment for Family Living and substitute care would be 55.9 percent greater than the current total.

23. *One commenter stated the Jackson classification is no longer available, noting these individuals can receive up to 1,000 hours of substitute care annually, rather than 750 hours for non-Jackson class members.*

Payment rates and policies associated with the Jackson class are outside of the scope of the rate study.

IN-HOME LIVING SUPPORTS (MI VIA)

24. *One commenter asked whether the rates presented on slide 47 of the public comment presentation applied to in-home supports covered through the DD Waiver (such as Customized In-Home Support) as well as In-Home Living Support (IHLS) through the Mi Via Waiver.*

The referenced slide refers only to the proposed IHLS rates. Rates for Customized In-Home Supports were described on slide 48.

The proposed rates for IHLS reflect the existing convention in which providers bill an hourly rate for days during which fewer than four hours of service are provided and a daily rate for days during which more than four hours are provided. The hourly rate is tied to DSP compensation assumptions (including wages and benefits, but excluding the cost of payroll taxes that are added to the billed rate) in the rate model for Customized In-Home Support. The daily rate is tied to the proposed rate for Family Living except that the Family Living rate is based on a 340-day billing year whereas the IHLS rate is based on a 365-billing year.

PROFESSIONAL AND LICENSED SERVICES – GENERAL

25. Multiple commenters objected to the recommendation to combine standard and incentive rates into a single rate under the rate proposal. Commenters believe the availability of a higher incentive rate supports greater access to services in rural and outlying areas where there are fewer qualified providers and these providers must travel longer distances to deliver services. Commenters stated that eliminating the incentive rates for professional and licensed services will restrict access to these services in rural and outlying areas because providers will not have a financial incentive to drive long distances if they can earn the same rate in a local area.

The current fee schedules for the DD and Mi Via Waivers include higher ‘incentive’ rates for several services: Behavior Supports Consultation, Therapies, Preliminary Risk Screening and Consultation Related to Inappropriate Sexual Behavior (DD Waiver only), and Socialization and Sexuality Education (DD Waiver only). These rates were originally developed to recognize greater travel burdens in more rural parts of the state. Over time, the list of counties in which the incentive rates apply has expanded and these lists now vary by service. Currently, all Preliminary Risk Screening and Consultation Related to Inappropriate Sexual Behavior and Socialization and Sexuality Education services are reimbursed at the incentive rates while 23 of 32 counties are classified as incentive areas for Behavior Support Consultation and 26 counties are classified as incentive areas for Therapies.

Recognizing that most counties have been designated as incentive areas and to simplify waiver administration, the rate study recommended the elimination of separate standard and incentive rates. However, in response to public comments, separate incentive rate models were developed, incorporating more travel time and mileage.

26. Multiple commenters objected to the recommendation to establish lower telehealth rates for Therapies, Behavior Support Consultation, and Adult Nursing, stating:

- ***DDSD has not formally defined the activities that would be allowed under a telehealth model, such as remote training sessions, therapy sessions, meetings, plan development, and emergency coordination. DDSD has not yet adopted telehealth policies recommended through a prior rate study, including establishment of clinical guidelines, licensing and credentialing requirements, technology training, and privacy and security protocols.***
- ***Regardless of whether services are delivered face-to-face or remotely through a telehealth model, services require the same level of licensing and training and thus rates should not be reduced when services are delivered through a remote or telehealth model.***
- ***Telehealth services often require travel to drive to a secure location to take telehealth calls (e.g., while they are already in the community facilitating other appointments).***
- ***Telehealth is a needed modality when providers are already traveling to distant appointments to coordinate other appointments where it may not be practical or necessary***

to deliver face-to-face services. Telehealth is also useful as a tool for crisis response when it may not be possible to deliver services face-to-face due to unplanned scheduling needs. It may also be used when a participant is sick with a contagious illness.

- ***Telehealth was authorized during the pandemic under federal flexibility guidance, and that continued use must remain clinically justified, individually authorized, and cost-accounted separately.***

The rate study recommended the development of telehealth rates for most professional and licensed services. The draft models utilized the same assumptions as the corresponding rate models for non-telehealth services, but omitted travel time (a productivity adjustment) and mileage. However, in response to public comments, the proposal to establish separate telehealth rates has been withdrawn to allow for additional time for DDS to develop telehealth policies in consultation with providers and stakeholders.

- 27. Multiple commenters objected to the rate model assumption that direct care staff are employees rather than contractors, stating that the model does not recognize the higher wages for contractors, their inability to recoup administrative costs, and the non-billable workload they carry. Several commenters noted that the 40-hour workweek assumed in the rate models is not realistic, and that many waiver therapists routinely work double their billable hours to meet participant needs. These commenters stated that adopting an employment model amid 55-70 hour average workweeks would trigger substantial FLSA overtime requirements. Multiple commenters stated that although the rate study applied a productivity adjustment, it did not account for the fee-for-service reimbursement structure under which waiver therapy and BSC services are delivered. Therapists and BSCs are compensated based on billable units rather than standardized wages, and higher caseloads generated higher earnings compared to clinical wage benchmarks.***

As noted by the commenters and discussed in the response to comment 11, the proposed rate models assume that direct care staff are employees. In particular, the rate models assume that staff are paid an hourly wage, receive benefits, and are paid for each hour they work.

The rate models assume a 40-hour workweek, but staff working more or less would be expected to earn more or less. For example, a therapist working 20 hours per week would be estimated to generate half as much revenue and earn half as much compensation as assumed in the rate model. Similarly, a therapist working 60 hours per week would be expected to generate proportionally more revenue and earn proportionally more income. Current FLSA requirements allow exemption from overtime pay for annual salaries in excess of \$35,568. The wages assumed in the rate models for professional and licensed services substantially exceed this threshold.

Although the rate models assume an employment model, DDS does not mandate a specific staffing model. For example, consistent with applicable laws, providers could contract with staff. In such a model, the provider could combine the wage, benefits, productivity, and mileage assumptions within the rate models into an hourly rate they pay their contractor for each billable hour.

THERAPY SERVICES

- 28. Multiple commenters stated the recommended rates for Therapy Services were insufficient, arguing that the rate model does not accurately account for non-billable activities, nor does it reflect the lack of current providers or costs associated with serving rural communities. One commenter suggested the rate models should be adjusted to ensure they minimally match the current rates. Commenters expressed support for retaining the current rates.***

The proposed rate models for Therapy Services follow the same as for other services. Wage assumptions for therapists are described in the response to comment 11, therapist productivity is described in the response to comment 15, and overhead is discussed in the response to comment 16. Based on these assumptions, the rate study suggests that rates for Therapy Services should be decreased. HMA-Burns compared the recommended rates to those paid for other services and found the proposals to be comparable.

However, as discussed in the response to comment 2, DDS does not intend to adopt any rate reductions. Additionally, as discussed in the response to comment 25, the proposal to eliminate incentive rates for underserved areas has been withdrawn.

- 29. Multiple commenters objected to the productivity adjustments built into the proposed rate models for Therapy services. Commenters highlighted the need for productivity adjustments for travel, appointment cancellations, responding to emails and phone calls, and other activities required to comply with waiver service standards. Some commenters stated that only 8 to 10 hours per week in productivity adjustments were incorporated within the therapy rate models. Another commenter stated that DD Waiver productivity falls between 53 and 61 percent for therapy disciplines.**

As discussed in the response to comment 15, most rate models incorporate a productivity adjustment to account for time spent on non-billable activities. Before accounting for training and paid time off, the standard rate model for Therapy Services assumes that therapists spend more than 15 hours per week (within a 40-hour workweek) – not the 8 to 10 hours cited by commenters – on non-billable activities including travel time, missed appointments, progress notes/ medical records, supervision and employer time, and collateral contacts.

After accounting for training and paid time off, the standard rate model assumes a 63 percent productivity rate. Assumed productivity is generally lower than reported by therapy providers in the time study in which occupational therapists reported average productivity levels of 70 percent, physical therapists reported 78 percent, and speech language pathologists reported 59 percent.

- 30. Multiple commenters expressed support for the recommendation to establish rate parity between occupational therapists, physical therapists, and speech language pathologists and between occupational therapy assistants and physical therapy assistants.**

As noted by the commenters, the rate study recommends standardizing payment rates for Therapy services. Since the Bureau of Labor Statistics wage data used to develop the rate models (as discussed in the response to comment 9) report different typical wages across disciplines, the rate study used the highest wage across disciplines (speech language pathologist for therapists and occupational therapy assistants for assistants). This approach ensures that no discipline is disadvantaged. DDS appreciates the support for this recommendation.

BEHAVIOR SUPPORT CONSULTATION

- 31. Multiple commenters objected to the proposed reduction to the rates for Behavior Support Consultation. One commenter suggested the rates should be the same as those for therapy services.**

The proposed rates are based on market-based wage and benefit cost data, productivity information based on the time study conducted as part of the rate study, and standard overhead (program support and administrative assumptions) used across all rate models.

Based on the change to the wage assumption described in the response to comment 13, the proposed standard Behavior Support Consultation rate represents a small increase compared to the current rate. Additionally, as discussed in the response to comment 25, HMA-Burns developed an incentive rate model that produced a rate greater than the existing rate.

SOCIALIZATION AND SEXUALITY EDUCATION

32. *One commenter stated that the proposed rates were insufficient to support the cost of classes, especially in rural areas where it is already difficult to recruit teachers to deliver the classes.*

The proposed rate model for Socialization and Sexuality Education follow the same approach utilized for all other rate models.

The current rate methodology is built on an employee model (with no adjustment for contracted workers as in other models) that calculates an hourly rate based on the assumption for the course teacher's wages and benefits, a productivity factor, mileage, administration and program support. The assumed hourly cost is multiplied by 6 hours to arrive at the rate for a course per participant.

The proposed rate methodology similarly considers the wages and benefits of the lead course teacher, a peer (assistant) mentor, and productivity adjustments that vary by role. The hourly cost of each position is rolled-up to a staff cost per series (assuming eight classes per series, and five hours for the lead teacher and three hours for the peer mentor per class for set-up, travel, conducting the course, and related activities). Mileage, program support, and administration are also added. The total cost is divided by an assumed eight participants per class, producing a per participant rate of \$529.68 per series, slightly lower than the current rate of \$536.88.

However, as discussed in the response to comment 2, DDS does not intend to implement any rate reductions.

MUSIC THERAPY SERVICES

33. *One commenter objected to the proposed rate for Music Therapy, stating it was too high in relation to the current rate for Speech Therapy, stating that Music Therapy is a highly scripted supportive/adjunctive enrichment service rather than a licensed rehabilitation specialty.*

The proposed rate for Music Therapy (\$37.50 per 15 minutes) is based on research of private market rates charged by providers in New Mexico, which found a median rate of \$150 per hour and an average of about \$144. The proposed rate is substantially lower than the current standard rate of \$48.93 for Speech Therapy services.

COGNITIVE REHABILITATION THERAPY

34. *Multiple commenters stated that Cognitive Rehabilitation Therapy should not be a standalone service as it already provided within the scope of practice for speech language pathologists (SLPs). These commenters recommended that this service be eliminated or that the qualifications for this service be limited to SLPs. The commenters also stated the methodology for the proposed rate is unclear as the rate did not include BLS classification code or service description.*

Cognitive Rehabilitation Therapy (CRT) already exists in the Mi Via Waiver, which defines the goal of the service to:

...improve cognitive functioning by reinforcing, strengthening, or reestablishing previously learned patterns of behavior, or establishing new patterns of cognitive activity or compensatory mechanisms for impaired neurological systems. Treatments may be focused on improving a particular cognitive domain such as attention, memory, language, or executive functions. Alternatively, treatments may be skill-based, aimed at improving performance of activities of daily living. The overall goal is to restore function in a cognitive domain or set of domains or to teach compensatory strategies to overcome specific cognitive problems.

The standards require that providers be licensed in a health care profession with a scope of practice that includes CRT and that they have appropriate specialized training and clinical experience and supervision. Neither the definition nor qualification requirements preclude an SLP from delivering the service, while other disciplines may also deliver the service if it is in the scope of their license and practice. The rate study does not propose changes to the definition or qualification requirements.

Rather than developing a rate model for this service, the rate study proposes a maximum rate of \$56.25 per 15 minutes based on research into private market rates.

COST-BASED SERVICES – ASSISTIVE TECHNOLOGY AND ENVIRONMENTAL MODIFICATIONS

- 35. Multiple commenters expressed support for the recommended increases of \$5,000 per year for Assistive Technology and \$25,000 for a five-year period for Environmental Modifications. One commenter expressed concern that these increases were too large and could lead to inflated contractor bids and a potential shift to a payor of first resort instead of primary insurers.***

DDSD appreciates the support for the recommendations to increase the funding limits for these services. The proposal was based on a review of limits in other states' programs for individuals with intellectual and developmental disabilities. Medicaid continues to be a payor of last and existing controls will continue to be followed to ensure fiscal responsibility.

- 36. One commenter stated that administrative fees that are part of most cost-based services directly impact budgets, which is especially harmful to families in rural and tribal areas where service delivery is more costly.***

Most cost-based services include an administrative fee to recognize providers' costs to research and coordinate purchases. For example, Assistive Technology includes a 15 percent administrative fee. No changes are proposed to existing administrative fee policies for cost-based services. Recognizing that these fees discount an individual's budget, the cost limits have all been increased as part of the rate proposal (with the exception of Personal Support Technology, which is proposed to remain at the current level).

**Attachment 3 - Case Management and Consultant Services Provider
Survey Instructions and Instrument**

New Mexico Health Care Authority
Developmental Disabilities Supports Division

**Home and Community Based Services (HCBS)
Rate Study**

**Provider Survey – Case Management and
Consulting Services
Supplemental Instructions**

August 28, 2025

– distributed by –

BURNS & ASSOCIATES

A Division of Health Management Associates

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INTRODUCTION

The New Mexico Health Care Authority's Developmental Disabilities Supports Division (DDSD) is in the process of reviewing payment rates for services covered under the Developmental Disabilities, Mi Via, and Medically Fragile Waivers. Burns & Associates, a division of Health Management Associates (HMA-Burns), has been contracted to assist with this effort.

As part of the study, HMA-Burns has developed a survey to collect data regarding providers' service delivery designs and costs. These instructions are intended to assist providers in the completion of the survey.

DDSD recognizes that completing this survey will require considerable work on the part of agencies, but feels it is essential to ensure a thorough evaluation of payment rates. The quality of the results of this study will be dependent upon the quality and accuracy of the information provided by agencies.

Data collected through this survey will be used solely for the purpose of evaluating providers' costs. **Only aggregated data will be publicly reported; no provider-specific information will be published.**

This supplemental instructions manual is to accompany the provider survey for Case Management & Consulting services delivered under the Developmental Disabilities, Mi Via, and Medically Fragile Waivers. A separate survey is being issued for most other HCBS covered under these waivers.

Assistance with the Survey

HMA-Burns recognizes that the survey can be complicated, so several resources have been implemented to assist providers in completing the survey:

- Agencies are encouraged to read these instructions.
- Specific directions for many questions are embedded in the survey itself and are designated with an  icon. Providers can access the instructions by clicking in any cell that contains these icons.
- Questions regarding the survey can be directed to Derek Barber on the HMA-Burns rate study team at DDSD-Rate-Study@healthmanagement.com or (517) 993-9229.

Overview of the Survey

The survey is a Microsoft Excel workbook and is compatible with Excel 2010 and newer versions. Broadly, it is designed to collect information in four primary areas:

- Administrative and program support staff wage and benefit costs
- Direct care worker costs, including wages and benefits
- Non-staff expenses
- Service-specific caseloads and other factors

Cost and revenue details should be reported for the most recent 12-month period for which your agency has reliable data to report. The survey includes a form to report changes to revenues and expenses that have occurred since the reporting period.

Throughout the survey, fields in which users may record data are shaded in light green. Some fields are restricted to only accept numeric answers or require respondents to select a pre-defined value from a drop-down list. Examples are shaded in grey. Dark green fields are automatically calculated based upon other responses.

All providers should complete the forms related to administrative and program support staff, direct care workers, and non-staff expenses. Each service included in the survey has one or more specific forms. Agencies should only complete the forms for the services they provide.

Completing and Submitting the Survey

All reported revenue and cost data should reflect actual results from the most recent 12-month period for which your agency has complete and reliable information.

Partially completed surveys will be accepted. If any information requested in the survey is unavailable, leave that field blank. Similarly, if there is any schedule that your agency cannot complete, that form may be skipped. Even if a submitted survey is incomplete, the information that your agency can provide will be considered as part of the analysis of survey responses.

When saving the survey, please add your agency's name to the beginning of the file name. For example: "ABC Agency - DDSD HCBS Provider Survey".

The deadline for submitting completed surveys is September 30th, 2025. Submit completed surveys to Derek Barber on the HMA-Burns rate study team at DDSD-Rate-Study@healthmanagement.com.

If there are any factors that you believe should be considered but were not included in the survey, note those issues (and any other comments) in the transmittal email when submitting the survey. You may also submit any other documentation that you would like considered as part of this study.

The remainder of this document provides additional instructions for completing the forms included in the survey.

DEFINITIONS OF ADMINISTRATION, PROGRAM SUPPORT, AND DIRECT CARE

The survey asks providers to differentiate between direct care, program support, and administrative costs. There are not always clear distinctions between these categories and definitions of these terms vary. For the purposes of this survey, the following guidelines should be used:

- | | |
|-----------------|---|
| Administration | Includes expenses associated with the general operation of your agency, but which are not program-specific and which cannot be allocated to individual services or service recipients. Employees that are typically considered administrative include general management (such as an agency's president/ CEO or directors), finance/ accounting, information technology, and human resource staff and contractors. Expenses associated with these staff (for example, their office space, supplies, transportation expenses, etc.) are also considered administrative. Other examples of administrative expenses include office equipment and furniture, office supplies, general insurance, and other operating expenses that cannot be allocated to specific programs, services, or service recipients. |
| Program Support | Includes expenses that are program-specific, but not part of direct service delivery. Examples include first-line supervisors as well as staff responsible for clinical oversight, program design, quality assurance, and training of direct care workers. Expenses associated with these staff (for example, their office space) are also considered program support. Other examples of program support expenses include accreditation and professional licensing fees, software and devices for performing case management and related tasks, personal protective equipment for staff providing services, and similar expenses. |
| Direct Care | Includes the salaries and benefits of staff providing direct, billable Case Management or Consultant services as well as activities specifically related to direct care. For example, time spent traveling between service visits and writing progress notes after a billable service should be categorized as direct care even though that time may not be directly billable. Direct care also includes the facility in which Case Management or Consulting services are delivered (e.g., office space in which case managers use to perform billable tasks). |

ADMINISTRATIVE COSTS

The survey includes two forms to collect information regarding administrative costs. The first – Admin & Program Staff – covers payroll and fringe benefit costs for all administrative and program support staff. The second – Non Staff Expenses – covers all other non-staff costs. The survey will be used to calculate overall organizational administrative and program support rates so all administrative and program support staff and costs should be reported, not just those supporting DDSD programs.

‘Admin & Program Staff’: Administrative and Program Support Staff–Wage and Benefit Costs

This form collects wage and benefit data for staff responsible for the administrative and program support functions of your organization while a second form, “Case Manager_ Consultant Wages,” collects payroll information for staff who provide direct, billable services as part of their primary job duties. **Staff should be listed on *only one* of the two wage forms (Admin & Prog Staff or Direct Care Wages) based on their primary function.** For example, if an employee performs both administrative and direct care duties but spends most of their time on administrative tasks, they should be reported on the Admin & Program Staff form and should *not* be reported on the Case Manager_ Consultant Wages form.

Job Title Enter the job titles for your agency’s administrative or program support staff. If your organization has multiple employees within a given job title (e.g., three Human Resource Specialists), you may list them in the same row if their time is allocated similarly (e.g., each spends 100 percent of their time on administrative functions; see the discussion below for the Allocation of Staff Time/ Cost columns).

Time Allocation For the staff listed on each line, there are two groupings of columns within the Time Allocation section and within the two groups, there are three available work functions to which you may allocate workers’ time (administration, program support, or direct care – see the Definitions section above for details around each of these categories).

The first column group is labeled “New Mexico I/DD & Med. Frag. Programs” and refers to the administration, program support, or direct care time devoted by the staff listed on each line to HCBS waiver in New Mexico. A second column group is labeled “Other Programs” and allows you to allocate time devoted under each work function (administration, program support, or direct care) to all other programs. For each applicable column, enter a percentage. The total across the six columns for each row should equal 100 percent. Although this sheet is only intended to capture information regarding administrative and program support staff, the direct care columns are included because reported staff may have direct care duties at times.

If your agency does not already have a methodology for allocating costs across programs, it is recommended that your organization allocate expenses based on program revenues. Alternatively, an agency can conduct an internal time study in which administrative and program support staff maintain logs and record (no less frequently than once per hour) the program on which they are working. After that week, each employee’s time would be allocated based on their log. For example, if an employee worked 40 hours during the week and 10 of their hours were related to administration of New Mexico’s HCBS waiver programs, 25 percent of that employee’s time (10 hours divided by 40 hours) would be allocated to administration). As appropriate, the remaining 75 percent of the time would need to be allocated to other functions until the allocation equals 100 percent. If a time study is not feasible for your organization, contact HMA-Burns to discuss other potential allocation methodologies.

Non Staff Expenses: Expenses Other Than Staff Salary and Benefits

Use this form to report information for expenses other than staffing/ payroll costs (that are reported on the Admin & Program Staff form and the Direct Care Wages form).

Expense Categories Report the total expense incurred by your agency in the reporting period for each expense line on the form. Lines 29 through 33 are available to report expenses that do not fit into the other expense categories.

It is understood that there may be some differences regarding how agencies categorize their expenses. Agencies are not required to report an amount for each listed expense and should use the categories that are closest to their own accounting classifications. For example, an agency’s accounting system may combine advertisement expenses for job postings with other advertising expenses. In this case, the agency can report its total advertisement expense on Line 22 (advertising) rather than trying to break out the advertisement expense related to job postings on Line 17.

CASE MANAGER/CONSULTANT STAFF COSTS

The survey includes two forms to collect information regarding direct care worker costs. The first form – Case Manager_ Consultant Wages – covers number of paid hours, payroll and benefit costs for all staff who delivered billable Case Management or Consultant services during the reported period (including employees and contractors), as well as turnover rates, and training. The second form – Case Manager_ Consultant Benefits – covers information related to fringe benefits offered to staff who currently deliver billable Case Management or Consultant services (including health insurance, paid time off, and other benefits) as well as details about required payroll taxes, including workers’ compensation and state unemployment insurance contributions.

For the purpose of the survey, the term ‘Direct Care Worker’ refers to all agency employees and contractors who deliver billable Case Management or Consultant services covered by the Developmental Disabilities, Mi Via, and Medically Fragile waivers. Agencies do not need to include direct care workers who do not provide Case Management or Consultant services.

‘Case Manager_ Consultant Wages’: Case Manager/ Consultant – Wages and Training

This form collects information regarding the wages paid to your agency’s direct care staff, including staff employed or contracted by your agency to provide direct care or billable services. Providers do not need to list direct care workers who did not deliver Case Management or Consultant services during the reported 12-month period.

Under the Job Titles column, report staff individually or grouped by job title (e.g., “Case Managers” or “Nurse Case Managers”, etc.). Do not group staff with different employment classifications (i.e., do not report employees and contractors on the same line) or job functions (i.e., do not include supervisory and non-supervisory staff on a single line even if they work under the same job title).

‘Case Manager_ Consultant Benefits: Case Manager/ Consultant – Fringe Benefits

This form collects current benefit and select mandatory payroll contributions and payments for staff who currently provide direct, billable Case Management or Consultant services. The form is divided into two columns to separately report benefit details for full-time employees (defined as employees who work at least 30 hours per week) or part-time employees (employees who work less than 30 hours per week). The form includes questions about the number of staff who are eligible for and/ or participate in a given benefit (including holidays, paid time off (PTO), vacation, and sick time), health insurance, and all other benefits), as well as the average benefit level (for example, the average monthly employer-paid health insurance premium) among direct care workers. The form also collects information about State of New Mexico unemployment insurance payment rates and workers compensation costs.

OTHER SERVICE/ WAIVER SPECIFIC FORMS

The remainder of the survey includes forms that collect service specific details about Case Management or Consulting Services by waiver. Complete the form(s) based on the services you currently deliver.

New Mexico Health Care Authority
Developmental Disabilities Supports Division

**Home and Community Based Services (HCBS)
Rate Study**

Provider Survey - Case Management & Consultant Services

– distributed by –

BURNS & ASSOCIATES
A Division of Health Management Associates

August 28, 2025

Please complete and submit your survey to ddsd-rate-study@healthmanagement.com by **September 30, 2025**.

Questions? Contact Derek Barber with Health Management Associates at ddsd-rate-study@healthmanagement.com or (517) 993-9229.

Contact Information and Revenues (click ⓘ icons for directions)

Line	Factor	Input
Contact Information		
1	Agency name	
2	Contact name	
3	Title of the person listed on Line 2	
4	Phone number for the person listed on Line 2	
5	Email address for the person listed on Line 2	
Attestation - By submitting this survey, you hereby certify that all information reported is true and accurate to the best of your knowledge.		
6	Name of the CEO/ Executive Director/ CFO attesting to accuracy of the survey	
7	Title of the person listed on Line 6	
8	Phone number for the person listed on Line 6	
9	Email address for the person listed on Line 6	
Financial Data Reporting		
10	End date of the 12-month period for which revenue and cost data is reported (enter as "M/D/YYYY")	
Annual Agency Revenues for Most Recent 12-Month Period for Which You Have Reliable and Complete Data		
11	All revenues used to support your HCBS Waiver Case Management/ Consultant Services in New Mexico	
12	All Other agency revenues	
13	Total Revenues	\$0

Administrative and Program Support Staff - Wage and Benefit Costs (see p. 5 of the instructions and click ⓘ icons for directions)

*Include only those staff who perform administrative and program support functions for your agency's DDSD HCBS Case Management/ Consultant service programs ⓘ
Report costs for your agency's most recent 12-month period for which you have reliable and complete data.*

Line	Job Title ⓘ	# of Staff ⓘ	Total Actual Wages ⓘ	Actual Cost of Benefits ⓘ							Time Allocation ⓘ					
				Social Security and Medicare ⓘ	Federal and State Unemployment Insurance ⓘ	Workers' Compensation ⓘ	Health Insurance ⓘ	Other Insurance ⓘ	Retirement ⓘ	Other Benefits ⓘ	New Mexico I/DD & Med. Frag. Programs ⓘ			Other Programs ⓘ		
											Administration ⓘ	Program Support ⓘ	Direct Care ⓘ	Administration ⓘ	Program Support ⓘ	Direct Care ⓘ
Ex.	Executive Director	1	\$75,000	\$5,588	\$394	\$1,500	\$4,800		\$1,500	\$150	50%	0%	0%	50%	0%	0%
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3																
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Administrative and Program Support Staff - Wage and Benefit Costs (see p. 5 of the instructions and click ⓘ icons for directions)

Include only those staff who perform administrative and program support functions for your agency's DDSD HCBS Case Management/ Consultant service programs ⓘ

Report costs for your agency's most recent 12-month period for which you have reliable and complete data.

Line	Job Title ⓘ	# of Staff ⓘ	Total Actual Wages ⓘ	Actual Cost of Benefits ⓘ							Time Allocation ⓘ					
				Social Security and Medicare ⓘ	Federal and State Unemployment Insurance ⓘ	Workers' Compensation ⓘ	Health Insurance ⓘ	Other Insurance ⓘ	Retirement ⓘ	Other Benefits ⓘ	New Mexico I/DD & Med. Frag. Programs ⓘ			Other Programs ⓘ		
											Administration ⓘ	Program Support ⓘ	Direct Care ⓘ	Administration ⓘ	Program Support ⓘ	Direct Care ⓘ
Ex.	Executive Director	1	\$75,000	\$5,588	\$394	\$1,500	\$4,800		\$1,500	\$150	50%	0%	0%	50%	0%	0%
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Case Manager/ Consultant - Wages and Training
 (see p. 7 of the instructions and click ⓘ icons for directions)

Provide responses for the agency's most recent 12-month period for which you have reliable and complete data.

Include only individuals who provide billable DDSD HCBS Case Management/ Consultant services

Line	Job Titles ⓘ	Employee/ Contractor ⓘ	Super- visor? ⓘ	If Supervisor, Average # of Staff Supervised ⓘ	What is the basis of payment to these individuals? Select from drop down ⓘ	If 'Other' is selected, describe the basis for payment (e.g., 'Per month') ⓘ	If 'Other' is selected, report the average payment amount	If 'per case' is selected, report the average payment per case, per month	Total Hours Paid ⓘ	Total Wages Paid ⓘ	Average Hourly Wage ⓘ
Ex.	Case Manager	Employee	No		Per hour				4,160	\$103,750	\$24.94
1											
2											
3											
4											
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Case Manager/ Consultant - Wages and Training
 (see p. 7 of the instructions and click ⓘ icons for directions)

Provide responses for the agency's most recent 12-month period for which you have reliable and complete data.

Include only individuals who provide billable DDSD HCBS Case Management/ Consultant services

Line	Job Titles ⓘ	Employee/ Contractor ⓘ	Super- visor? ⓘ	If Supervisor, Average # of Staff Supervised ⓘ	What is the basis of payment to these individuals? Select from drop down ⓘ	If 'Other' is selected, describe the basis for payment (e.g., 'Per month') ⓘ	If 'Other' is selected, report the average payment amount	If 'per case' is selected, report the average payment per case, per month	Total Hours Paid ⓘ	Total Wages Paid ⓘ	Average Hourly Wage ⓘ
21											
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Case Manager/ Consultant - Wages and Training
 (see p. 7 of the instructions and click ⓘ icons for directions)

Provide responses for the agency's most recent 12-month period for which you have reliable and complete data.

Include only individuals who provide billable DDSD HCBS Case Management/ Consultant services

Line	Job Titles ⓘ	Employee/ Contractor ⓘ	Super- visor? ⓘ	If Supervisor, Average # of Staff Supervised ⓘ	What is the basis of payment to these individuals? Select from drop down ⓘ	If 'Other' is selected, describe the basis for payment (e.g., 'Per month') ⓘ	If 'Other' is selected, report the average payment amount	If 'per case' is selected, report the average payment per case, per month	Total Hours Paid ⓘ	Total Wages Paid ⓘ	Average Hourly Wage ⓘ
42											
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62											

Case Manager/ Consultant - Wages and Training (cont.)

Line	Job Titles ⓘ	Actual Cost of Benefits (report only if applicable to staff reported on each line) ⓘ						Annual Turnover ⓘ	Staff Training Hours		
		Social Security and Medicare ⓘ	Federal and State Unemployment Insurance ⓘ	Workers' Compensation ⓘ	Health Insurance ⓘ	Other Insurance ⓘ	Retirement ⓘ		Other Benefits ⓘ	1st Year (Per Staff Avg.) ⓘ	Following Years (Per Staff Avg.) ⓘ
Ex.	Case Manager	\$2,682	\$394	\$720	\$4,800			\$2,250	25%	40	20
1											
2											
3											
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Case Manager/ Consultant - Wages and Training (cont.)

Line	Job Titles ⓘ	Actual Cost of Benefits (report only if applicable to staff reported on each line) ⓘ						Annual Turnover ⓘ	Staff Training Hours	
		Social Security and Medicare ⓘ	Federal and State Unemployment Insurance ⓘ	Workers' Compensation ⓘ	Health Insurance ⓘ	Other Insurance ⓘ	Retirement ⓘ		Other Benefits ⓘ	1st Year (Per Staff Avg.) ⓘ
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22										
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Case Manager/ Consultant - Wages and Training (cont.)

Line	Job Titles ⓘ	Actual Cost of Benefits (report only if applicable to staff reported on each line) ⓘ						Annual Turnover ⓘ	Staff Training Hours	
		Social Security and Medicare ⓘ	Federal and State Unemployment Insurance ⓘ	Workers' Compensation ⓘ	Health Insurance ⓘ	Other Insurance ⓘ	Retirement ⓘ		Other Benefits ⓘ	1st Year (Per Staff Avg.) ⓘ
42										
43										
44										
45										
46										
47										
48										
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52										
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Case Managers/ Consultants - Fringe Benefits (see p. 7 of the instructions and click ⓘ icons for directions)

Report current benefit information.

Include only employees (not contractors) who provide billable Case Management or Consultant Services

Line	Factor	Example	Full-Time	Part-Time	ⓘ
Staffing					
1	How many employees, who provide Case Management or Consulting Services to individuals, does your agency currently employ?	30			ⓘ
Holidays					
2	Are Case Managers/ Consultants eligible for holiday pay?	Yes			ⓘ
3	Of the Case Managers/ Consultants listed on Line 1, number currently eligible for holiday pay	22			
4	Average annual number of holidays (days, not hours) received by eligible direct care workers	10			
Paid Time Off (PTO, Vacation and Sick Time)					
5	Are Case Managers/ Consultants eligible to receive paid time off, in addition to holidays?	Yes			ⓘ
6	Of the Case Managers/ Consultants listed on Line 1, number currently eligible for PTO	18			
7	Average annual number of PTO days (not hours) received by eligible Case Managers/ Consultants	10			
Health Insurance					
8	Are Case Managers/ Consultants eligible to receive health insurance through your agency?	Yes			ⓘ
9	Of the Case Managers/ Consultants listed on Line 1, number currently eligible for health insurance	15			
10	Of the eligible Case Managers/ Consultants listed on Line 9, number currently receiving health insurance from your agency	10			
11	Your agency's total contribution to health insurance costs in the previous month for the staff listed on Line 10	\$4,650			
12	Calculated average monthly cost per participating Case Managers/ Consultant	\$465			ⓘ
Other Benefits					
13	Does your agency contribute to any other benefits for Case Managers/ Consultants (e.g. disability, dental, etc.)?	No			ⓘ
14	[If yes, please specify the benefit(s) here]				
15	Of the Case Managers/ Consultants listed on Line 1, number currently eligible for these benefits	-			ⓘ
16	Of the eligible Case Managers/ Consultants listed on Line 15, number currently receiving these benefits from your agency	-			
17	Your agency's cost in the previous month to provide these benefits for the Case Managers/ Consultants listed on Line 16	-			
18	Calculated average monthly cost per participating Case Managers/ Consultants ⓘ				ⓘ

Case Managers/ Consultants - Fringe Benefits (see p. 7 of the instructions and click ⓘ icons for directions)

Report current benefit information.

Include only employees (not contractors) who provide billable Case Management or Consultant Services

Line	Factor	Example	Full-Time	Part-Time	ⓘ
<i>State Unemployment Insurance and Workers' Compensation</i>					
19	If your agency makes New Mexico state unemployment insurance payments based on a percentage of wages, report your agency's state unemployment insurance tax rate for the reported fiscal year	1.50%			ⓘ
20	If your agency pays actual costs ("payments in lieu of contributions") of state unemployment insurance benefits claimed by former employees, report your agency's total unemployment insurance payments in the reported fiscal year				ⓘ
21	Average workers' compensation cost for Case Managers/ Consultants under your current policy (per \$100 in wages paid)?	\$1.89			ⓘ

Expenses Other Than Staff Salary and Benefits (see p. 6 of the instructions and click ⓘ icons for directions)

Report costs for your agency's most recent 12-month period for which you have reliable data; do not include any staff-related expenses.

Line	Category	Total Expense	New Mexico I/DD & Med. Frag Waiver Programs ⓘ			Other Programs ⓘ		
			Admin-istration ⓘ	Program Support ⓘ	Direct Care ⓘ	Admin-istration ⓘ	Program Support ⓘ	Direct Care ⓘ
Facility Expenses								
1	Facility rent/mortgage/depreciation							ⓘ
2	Facility repairs and modifications							
3	Facility maintenance/janitorial/landscaping/snow removal							
4	Facility utilities/telecommunications/etc.							ⓘ
Other Service-Specific Expenses								
5	Service related supplies [type description here]							ⓘ
6	Technology for case managers/ consultants (laptops, tablets, cell phones)							
7	Equipment and software for remote support and telehealth services							
8	Other service-specific expenses [type description here]							ⓘ
Travel Expenses								
9	Agency owned/leased vehicle expenses							
10	Reimbursement for use of staff personal vehicles							
11	Other travel related expenses (e.g., airfare for out of state travel)							
Taxes, Interest, and Insurance								
12	New Mexico Gross Receipts Taxes (GRT)							
13	Other taxes (exclude payroll taxes and personal income taxes)							
14	Interest expense (non-mortgage and non-vehicle)							
15	All general insurance (exclude vehicle insurance and staff benefits)							ⓘ

Expenses Other Than Staff Salary and Benefits (see p. 6 of the instructions and click ⓘ icons for directions)

Report costs for your agency's most recent 12-month period for which you have reliable data; do not include any staff-related expenses.

Line	Category	Total Expense	New Mexico I/DD & Med. Frag Waiver Programs ⓘ			Other Programs ⓘ		
			Admin-istration ⓘ	Program Support ⓘ	Direct Care ⓘ	Admin-istration ⓘ	Program Support ⓘ	Direct Care ⓘ
Other Operating Expenses								
16	Licensing/certification/accreditation fees							
17	Hiring expenses (e.g., advertising, background checks, placement fees, etc.)							ⓘ
18	Training Expense (e.g., fees and materials; exclude staff payroll costs)							ⓘ
19	Office equipment and furniture							
20	Information technology expense (e.g., computers and software)							ⓘ
21	Office supplies (include postage)							
22	Advertising							
23	Dues and subscriptions							ⓘ
24	Professional consulting - legal/accounting/payroll processing fees/etc.							ⓘ
25	Staff immunizations							
26	Personal protective equipment							
27	Allocated corporate office overhead							ⓘ
28	[If Overhead is reported in Line 27, describe allocation methodology here]							
29	Other 1	[type description here]						ⓘ
30	Other 2	[type description here]						ⓘ
31	Other 3	[type description here]						ⓘ
32	Other 4	[type description here]						ⓘ
33	Other 5	[type description here]						ⓘ
34	Total Non-Staff Expenses		\$0	\$0	\$0	\$0	\$0	\$0

Case Management - Developmental Disabilities Waiver (click [i](#) icons for directions)

Line	Factor	Example	Input
<i>Service Design</i>			
1	Number of individuals for whom your agency currently provides case management	12	
2	Average number of case management contacts per individual per year i	12	
3	Of these, how many are face-to-face contacts in the individual's home?	4	
4	Average current caseload per Case Manager (on an FTE basis) i	28	
5	Average number of hours (direct and indirect) Case Managers provide per individual case, per month i	3	
<i>Mileage and Factors</i>			
6	Average miles driven per week per Case Manager to travel between individuals i	75	
7	Average miles driven per week per Case Manager to transport individuals i	80	
8	Does your agency provide dedicated office space to Case Managers? i	Yes	
9	Does your agency fund the cost of technology used by Case Managers (such as laptops, tablets, or cell phones)?	Yes	

Case Management - Medically Fragile Waiver (click ⓘ icons for directions)

Line	Factor	Example	Input
<i>Service Design</i>			
1	Number of individuals for whom your agency currently provides case management	35	
2	Average number of case management contacts per individual per year ⓘ	12	
3	Of these, how many are face-to-face contacts in the individual's home?	4	
4	Average current caseload per Case Manager (on an FTE basis) ⓘ	28	
5	Average number of hours (direct and indirect) Case Managers provide per individual case, per month ⓘ	3	
<i>Mileage and Factors</i>			
6	Average miles driven per week per Case Manager to travel between individuals ⓘ	75	
7	Average miles driven per week per Case Manager to transport individuals ⓘ	80	
8	Does your agency provide dedicated office space to Case Managers? ⓘ	Yes	
9	Does your agency fund the cost of technology used by Case Managers (such as laptops, tablets, or cell phones)?	Yes	

Consultant Services (click ⓘ icons for directions)

Line	Factor	Example	Input
<i>Service Design - On-going Consultant Services</i>			
1	Number of individuals for whom your agency currently provides Consultant services	45	
2	Number of Consultant contacts per individual per year ⓘ	12	
3	Of these, how many are face-to-face contacts in the individual's home?	4	
4	Average current caseload per Consultant (on an FTE basis) ⓘ	28	
5	Average number of hours (direct and indirect) Consultants provide per individual case, per month ⓘ	3	
<i>Mileage and Factors</i>			
6	Average miles driven per week per Consultant to travel between individuals ⓘ	75	
7	Average miles driven per week per Consultant to transport individuals ⓘ	80	
8	Does your agency provide dedicated office space to Consultants? ⓘ	Yes	
9	Does your agency fund the cost of technology used by Consultants (such as laptops, tablets, or cell phones)?	Yes	

Revenue and Cost Changes After the Reporting Year

This form allows for reporting of revenue and cost changes in the current fiscal year compared to the 12-month period for which you reported financial data in this survey. For example, you may report higher estimated wage expenses for direct care workers.

When reporting changes, calculate the percentage increase or decrease compared to the actual costs reported on the reference form. Then describe what is driving the change (for example, the agency granted an across-the-board pay increase; travel reimbursements have increased as the pandemic has waned, etc.

Line	Est. Change in Current Year	Description of Change
<i>Revenues</i>		
1a		[Enter description]
1b		[Enter description]
1c		[Enter description]
1d		[Enter description]
1e		[Enter description]
<i>Administrative/ Program Support Staff - Wages</i>		
2a		[Enter description]
2b		[Enter description]
2c		[Enter description]
2d		[Enter description]
2e		[Enter description]

<i>Administrative/ Program Support Staff - Benefits</i>	
3a	[Enter description]
3b	[Enter description]
3c	[Enter description]
3d	[Enter description]
3e	[Enter description]
<i>Direct Care Worker - Wages</i>	
4a	[Enter description]
4b	[Enter description]
4c	[Enter description]
4d	[Enter description]
4e	[Enter description]

<i>Direct Care Worker - Benefits</i>		
5a		[Enter description]
5b		[Enter description]
5c		[Enter description]
5d		[Enter description]
5e		[Enter description]
<i>Facility Expenses</i>		
6a		[Enter description]
6b		[Enter description]
6c		[Enter description]
6d		[Enter description]
6e		[Enter description]

<i>Travel Expenses</i>	
7a	[Enter description]
7b	[Enter description]
7c	[Enter description]
7d	[Enter description]
7e	[Enter description]
<i>Other Operating Expenses</i>	
8a	[Enter description]
8b	[Enter description]
8c	[Enter description]
8d	[Enter description]
8e	[Enter description]

Attachment 4 – Other HCBS Provider Survey Instructions and Instrument

New Mexico Health Care Authority
Developmental Disabilities Supports Division

**Home and Community Based Services (HCBS)
Rate Study**

Provider Survey - Supplemental Instructions

August 28, 2025

– distributed by –

BURNS & ASSOCIATES

A Division of Health Management Associates

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INTRODUCTION

The New Mexico Health Care Authority's Developmental Disabilities Supports Division (DDSD) is in the process of reviewing payment rates for services covered under the Developmental Disabilities, Mi Via, and Medically Fragile Waivers. Burns & Associates, a division of Health Management Associates (HMA-Burns), has been contracted to assist with this effort.

As part of the study, HMA-Burns has developed a survey to collect data regarding providers' service delivery designs and costs. These instructions are intended to assist providers in the completion of the survey.

DDSD recognizes that completing this survey will require considerable work on the part of agencies, but feels it is essential to ensure a thorough evaluation of payment rates. The quality of the results of this study will be dependent upon the quality and accuracy of the information provided by agencies.

Data collected through this survey will be used solely for the purpose of evaluating providers' costs. **Only aggregated data will be publicly reported; no provider-specific information will be published.**

The following services are included in the rate study, listed by waiver. The services listed with asterisks (*) are included in the rate study but are *not* included in this provider survey due to limited utilization or because they are cost based goods or services. Case Management and Consulting Services are included in a separate survey being distributed to providers that deliver those services.

Developmental Disabilities Waiver Services

- Case Management (in a separate survey)
- Supported Living
- Supported Living, Non-Ambulatory Stipend*
- Intensive Medical Living Services
- Family Living
- Customized In-Home Supports
- Respite (Individual and Group)
- Customized Comm. Supp. (Indiv. and Group)
- Comm. Integrated Employ. (Job Development)
- Comm. Integrated Employ. (Job Main./ Intens.)
- Comm. Integrated Employ. (Job Coaching)
- Comm. Integrated Employ. (Self-Employment)
- Comm. Integrated Employ. (Group)
- Non-Medical Transportation*
- Behavioral Support Consultation
- Therapies
- Adult Nursing Services
- Adult Nursing Services
- Nutritional Counseling
- Preliminary Risk Screening*
- Socialization and Sexuality Education*
- Crisis Support
- Assistive Technology Purchasing Agent*
- Remote Personal Support Technology*
- Environmental Modifications*
- Independent Living Transition*
- Fiscal Mgt. of Adult Education Opportunities *

Mi Via Waiver

- Consultant Services (in a separate survey)
- Personal Plan Facilitation*
- In-Home Living Supports
- Homemaker/Direct Support*
- Home Health Aide*
- Respite*
- Customized Community Supports, Group*
- Community Direct Support*
- Job Developer*
- Nutritional Counseling Adults*
- Behavioral Support Consultation*
- Employment Supports (includes Job Coach)*
- Transportation*
- Therapies*
- Private Duty Nursing*
- Specialized Therapies*
- Environmental Modifications*
- Individual Directed Goods and Services*
- Emer. Response, Testing and Maintenance*

Medically Fragile Waiver

- Case Management (in a separate survey)
- Home Health Aide
- Respite
- Respite – Facility*
- Customized Community Supports (Group)
- Behavior Support Consultation
- Therapies
- Private Duty Nursing
- Nutritional Counseling
- Specialized Therapies (Massage Therapy)*
- Environmental Modifications*
- Individual Directed Goods and Services*
- Specialized Medical Equipment*
- SME and ID& G Fiscal Agent*
- Vehicle Modifications*

Assistance with the Survey

HMA-Burns recognizes that the survey can be complicated, so several resources have been established to assist providers in completing the survey:

- Agencies are encouraged to read these instructions.
- Specific directions for many questions are embedded in the survey itself and are designated with an  icon. Providers can access the instructions by clicking in any cell that contains these icons.
- Questions regarding the survey can be directed to Derek Barber on the HMA-Burns rate study team at DDSD-Rate-Study@healthmanagement.com or (517) 993-9229.

Overview of the Survey

The survey is a Microsoft Excel workbook and is compatible with Excel 2010 and newer versions. Broadly, it is designed to collect information in four primary areas:

- Administrative and program support staff wage and benefit costs
- Direct care worker costs, including wages and benefits
- Non-staff expenses
- Service-specific caseloads and other factors

Cost and revenue details should be reported for the most recent 12-month period for which your agency has reliable data to report. The survey includes a form to report changes to revenues and expenses that have occurred since the reporting period.

Throughout the survey, fields in which users may record data are shaded in light green. Some fields are restricted to only accept numeric answers or require respondents to select a pre-defined value from a drop-down list. Examples are shaded in grey. Dark green fields are automatically calculated based upon other responses.

All providers should complete the forms related to administrative and program support staff, direct care workers, and non-staff expenses. Each service included in the survey has one or more specific forms. Agencies should only complete the forms for the services they provide.

Completing and Submitting the Survey

All reported revenue and cost data should reflect actual results from the most recent 12-month period for which your agency has complete and reliable information.

Partially completed surveys will be accepted. If any information requested in the survey is unavailable, leave that field blank. Similarly, if there is any schedule that your agency cannot complete, that form may be skipped. Even if a submitted survey is incomplete, the information that your agency can provide will be considered as part of the analysis of survey responses.

When saving the survey, please add your agency's name to the beginning of the file name. For example: "ABC Agency - DDS HCBS Provider Survey".

The deadline for submitting completed surveys is September 30th, 2025. Submit completed surveys to Derek Barber on the HMA-Burns rate study team at DDS-D-Rate-Study@healthmanagement.com.

If there are any factors that you believe should be considered but were not included in the survey, note those issues (and any other comments) in the transmittal email when submitting the survey. You may also submit any other documentation that you would like considered as part of this study.

The remainder of this document provides additional instructions for completing the forms included in the survey.

DEFINITIONS OF ADMINISTRATION, PROGRAM SUPPORT, AND DIRECT CARE

The survey asks providers to differentiate between direct care, program support, and administrative costs. There are not always clear distinctions between these categories and definitions of these terms vary. For the purposes of this survey, the following guidelines should be used:

- | | |
|-----------------|---|
| Administration | Includes expenses associated with the general operation of your agency, but which are not program-specific and which cannot be allocated to individual services or service recipients. Employees that are typically considered administrative include general management (such as an agency's president/ CEO or directors), finance/ accounting, information technology, and human resource staff and contractors. Expenses associated with these staff (for example, their office space, supplies, transportation expenses, etc.) are also considered administrative. Other examples of administrative expenses include office equipment and furniture, office supplies, general insurance, and other operating expenses that cannot be allocated to specific programs, services, or service recipients. |
| Program Support | Includes expenses that are program-specific, but not part of direct service delivery. Examples include first-line supervisors as well as staff responsible for clinical oversight, program design, quality assurance, and training of direct care workers. Expenses associated with these staff (for example, their office space) are also considered program support. Other examples of program support expenses include accreditation and professional licensing fees, software and devices for electronic visit verification, personal protective equipment for staff providing services, and similar expenses. |
| Direct Care | Includes the salaries and benefits of staff providing direct, billable services as well as activities specifically related to direct care. For example, time spent traveling between service visits and writing progress notes after a billable service should be categorized as direct care even though that time may not be directly billable. Direct care also includes transportation expenses for persons who receive services, the facility in which programs are delivered (for example, the building in which a Customized Community Support program is operated), and program materials and supplies (for example, art supplies). |

ADMINISTRATIVE COSTS

The survey includes two forms to collect information regarding administrative costs. The first – Admin & Program Staff – covers payroll and fringe benefit costs for all administrative and program support staff. The second – Non Staff Expenses – covers all other non-staff costs. The survey will be used to calculate overall organizational administrative and program support rates so all administrative and program support staff and costs should be reported, not just those supporting DDSD programs.

‘Admin & Program Staff’: Administrative and Program Support Staff-Wage and Benefit Costs

This form collects wage and benefit data for staff responsible for the administrative and program support functions of your organization while a second form, “Direct Care Wages,” collects payroll information for staff who provide direct, billable services as part of their primary job duties. **Staff should be listed on *only one of the two wage forms (Admin & Prog Staff or Direct Care Wages) based on their primary function.*** For example, if an employee performs both administrative and direct care duties but spends most of their time on administrative tasks, they should be reported on the Admin & Program Staff form and should *not* be reported on the Direct Care Wages form.

Job Title Enter the job titles for your agency’s administrative or program support staff. If your organization has multiple employees within a given job title (e.g., three Human Resource Specialists), you may list them in the same row if their time is allocated similarly (e.g., each spends 100 percent of their time on administrative functions; see the discussion below for the Allocation of Staff Time/ Cost columns).

Time Allocation For the staff listed on each line, there are two groupings of columns within the Time Allocation section and within the two groups, there are three available work functions to which you may allocate workers’ time (administration, program support, or direct care –see the Definitions section above for details around each of these categories).

The first column group is labeled “New Mexico I/DD & Med. Frag Programs” and refers to the administration, program support, or direct care time devoted by the staff listed on each line to HCBS programs in New Mexico. A second column group is labeled “Other Programs” and allows you to allocate time devoted under each work function (administration, program support, or direct care) to all other programs. For each applicable column, enter a percentage. The total across the six columns for each row should equal 100 percent. Although this sheet is only intended to capture information regarding administrative and program support staff, the direct care columns are included because reported staff may have direct care duties at times.

If your agency does not already have a methodology for allocating costs across programs, it is recommended that your organization allocate expenses based on program revenues. Or, an agency can conduct an internal time study in which administrative and program support staff maintain logs and record (no less frequently than once per hour) the program on which they are working. After that week, each employee’s time would be allocated based on their log. For example, if an employee worked 40 hours during the week and 10 of their hours were related to administration of New Mexico’s HCBS waiver programs, 25 percent of that employee’s time (10 hours divided by 40 hours) would be allocated to administration). As appropriate, the remaining 75 percent of the time would need to be allocated to other functions until the allocation equals 100 percent. If a time study is not feasible for your organization, contact HMA-Burns to discuss other potential allocation methodologies.

Non Staff Expenses: Expenses Other Than Staff Salary and Benefits

Use this form to report information for expenses other than staffing/ payroll costs that are reported on the Admin & Program Staff form and the Direct Care Wages form.

Expense Categories Report the total expense incurred by your agency in the reporting period for each expense line on the form. Lines 62 through 66 are available to report expenses that do not fit into the other expense categories.

It is understood that there may be some differences regarding how agencies categorize their expenses. Agencies are not required to report an amount for each listed expense and should use the categories that are closest to their own accounting classifications. For example, an agency's accounting system may combine advertisement expenses for job postings with other advertising expenses. In this case, the agency can report its total advertisement expense on Line 54 (advertising) rather than trying to break out the advertisement expense related to job postings on Line 49.

DIRECT CARE WORKER COSTS

The survey includes two forms to collect information regarding direct care worker costs. The first form – Direct Care Wages – covers number of paid hours, payroll and benefit costs for all direct care staff (including employees and contractors), turnover, and training. The second – Direct Care Benefits – covers information related to fringe benefits offered to direct care staff (including health insurance, paid time off, and other benefits) as well as details about required payroll taxes, including workers’ compensation and state unemployment insurance contributions.

For the purpose of the survey, the term ‘direct care worker’ refers to all agency employees and contractors who deliver billable services covered by the Developmental Disabilities, Mi Via, and Medically Fragile waivers. Agencies do not need to include direct care workers who do not provide any of the services included in the survey. For example, direct care workers who provide behavioral health services do not need to be listed if they did not also deliver billable waiver services during the reporting period.

‘Direct Care Wages’: Direct Care Workers – Wages and Training

This form collects information regarding the wages paid to your agency’s direct care staff, including staff employed or contracted by your agency to provide direct care or billable services. Do not report payments to Family Living homes, as these costs are captured on a different form in the survey. Providers do not need to list direct care workers who did not provide HCBS waiver services in New Mexico during the reporting period.

Under the Job Titles column, report staff individually or grouped by job title (e.g., “Job Coach” or “Certified Nurse Assistants”, etc.), or as sub-groups within a job title (e.g., residential staff – direct care workers, day support staff – direct care workers, etc.). Do not group staff with different employment classifications (i.e., do not report registered nurses on the same line as a licensed practical nurse) or job functions (i.e., do not include supervisory and non-supervisory staff on a single line even if they work under the same job title).

‘Direct Care Workers Benefits’: Direct Care Workers – Fringe Benefits

This form collects current benefit and select mandatory payroll contributions and payments for staff who performed direct, billable services during the reporting period. The form is divided into two columns to separately report benefit details for full-time employees (defined as employees who work at least 30 hours per week) or part-time employees (employees who work less than 30 hours per week). The form includes questions about the number of staff who are eligible for and/ or participate in a given benefit (including holidays, paid time off (PTO, vacation, and sick time), health insurance, and all other benefits), as well as the average benefit level (for example, the average monthly employer-paid health insurance premium) among direct care workers. The form also collects information about State of New Mexico unemployment insurance payment rates and workers compensation costs.

‘SUPPORTEDLIVING_INTENSIVEMED’: SUPPORTED LIVING/ INTENSIVE MEDICAL LIVING SERVICES – HOME DETAILS

This form collects home-level information regarding home residents and typical staffing levels. The form includes reporting for up to seven homes. If your agency operates more than seven homes, please duplicate the worksheet as many times as needed to report data for all the Supported Living and/ or Intensive Medical Living homes your agency operates.

To duplicate the worksheet, select your “Ctrl” key and at the same time, left-click the tab name “Supported Living Detail” and drag the tab to the right. Do this as many times as needed to report all homes.

- Lines 1 – 3 Enter the zip code in which the home is located, then report the home’s licensed capacity (regardless of any vacancies) on Line 2, and the number of residents currently living in the home.
- Lines 4a – 4d For each individual currently residing in the home, select from the drop down menu the rate category billed for each resident (Category 1, Category 2, Category 3, Category 4, or Intensive Medical Living Services).
- Lines 5a-5g For each home, record the number of scheduled awake and sleep staffing hours for each day of the week. As an example, consider the following schedule for a Monday:
- | | |
|---------------------|--|
| 12:00 AM – 6:00 AM | one overnight staff (1 staff * 6 hours = 6 hours) who is asleep |
| 6:00 AM – 8:00 AM | two staff to fix breakfast, prepare residents for their day activities, etc. (2 staff * 2 hours = 4 hours) |
| 8:00 AM – 3:00 PM | no staffing as residents are participating in day activities |
| 3:00 PM – 5:00 PM | one staff as residents are returning home (1 staff * 2 hours = 2 hours) |
| 5:00 PM – 10:00 PM | two staff to fix dinner, assist with chores, etc. (2 staff * 5 hours = 10 hours) |
| 10:00 PM – 12:00 AM | one overnight staff (1 staff * 2 hours = 2 hours) who is asleep |

In this example, **16 awake** hours and **8 asleep** hours would be reported for Monday.

New Mexico Health Care Authority
Developmental Disabilities Supports Division

**Home and Community Based Services (HCBS)
Rate Study**

Provider Survey

– distributed by –

BURNS & ASSOCIATES
A Division of Health Management Associates

August 28, 2025

Please complete and submit your survey to ddsd-rate-study@healthmanagement.com by **September 30, 2025**.

Questions? Contact Derek Barber with Health Management Associates at ddsd-rate-study@healthmanagement.com or (517) 993-9229.

Contact Information and Revenues (click ⓘ icons for directions)

Line	Factor	Input
Contact Information		
1	Agency name	
2	Contact name	
3	Title of the person listed on Line 2	
4	Phone number for the person listed on Line 2	
5	Email address for the person listed on Line 2	
Attestation - By submitting this survey, you hereby certify that all information reported is true and accurate to the best of your knowledge.		
6	Name of the CEO/ Executive Director/ CFO attesting to accuracy of the survey	
7	Title of the person listed on Line 6	
8	Phone number for the person listed on Line 6	
9	Email address for the person listed on Line 6	
Financial Data Reporting		
10	End date of the 12-month period for which revenue and cost data is reported (enter as "M/D/YYYY")	
Annual Agency Revenues for Most Recent 12-Month Period for Which You Have Reliable and Complete Data		
11	All revenues used to support I/DD and/ or Medically Fragile HCBS programs in New Mexico	
12	SSI/SSDI and other revenues used to cover room and board costs	
13	Other agency revenues	
14	Total Revenues	\$0

Administrative and Program Support Staff - Wage and Benefit Costs (see p. 6 of the instructions and click ⓘ icons for directions)

*Include only those staff who perform administrative and program support functions for your agency's DDSD HCBS programs ⓘ
Report costs for your agency's most recent 12-month period for which you have reliable and complete data.*

Line	Job Title ⓘ	# of Emp. ⓘ	Total Actual Wages ⓘ	Actual Cost of Benefits ⓘ							Time Allocation ⓘ					
				Social Security and Medicare ⓘ	Federal and State Unemployment Insurance ⓘ	Workers' Compensation ⓘ	Health Insurance ⓘ	Other Insurance ⓘ	Retirement ⓘ	Other Benefits ⓘ	New Mexico I/DD & Med. Frag. Programs ⓘ			Other Programs ⓘ		
											Administration ⓘ	Program Support ⓘ	Direct Care ⓘ	Administration ⓘ	Program Support ⓘ	Direct Care ⓘ
Ex.	Executive Director	1	\$75,000	\$5,588	\$394	\$1,500	\$4,800		\$1,500	\$150	50%	0%	0%	50%	0%	0%
1																
2																
3																
4																
5																
6																
7																
8																
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23																
24																
25																

Administrative and Program Support Staff - Wage and Benefit Costs (see p. 6 of the instructions and click ⓘ icons for directions)

*Include only those staff who perform administrative and program support functions for your agency's DDS HCBS programs ⓘ
Report costs for your agency's most recent 12-month period for which you have reliable and complete data.*

Line	Job Title ⓘ	# of Emp. ⓘ	Total Actual Wages ⓘ	Actual Cost of Benefits ⓘ							Time Allocation ⓘ					
				Social Security and Medicare ⓘ	Federal and State Unemployment Insurance ⓘ	Workers' Compensation ⓘ	Health Insurance ⓘ	Other Insurance ⓘ	Retirement ⓘ	Other Benefits ⓘ	New Mexico I/DD & Med. Frag. Programs ⓘ			Other Programs ⓘ		
											Administration ⓘ	Program Support ⓘ	Direct Care ⓘ	Administration ⓘ	Program Support ⓘ	Direct Care ⓘ
Ex.	Executive Director	1	\$75,000	\$5,588	\$394	\$1,500	\$4,800		\$1,500	\$150	50%	0%	0%	50%	0%	0%
26																
27																
28																
29																
30																
31																
32																
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35																
36																
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50																

Direct Care Workers - Wages and Training
 (see p. 8 of the instructions and click ⓘ icons for directions)

Provide responses for the agency's most recent 12-month period for which you have reliable and complete data.

Include only direct care workers (DSPs, clinicians, and others who provide billable DDSD HCBS waiver services). Family Living providers/ staff should not be reported on this form.

Line	Job Titles ⓘ	Employee/ Contractor ⓘ	Super- visor? ⓘ	If Supervisor, Average # of Staff Supervised ⓘ	Total Hours Paid ⓘ	% of Hours that were Overtime ⓘ	Total Wages Paid ⓘ	Average Hourly Wage ⓘ
Ex.	Direct Support Professional	Employee	No		4,160	10%	\$67,500	\$16.23
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								
16								
17								
18								
19								
20								

Direct Care Workers - Wages and Training
 (see p. 8 of the instructions and click ⓘ icons for directions)

Provide responses for the agency's most recent 12-month period for which you have reliable and complete data.

Include only direct care workers (DSPs, clinicians, and others who provide billable DDSD HCBS waiver services). Family Living providers/ staff should not be reported on this form.

Line	Job Titles ⓘ	Employee/ Contractor ⓘ	Super- visor? ⓘ	If Supervisor, Average # of Staff Supervised ⓘ	Total Hours Paid ⓘ	% of Hours that were Overtime ⓘ	Total Wages Paid ⓘ	Average Hourly Wage ⓘ
21								
22								
23								
24								
25								
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27								
28								
29								
30								
31								
32								
33								
34								
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37								
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41								

Direct Care Workers - Wages and Training
 (see p. 8 of the instructions and click ⓘ icons for directions)

Provide responses for the agency's most recent 12-month period for which you have reliable and complete data.

Include only direct care workers (DSPs, clinicians, and others who provide billable DDSD HCBS waiver services). Family Living providers/ staff should not be reported on this form.

Line	Job Titles ⓘ	Employee/ Contractor ⓘ	Super- visor? ⓘ	If Supervisor, Average # of Staff Supervised ⓘ	Total Hours Paid ⓘ	% of Hours that were Overtime ⓘ	Total Wages Paid ⓘ	Average Hourly Wage ⓘ
42								
43								
44								
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Direct Care Workers - Wages and Training (cont.)

Line	Job Titles ⓘ	Actual Cost of Benefits ⓘ							Annual Turnover ⓘ	Staff Training Hours	
		Social Security and Medicare ⓘ	Federal and State Unemployment Insurance ⓘ	Workers' Compensation ⓘ	Health Insurance ⓘ	Other Insurance ⓘ	Retirement ⓘ	Other Benefits ⓘ		1st Year (Per Staff Avg.) ⓘ	Following Years (Per Staff Avg.) ⓘ
Ex.	Direct Support Professional	\$2,682	\$394	\$720	\$4,800			\$2,250	25%	40	20
1											
2											
3											
4											
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19											
20											

Direct Care Workers - Wages and Training (cont.)

Line	Job Titles ⓘ	Actual Cost of Benefits ⓘ							Annual Turnover ⓘ	Staff Training Hours	
		Social Security and Medicare ⓘ	Federal and State Unemployment Insurance ⓘ	Workers' Compensation ⓘ	Health Insurance ⓘ	Other Insurance ⓘ	Retirement ⓘ	Other Benefits ⓘ		1st Year (Per Staff Avg.) ⓘ	Following Years (Per Staff Avg.) ⓘ
21											
22											
23											
24											
25											
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41											

Direct Care Workers - Wages and Training (cont.)

Line	Job Titles ⓘ	Actual Cost of Benefits ⓘ							Annual Turnover ⓘ	Staff Training Hours	
		Social Security and Medicare ⓘ	Federal and State Unemployment Insurance ⓘ	Workers' Compensation ⓘ	Health Insurance ⓘ	Other Insurance ⓘ	Retirement ⓘ	Other Benefits ⓘ		1st Year (Per Staff Avg.) ⓘ	Following Years (Per Staff Avg.) ⓘ
42											
43											
44											
45											
46											
47											
48											
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62											

Direct Care Workers - Fringe Benefits (see p. 8 of the instructions and click ⓘ icons for directions)

Report current benefit information.

Include only direct care workers (DSPs, clinicians, and others who provide billable DDSD HCBS waiver services).

Line	Factor	Example	Full-Time	Part-Time	ⓘ
Staffing					
1	How many employees, who provide direct services to individuals, does your agency currently employ?	30			ⓘ
Holidays					
2	Are direct care workers eligible for holiday pay?	Yes			ⓘ
3	Of the direct care workers listed on Line 1, number currently eligible for holiday pay	22			ⓘ
4	Average annual number of holidays (days, not hours) received by eligible direct care workers	10			ⓘ
Paid Time Off (PTO, Vacation and Sick Time)					
5	Are direct care workers eligible to receive paid time off, in addition to holidays?	Yes			ⓘ
6	Of the direct care workers listed on Line 1, number currently eligible for PTO	18			ⓘ
7	Average annual number of PTO days (not hours) received by eligible direct care workers	10			ⓘ
Health Insurance					
8	Are direct care workers eligible to receive health insurance through your agency?	Yes			ⓘ
9	Of the direct care workers listed on Line 1, number currently eligible for health insurance	15			ⓘ
10	Of the eligible direct care workers listed on Line 9, number currently receiving health insurance from your agency	10			ⓘ
11	Your agency's total contribution to health insurance costs in the previous month for the direct care workers listed on Line 10	\$4,650			ⓘ
12	Calculated average monthly cost per participating employee	\$465			ⓘ
Other Benefits					
13	Does your agency contribute to any other benefits for direct care workers (e.g. disability, dental, etc.)?	No			ⓘ
14	[If yes, please specify the benefit(s) here]				ⓘ
15	Of the direct care workers listed on Line 1, number currently eligible for these benefits	-			ⓘ
16	Of the eligible direct care workers listed on Line 15, number currently receiving these benefits from your agency	-			ⓘ
17	Your agency's cost in the previous month to provide these benefits for the direct care workers listed on Line 16	-			ⓘ
18	Calculated average monthly cost per participating employee				ⓘ
State Unemployment Insurance and Workers' Compensation					
19	If your agency makes New Mexico state unemployment insurance payments based on a percentage of wages, report your agency's state unemployment insurance tax rate for the reported fiscal year	1.00%			ⓘ
20	If your agency pays actual costs ("payments in lieu of contributions") of state unemployment insurance benefits claimed by former employees, report your agency's total unemployment insurance payments in the reported fiscal year				ⓘ
21	Average workers' compensation cost for direct care workers under your current policy (per \$100 in wages paid)?	\$1.89			ⓘ

Expenses Other Than Staff Salary and Benefits (see p. 7 of the instructions and click ⓘ icons for directions)

Report costs for your agency's most recent 12-month period for which you have reliable data; do not include any staff-related expenses.

Line	Category	Total Expense	New Mexico I/DD & Med. Frag. Programs ⓘ			Other Programs ⓘ		
			Admin-istration ⓘ	Program Support ⓘ	Direct Care ⓘ	Admin-istration ⓘ	Program Support ⓘ	Direct Care ⓘ
<i>Service-Specific Facility Expenses (Facilities Where Services are Delivered)</i>								
1	Residential homes rent/mortgage/depreciation							ⓘ
2	Residential homes repairs and modifications							
3	Residential homes janitorial/landscaping/snow removal/pest control							
4	Residential homes utilities/telecommunications/etc.							ⓘ
5	Customized Community Support facility rent/mortgage/depreciation							ⓘ
6	Customized Community Support facility repairs and modifications							
7	Customized Community Support facility janitorial/landscaping/snow removal/ pest control							
8	Customized Community Support facility utilities/telecommunications/etc.							ⓘ
9	Employment facility rent/mortgage/depreciation							ⓘ
10	Employment facility repairs and modifications							
11	Employment facility janitorial/landscaping/snow removal/pest control							
12	Employment facility utilities/telecommunications/etc.							ⓘ
13	Clinical/Service Office-based facility rent/mortgage/depreciation							ⓘ
14	Clinical/Service Office-based facility repairs and modifications							
15	Clinical/Service Office-based facility janitorial/landscaping/snow removal/pest control							
16	Clinical/Service Office-based facility utilities/telecommunications/etc.							ⓘ
<i>Facility Expenses Supporting Administrative/ Program Support/ Other Functions</i>								
17	Other facility rent/mortgage/depreciation							ⓘ
18	Other facility repairs and modifications							
19	Other facility maintenance/janitorial/landscaping/snow removal/pest control							
20	Other facility utilities/telecommunications/etc.							ⓘ

Expenses Other Than Staff Salary and Benefits (see p. 7 of the instructions and click ⓘ icons for directions)

Report costs for your agency's most recent 12-month period for which you have reliable data; do not include any staff-related expenses.

Line	Category	Total Expense	New Mexico I/DD & Med. Frag. Programs ⓘ			Other Programs ⓘ			
			Admin-istration ⓘ	Program Support ⓘ	Direct Care ⓘ	Admin-istration ⓘ	Program Support ⓘ	Direct Care ⓘ	
<i>Service-Specific Supplies Expenses</i>									
21	Supplies for residential services	[briefly describe the nature of these expenses by typing a description here]							ⓘ
22	Supplies for in-home/ respite services	[briefly describe the nature of these expenses by typing a description here]							
23	Supplies for Customized Comm. Support programs	[briefly describe the nature of these expenses by typing a description here]							
24	Supplies for employment programs	[briefly describe the nature of these expenses by typing a description here]							
25	Supplies for behavior consultation programs	[briefly describe the nature of these expenses by typing a description here]							
26	Supplies for skilled nursing services	[briefly describe the nature of these expenses by typing a description here]							
27	Supplies for therapeutic services	[briefly describe the nature of these expenses by typing a description here]							
28	Supplies for nutritional counseling programs	[briefly describe the nature of these expenses by typing a description here]							
<i>Service-Specific Expenses - Staff Participation Fees</i>									
29	Staff participation fees associated with residential services								ⓘ
30	Staff participation fees associated with in-home/ respite services								ⓘ
31	Staff participation fees associated with Customized Community Supports								ⓘ
32	Staff participation fees associated with employment services								ⓘ
<i>Service-Specific 'Bundled' Service Expenses</i>									
33	Nursing services (including on call) for residential homes								ⓘ
34	Dietician/ nutritional counseling for residential services								ⓘ
35	Nursing services for Customized Community Support-Group								ⓘ
<i>Other Service-Specific Expenses</i>									
36	Payments to contracted Family Living homes								ⓘ

Expenses Other Than Staff Salary and Benefits (see p. 7 of the instructions and click ⓘ icons for directions)

Report costs for your agency's most recent 12-month period for which you have reliable data; do not include any staff-related expenses.

Line	Category	Total Expense	New Mexico I/DD & Med. Frag. Programs ⓘ			Other Programs ⓘ			
			Admin-istration ⓘ	Program Support ⓘ	Direct Care ⓘ	Admin-istration ⓘ	Program Support ⓘ	Direct Care ⓘ	
37	Non-staff recruitment, certification, and placement expenses for Family Living homes								ⓘ
38	Electronic Visit Verification-related costs (e.g., equipment, software)								ⓘ
39	Equipment and software for remote support and telehealth services								ⓘ
40	Other service-specific expenses	[briefly describe the nature of these expenses and the affiliated service(s) by typing a description here]							ⓘ

Expenses Other Than Staff Salary and Benefits (see p. 7 of the instructions and click ⓘ icons for directions)

Report costs for your agency's most recent 12-month period for which you have reliable data; do not include any staff-related expenses.

Line	Category	Total Expense	New Mexico I/DD & Med. Frag. Programs ⓘ			Other Programs ⓘ		
			Admin-istration ⓘ	Program Support ⓘ	Direct Care ⓘ	Admin-istration ⓘ	Program Support ⓘ	Direct Care ⓘ
<i>Travel Expenses</i>								
41	Agency owned/leased vehicle expenses							
42	Reimbursement for use of staff personal vehicles							
43	Other travel related expenses (e.g., airfare for out of state travel)							
<i>Taxes, Interest, and Insurance</i>								
44	New Mexico Gross Receipts Taxes (GRT)							
45	Other taxes (exclude payroll taxes and personal income taxes)							
46	Interest expense (non-mortgage and non-vehicle)							
47	All general insurance (exclude vehicle insurance and staff benefits)							ⓘ

Expenses Other Than Staff Salary and Benefits (see p. 7 of the instructions and click ⓘ icons for directions)

Report costs for your agency's most recent 12-month period for which you have reliable data; do not include any staff-related expenses.

Line	Category	Total Expense	New Mexico I/DD & Med. Frag. Programs ⓘ			Other Programs ⓘ		
			Admin-istration ⓘ	Program Support ⓘ	Direct Care ⓘ	Admin-istration ⓘ	Program Support ⓘ	Direct Care ⓘ
Other Operating Expenses								
48	Licensing/certification/accreditation fees							
49	Hiring expenses (e.g., advertising, background checks, placement fees, etc.)							ⓘ
50	Training Expense (e.g., fees and materials; exclude staff payroll costs)							ⓘ
51	Office equipment and furniture							
52	Information technology expense (e.g., computers and software)							ⓘ
53	Office supplies (include postage)							
54	Advertising							
55	Dues and subscriptions							ⓘ
56	Clinical consulting - pharmaceutical consultants, therapeutic consultants, etc.							ⓘ
57	Professional consulting - legal/accounting/payroll processing fees/etc.							ⓘ
58	Staff immunizations							
59	Personal protective equipment							
60	Allocated corporate office overhead							ⓘ
61	[If Overhead is reported in Line 60, describe allocation methodology here]							
62	Other 1 [type description here]							ⓘ
63	Other 2 [type description here]							ⓘ
64	Other 3 [type description here]							ⓘ
65	Other 4 [type description here]							ⓘ
66	Other 5 [type description here]							ⓘ
67	Total Non-Staff Expenses	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Supported Living and Intensive Medical Living Services (click ⓘ icons for directions)

Line	Factor	Example	Input
<i>Home Characteristics</i>			
1	Number of Supported Living and IMLS homes currently operated by your agency	19	
2	Number of individuals currently receiving Supported Living or IMLS services from your agency	42	
3	Average absence days per individual per year (due to hospitalization, vacation, etc.)	3	ⓘ
4	Does your agency operate any homes in which staff working overnight shifts are permitted to sleep?	Yes	
5	If yes, are overnight asleep hours paid at the same wage as awake hours?	No	
<i>Activities Outside of the Home</i>			
6	% of individuals reported on Line 2 who regularly participate in activities outside of the home without Supported Living or IMLS staff (e.g., attending a Customized Community Support program, volunteering, or participating in employment activities)	95%	ⓘ
7	For individuals participating in outside activities, average number of hours per week they are <u>scheduled</u> to participate	32.0	
8	For individuals participating in outside activities, average number of hours per week they <u>actually</u> participate	30.0	

Supported Living/ Intensive Medical Living Services - Home Details (see p. 9 of the instructions and click ⓘ icons for directions)

Line		Home Example		Home #1		Home #2	
		Location		Location		Location	
1		Zip Code	87102	Zip Code		Zip Code	
2	ⓘ	Home Capacity	4	Home Capacity		Home Capacity	
3	ⓘ	Number currently residing in home	3	Number currently residing in home		Number currently residing in home	
		Resident Category		Resident Category		Resident Category	
4a	ⓘ	Resident #1	Category 1				
4b	ⓘ	Resident #2	Category 3				
4c	ⓘ	Resident #3	Category 3				
4d	ⓘ	Resident #4	Intensive Medical Living Services				
	ⓘ	Residence Daily Staff Schedule		Residence Daily Staff Schedule		Residence Daily Staff Schedule	
		Daily Direct Support Personnel Hours		Daily Direct Support Personnel Hours		Daily Direct Support Personnel Hours	
			Awake	Asleep		Awake	Asleep
5a		Sunday	28.0	8.0	Sunday		Sunday
5b		Monday	16.0	8.0	Monday		Monday
5c		Tuesday	16.0	8.0	Tuesday		Tuesday
5d		Wednesday	16.0	8.0	Wednesday		Wednesday
5e		Thursday	16.0	8.0	Thursday		Thursday
5f		Friday	16.0	8.0	Friday		Friday
5g		Saturday	28.0	8.0	Saturday		Saturday
5h	ⓘ	Avg. percentage of weekly hours that are overtime	10.0%		Avg. Pct. of weekly hours paid as overtime		Avg. Pct. of weekly hours paid as overtime
		Avg. Weekly Hours of Clinical Support		Avg. Weekly Hours of Clinical Support		Avg. Weekly Hours of Clinical Support	
6	ⓘ	RNs	2.0		RNs		RNs
7	ⓘ	LPNs	6.0		LPNs		LPNs
8	ⓘ	CNAs	4.0		CNAs		CNAs
9	ⓘ	Nutritionist/ Dietician	1.0		Nutritionist/ Dietician		Nutritionist/ Dietician
		Transportation		Transportation		Transportation	
10	ⓘ	# of Vehicles	1		# of Vehicles		# of Vehicles
11	ⓘ	Purchase Cost	\$38,500		Purchase Cost		Purchase Cost
12	ⓘ	Mo. Lease Cost			Mo. Lease Cost		Mo. Lease Cost
13	ⓘ	Annual Mileage	15,000		Annual Mileage		Annual Mileage
14	ⓘ	Mileage (including staff-owned vehicles)	850		Mileage (including staff-owned vehicles)		Mileage (including staff-owned vehicles)

Supported Living - Home Details (see p. 9 of the instructions and click ⓘ icons for directions)

Reporting on this form should reflect current operations.

Line	Home #3			Home #4			Home #5			Home #6		
	Location			Location			Location			Location		
1	Zip Code											
2	Home Capacity											
3	Number currently residing in home											
	Resident Category			Resident Category			Resident Category			Resident Category		
4a												
4b												
4c												
4d												
	Residence Daily Staff Schedule			Residence Daily Staff Schedule			Residence Daily Staff Schedule			Residence Daily Staff Schedule		
	Daily Direct Support Personnel Hours			Daily Direct Support Personnel Hours			Daily Direct Support Personnel Hours			Daily Direct Support Personnel Hours		
		Awake	Asleep									
5a	Sunday			Sunday			Sunday			Sunday		
5b	Monday			Monday			Monday			Monday		
5c	Tuesday			Tuesday			Tuesday			Tuesday		
5d	Wednesday			Wednesday			Wednesday			Wednesday		
5e	Thursday			Thursday			Thursday			Thursday		
5f	Friday			Friday			Friday			Friday		
5g	Saturday			Saturday			Saturday			Saturday		
5h	Avg. Pct. of weekly hours paid as overtime			Avg. Pct. of weekly hours paid as overtime			Avg. Pct. of weekly hours paid as overtime			Avg. Pct. of weekly hours paid as overtime		
	Avg. Weekly Hours of Clinical Support			Avg. Weekly Hours of Clinical Support			Avg. Weekly Hours of Clinical Support			Avg. Weekly Hours of Clinical Support		
6	RNs			RNs			RNs			RNs		
7	LPNs			LPNs			LPNs			LPNs		
8	CNAs			CNAs			CNAs			CNAs		
9	Nutritionist/ Dietician											
	Transportation			Transportation			Transportation			Transportation		
10	# of Vehicles											
11	Purchase Cost											
12	Mo. Lease Cost											
13	Annual Mileage											
14	Mileage (including staff-owned vehicles)											

Line	Home #7		
	Location		
1	Zip Code		
2	Home Capacity		
3	Number currently residing in home		
	Resident Category		
4a			
4b			
4c			
4d			
	Residence Daily Staff Schedule		
	Daily Direct Support Personnel Hours		
		Awake	Asleep
5a	Sunday		
5b	Monday		
5c	Tuesday		
5d	Wednesday		
5e	Thursday		
5f	Friday		
5g	Saturday		
5h	Avg. Pct. of weekly hours paid as overtime		
	Avg. Weekly Hours of Clinical Support		
6	RNs		
7	LPNs		
8	CNAs		
9	Nutritionist/ Dietician		
	Transportation		
10	# of Vehicles		
11	Purchase Cost		
12	Mo. Lease Cost		
13	Annual Mileage		
14	Mileage (including staff-owned vehicles)		

Family Living (click ⓘ icons for directions)

Line	Factor	Example	Input
<i>Provider Characteristics</i>			
1	Number of Family Living homes contracting with your agency during the reported fiscal year	24	
2	Number of individuals receiving Family Living home services from your agency during the reported fiscal year	26	
3	What is the average number of days <u>per year</u> participants are absent from their Family Living home (e.g., due to visits with natural families, hospitalizations, etc.)?	12	
<i>Recruitment, Certification, and Placement</i>			
4	Average staff hours required to recruit, train, and approve a Family Living home prior to a placement	30	ⓘ
5	Number of your agency's Family Living homes that received initial approval and placement in the reported fiscal year	3	
6	Typical number of years a Family Living home contracts with your agency	8	
7	Average mileage driven per week for recruitment activities per home recruiter	150	
<i>Supervision, Training, and Other Supports for Family Living Homes</i>			
8	Average caseload (number of Family Living homes) for a full-time equivalent home supervisor/ internal service coordinator	24	ⓘ
9	Average number of face-to-face visits <u>per year</u> provided by agency supervisors/ internal service coordinators per Family Living home	12	
10	Average mileage driven per week per home supervisor/ internal service coordinator	150	
11	Does your agency provide on-going training (after initial placement) to Family Living providers?	Yes	ⓘ
12	Average number of annual training hours delivered to Family Living providers	2.0	
13	Percent of training hours provided face-to-face (rather than online or other remote training)	80%	
14	Are training hours typically delivered by the same staff person who supervises the home?	Yes	
15	Percent of training hours that Family Living providers receive with a group of other providers	60%	
16	As applicable, average number of participants in a group training session	4	
17	Average mileage driven per week per trainer	150	
On Lines 18 - 21, report the average <u>annual</u> hours of direct and on behalf of supports an individual receives from each of the listed staff classifications. Report only time specifically associated with support for the individual, whether direct or on behalf of. Do not report administrative or other time that is not attributed to a specific individual.			
18	Registered Nurses	20.0	
19	Licensed Practical Nurses	35.0	
20	Certified Nursing Assistants	12.0	
21	Registered Dietician/ Licensed Nutritionist	25.0	

Family Living - Individual Detail (click ⓘ icons for directions)

Report information for current placements only.

Line	Member ID	Family Living Provider ID	Is the Family Living Provider Related to the Member?	Placement Start Date	Family Living Payment			Room & Board Payment		Substitute Care Hours Provided in Most Recent Year
					Unit of Payment	Describe Unit of Payment if 'Other'	Payment Amount	Agency is Rep Payee?	Monthly Room & Board Payment to Family Living Home	
Ex.	3765547	John Davis	No	4/5/2022	Month					
1										
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Family Living - Individual Detail (click  icons for directions)

Report information for current placements only.

Line	Member ID	Family Living Provider ID	Is the Family Living Provider Related to the Member?	Placement Start Date	Family Living Payment			Room & Board Payment		Substitute Care Hours Provided in Most Recent Year
					Unit of Payment	Describe Unit of Payment if 'Other'	Payment Amount	Agency is Rep Payee?	Monthly Room & Board Payment to Family Living Home	
26										
27										
28										
29										
30										
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Customized In-Home Supports - Developmental Disabilities Waiver (click  icons for directions)

Line	Factor	Example	Input
<i>Agency Caseload and Service Design</i>			
1	Number of individuals receiving Customized In-Home Supports from your agency	80	
2	Average number of hours of Customized In-Home Supports that an individual receives in a week	20	
3	Average number of face-to-face Customized In-Home Supports visits per week per DSP	10	
4	Average length in hours of an Customized In-Home Supports visit	3.25	
5	Percent of Customized In-Home Supports hours provided by your agency delivered to groups of two or more individuals	5%	
<i>Mileage</i>			
6	Average miles driven per week per DSP to travel to and from individual visits	80	
7	Average miles driven per week per DSP to transport individuals	25	

In-Home Living Supports - Mi Via Waiver (click ⓘ icons for directions)

Line	Factor	Example	Input
<i>Agency Caseload and Service Design</i>			
1	Number of individuals receiving In-Home Living Supports from your agency	80	
2	Average number of hours of In-Home Living Supports that an individual receives in a week	20	
3	Average number of face-to-face In-Home Living Supports visits per week per DSP	10	ⓘ
4	Average length in hours of an In-Home Living Supports visit	3.25	
5	Percent of In-Home Living Supports hours provided by your agency delivered to groups of two or more individuals	5%	
<i>Mileage</i>			
6	Average miles driven per week per DSP to travel to and from individual visits	80	ⓘ
7	Average miles driven per week per DSP to transport individuals	25	ⓘ

Home Health Aide - Medically Fragile Waiver (click  icons for directions)

Line	Factor	Example	Input
<i>Agency Caseload and Service Design (for 'agency-directed' services)</i>			
1	Number of individuals receiving Home Health Aide supports from your agency	80	
2	Average number of hours of Home Health Aide supports that an individual receives in a week	20	
3	Average number of face-to-face Home Health Aide visits per week per DSP	10	
4	Average length in hours of a Home Health Aide visit	3.25	
<i>Mileage</i>			
5	Average miles driven per week per Home Health Aide to travel to and from individual visits	80	
6	Average miles driven per week per Home Health Aide to transport individuals	25	

Respite (Individual and Group) (click ⓘ icons for directions)

Line	Factor	Example	Input
<i>Agency Caseload and Service Design</i>			
1	Number of individuals receiving Respite from your agency by waiver:		
1a	Developmental Disabilities Waiver	80	
1b	Medically Fragile Waiver	5	
2	Average length of a Respite encounter (in hours)	4.50	
<i>Settings in Which Respite is Provided</i> ⓘ			
3	Percentage of visits that are provided in an individual's home or place of residence	80%	
4	Percentage of visits that are provided in private home of a Respite provider	10%	
5	Percentage of visits that are provided in another community setting (such as an Supported Living/ IMLS home)	5%	
<i>Mileage</i>			
6	Average miles driven per week per DSP to travel to and from individual visits	90	
7	Average miles driven per week per DSP to transport individuals	25	

Customized Community Support, Individual (click ⓘ icons for directions)

Line	Factor	Example	Input
<i>Agency Caseload and Service Design</i>			
1	Number of individuals receiving Customized Community Support - Individual from your agency by waiver:		
1a	Developmental Disabilities Waiver	35	
1b	Medically Fragile Waiver	5	
2	Average number of hours of Customized Community Support - Individual that an individual receives in a week	20	
3	Average number of face-to-face Customized Community Support - Individual visits per week per DSP	5	
4	Average length in hours of an Customized Community Support - Individual visit	4.50	
<i>Mileage</i>			
5	Average miles driven per week per DSP to travel to and from individual visits	80	
6	Average miles driven per week per DSP to transport individuals	25	



Customized Community Support (CCS), Group (click ⓘ icons for directions)

Line	Factor	Example	Input-Program	Input-Program	Input-Program	Input-Program	Input-Program	ⓘ
Location								
1	Zip code where program is located or most often delivered	87102						
2	Number of hours per week that the program is operating and providing CCS - Group services	35.00						
3	If the reported program is sometimes (or always) delivered in a facility-based setting, report the following:							
4	Total square footage of the facility where services are delivered	1,500						ⓘ
Report the total annual facility expenses by program for a recent 12-month period for which you have complete and reliable data. The totals on Lines 5 - 8 should match what was reported on Lines 5 - 8 of the Non Staff Expenses form								
5	Facility rent/mortgage/depreciation							
6	Facility repairs and modifications							ⓘ
7	Facility janitorial/landscaping/snow removal/ pest control							
8	Facility utilities/telecommunications/etc.							ⓘ
9	Approximate operating cost per square foot (including rent)	\$0.00						ⓘ
10	Estimated percentage of square footage that is used for direct services	75%						ⓘ
11	Average attendance rate for individuals receiving Customized Community Support - Group services	91%						ⓘ

Customized Community Support (CCS), Group (click ⓘ icons for directions)

Line	Factor	Example	Input-Program								
Weekly Scheduled Hours of Attendance by Participant Waiver/ Service Category											
12	Report the average number of <u>weekly</u> scheduled hours of attendance for all waiver-enrolled participants by category/ waiver and setting within each program.										
Developmental Disabilities Waiver, Small Group											
12a	Facility-based setting										
12b	Community-based setting (e.g., a setting not owned/ operated by the provider, such as going to a public park or theater)	0.0									
12c	Remotely	0.0									
Developmental Disabilities Waiver, Jackson Class											
12d	Facility-based setting	120.0									
12e	Community-based setting (e.g., a setting not owned/ operated by the provider, such as going to a public park or theater)	60.0									
12f	Remotely	0.0									
Developmental Disabilities Waiver, Category 1											
12g	Facility-based setting	120.0									
12h	Community-based setting (e.g., a setting not owned/ operated by the provider, such as going to a public park or theater)	60.0									
12i	Remotely	0.0									
Developmental Disabilities Waiver, Category 2											
12j	Facility-based setting	80.0									
12k	Community-based setting (e.g., a setting not owned/ operated by the provider, such as going to a public park or theater)	40.0									
12l	Remotely	0.0									
Medically Fragile Waiver participants											
12m	Facility-based setting	60.0									
12n	Community-based setting (e.g., a setting not owned/ operated by the provider, such as going to a public park or theater)	30.0									
12o	Remotely	0.0									
12p	Total weekly scheduled hours of attendance	570.0									

Customized Community Support (CCS), Group (click ⓘ icons for directions)

Line	Factor	Example	Input-Program	Input-Program	Input-Program	Input-Program	Input-Program	ⓘ
Weekly Scheduled Staff Hours								
	For each day the program operates, report the total scheduled <u>direct support professional (DSP)</u> staff hours							
13a	Monday	32.0						
13b	Tuesday	32.0						
13c	Wednesday	32.0						
13d	Thursday	32.0						
13e	Friday	32.0						
13f	Saturday	0.0						
13g	Sunday	0.0						
13h	Total weekly scheduled DSP staff hours	160.0						ⓘ
14	How many DSPs are assigned to this program (report total staff, not full-time equivalents)?	4.0						
15	Report weekly <u>on-site</u> hours of direct support provided by the following professionals to participants in each program:							
15a	Registered Nurses (RNs)	8.0						
15b	Licensed Practical Nurses (LPNs)	16.0						
15c	Home Health Aides	0.0						
15d	All other professionals providing CCS-Group services (e.g., nutritional counselors, CNAs, therapists, behavioral support professionals, etc.)	2.0						

Customized Community Support (CCS), Group (click ⓘ icons for directions)

Line	Factor	Example	Input-Program	Input-Program	Input-Program	Input-Program	Input-Program	Input-Program	ⓘ
<i>Vehicles</i>									
16	Number of vehicles owned or leased by your agency and utilized for Customized Community Support - Group services	2							ⓘ
17	Total miles driven for all vehicles used for CCS-Group per week	350							ⓘ
18	Typical vehicle size (in terms of passengers) for agency-owned and leased vehicles	6							ⓘ
19	As applicable, average purchase price of agency-owned vehicles	\$38,000							ⓘ
20	As applicable, average monthly lease price of agency-leased vehicles	\$450							ⓘ
21	Avg. # of miles per week driven by DSPs in their personal vehicles to transport individuals receiving services	50							ⓘ

Community Integrated Employment - Job Development, Job Coaching, and Job Maintenance (click ⓘ icons for directions)

Line	Factor	Example	Input		
			Job Development	Job Coaching	Job Maintenance/ Intensive
	<i>Agency Caseload and Service Design</i>				
1	Number of individuals receiving Community Integrated Employment, Individual services from your organization	80			
2	Average current caseload per full time equivalent staff	20			
	<i>Job Development Activities</i>				
3	Annual number of individuals successfully placed in employment per full time equivalent job developer	20			
4	For individuals successfully placed in employment, % that remained employed for at least 90 days	80%			
5	Average number of staff hours required to successfully place an individual in employment	60			
6	Percentage of individuals served who are not successfully placed	20%			
7	Estimated number of hours of support per individual without a successful placement	25			
	<i>Job Coaching and Job Maintenance/ Intensive Activities</i>				
8	Average number of hours per week worked by individuals receiving Job Coaching and Job Maintenance/ Intensive services	25			
9	Of individuals receiving job coaching or job maintenance/ intensive reported on Line 1, average <u>hourly</u> wage currently earned	\$14.50			
	<i>Mileage</i>				
10	Average miles driven per week per DSP to travel to and from individual visits	90			
11	Average miles driven per week per DSP to transport individuals	25			



Community Integrated Employment - Self Employment (click  icons for directions)

Line	Factor	Example	Input
	<i>Agency Caseload and Service Design</i>		
1	Number of individuals receiving Community Integrated Employment - Self Employment services from your organization	80	
2	Average current caseload per full time equivalent staff	20	
3	Of the individuals receiving self-employment supports reported on Line 1, average number of ongoing support hours per week each individual receives	25	
	<i>Mileage</i>		
4	Total miles driven per week per job developer/ job coach to travel between service encounters	90	
5	Total miles driven per week per job developer/ job coach to transport individuals	25	

Community Integrated Employment - Group (click  icons for directions)

Line	Factor	Example	Input - Program #1	Input - Program #2
Location				
1	Site ID	12345678A		
Agency Caseload and Service Design (report data based upon individual sites)				
2	Number of individuals receiving Community Integrated Employment - Group from your organization	6		
3	Report the average staff ratio (the number of individuals served <i>per DSP</i>) in the following settings:			
3a	Number of individuals per DSP when providing services in the <u>center/facility</u>	6.0		
3b	Number of individuals per DSP when providing services in the <u>community</u>	2.0		
4	Average attendance rate for individuals receiving services	90%		
Vehicles				
5	Total # of agency-owned and -leased vehicles for this program	2		
6	Of the vehicles reported on Line 5, number that accommodate non-ambulatory individuals	1		
7	Total annual number of miles traveled by the vehicles reported on Line 5 on behalf of individuals	32,000		
8	Average number of miles per vehicle per week (Line 7 divided by Line 5 divided by 52)	308		
9	Percent of miles reported on Line 7 associated with transporting individuals to/from their homes	75%		
10	Percent of miles reported on Line 7 associated with 'in-program' transportation	25%		
11	Typical vehicle size (in terms of passengers)	4		
12	Average useful life (in miles) of vehicles before disposal	250,000		
13	As applicable, average purchase price of agency-owned vehicles reported on Line 5	\$38,000		
14	As applicable, average monthly lease price of agency-leased vehicles reported on Line 5	\$375		
15	Total annual number of miles incurred by staff-owned vehicles used to transport individuals	1,500		

Behavioral Support Consultation (click ⓘ icons for directions)

Line	Factor	Example	Input
<i>Agency Caseload and Service Design</i>			
1	Number of individuals receiving Behavioral Support Consultation from your agency by waiver:		
1a	Developmental Disabilities Waiver	45	
1b	Medically Fragile Waiver	5	
1c	Mi Via Waiver	10	
2	Average length in hours of a Behavioral Support Consultation visit (whether in person or remotely)	3.00	
3	Percentage of <u>billable</u> Behavioral Support Consultant services delivered in the following settings (totals should sum to 100%):		ⓘ
3a	In a home- or community-based setting	50%	
3b	Through a telehealth model	20%	
3c	In an office/ clinic setting	20%	
<i>Mileage</i>			
4	Average miles driven per week per staff to travel between service visits	150	ⓘ

Adult/ Private Duty Nursing Services (see the instructions and click the ⓘ icons for directions)

Line	Factor	Nursing	Input		
			RN	LPN	
<i>Agency Caseload and Service Design</i>					
1	Number of individuals receiving Adult/ Private Duty nursing services from your agency by waiver:				
1a	Developmental Disabilities Waiver	45			
1b	Medically Fragile Waiver	5			
1c	Mi Via Waiver	10			
2	Average number of service encounters per week per nursing staff	17			ⓘ
3	Average length - in hours - of a service encounter	1.50			
4	Percentage of <u>billable</u> Adult/ Private Duty Nursing services delivered in the following settings (totals should sum to 100%):				ⓘ
4a	In a home- or community-based setting	50%			
4b	Through a telehealth model	20%			
4c	In an office/ clinic setting	20%			
<i>Mileage</i>					
5	Average miles driven per week per staff to travel between service visits	150			ⓘ
6	Average miles driven per week per staff to transport individuals	25			ⓘ

Therapy Services - Physical Therapy (PT), Occupational Therapy (OT), and Speech-Language Pathology (SLP) (see the instructions and click the ⓘ icons for directions)

Line	Factor	Example	Input		
			PT	OT	SLP
<i>Agency Caseload and Service Design</i>					
1	Number of individuals receiving therapy services from your agency by waiver:				
1a	Developmental Disabilities Waiver	45			
1b	Medically Fragile Waiver	5			
1c	Mi Via Waiver	10			
2	Average number of service encounters per week per therapy staff	25			
3	Average length - in hours - of a service encounter	1.00			
4	Percentage of <u>billable</u> therapy services delivered in the following settings (totals should sum to 100%):				
4a	In a home- or community-based setting	50%			
4b	Through a telehealth model	20%			
4c	In an office/ clinic setting	20%			
<i>Mileage</i>					
5	Average miles driven per week per staff to travel between service visits	150			



Therapy Assistant Services - Physical Therapy Assistant (PTA) and Occupational Therapy Assistant (OTA) (see the instructions and click the ⓘ icons for directions)

Line	Factor	Example	Input	
			PTA	OTA
<i>Agency Caseload and Service Design</i>				
1	Number of individuals receiving therapy assistant services from your agency by waiver:			
1a	Developmental Disabilities Waiver	45		
1b	Medically Fragile Waiver	5		
1c	Mi Via Waiver	10		
2	Average number of service encounters per week per therapy assistant staff	25		
3	Average length - in hours - of a service encounter	1.00		
4	Percentage of <u>billable</u> therapy assistant services delivered in the following settings (totals should sum to 100%):			
4a	In a home- or community-based setting	50%		
4b	Through a telehealth model	20%		
4c	In an office/ clinic setting	20%		
<i>Mileage</i>				
5	Average miles driven per week per staff to travel between service visits	150		



Nutritional Counseling (see the instructions and click the ⓘ icons for directions)

Line	Factor	Example	Input
<i>Agency Caseload and Service Design</i>			
1	Number of individuals receiving Nutritional Counseling services from your agency by waiver:		
1a	Developmental Disabilities Waiver	45	
1b	Medically Fragile Waiver	5	
1c	Mi Via Waiver	10	
2	Average number of service encounters per week per Nutritional Counselor	25	ⓘ
3	Average length - in hours - of a nutrition evaluation/ counseling service	1.50	
4	Percentage of <u>billable</u> Nutritional Counseling services delivered in the following settings (totals should sum to 100%):		ⓘ
4a	In a home- or community-based setting	50%	
4b	Through a telehealth model	20%	
4c	In an office/ clinic setting	20%	
<i>Mileage</i>			
5	Average miles driven per week per staff to travel between service visits	150	ⓘ

Revenue and Cost Changes After the Reporting Year

This form allows for reporting of revenue and cost changes in the current fiscal year compared to the 12-month period for which you reported financial data in this survey. For example, you may report higher estimated wage expenses for direct care workers.

When reporting changes, calculate the percentage increase or decrease compared to the actual costs reported on the reference form. Then describe what is driving the change (for example, the agency granted an across-the-board pay increase; travel reimbursements have increased as the pandemic has waned, etc.

Line	Est. Change in Current Year	Description of Change
Revenues		
1a		[Enter description]
1b		[Enter description]
1c		[Enter description]
1d		[Enter description]
1e		[Enter description]
Administrative/ Program Support Staff - Wages		
2a		[Enter description]
2b		[Enter description]
2c		[Enter description]
2d		[Enter description]
2e		[Enter description]

<i>Administrative/ Program Support Staff - Benefits</i>	
3a	[Enter description]
3b	[Enter description]
3c	[Enter description]
3d	[Enter description]
3e	[Enter description]
<i>Direct Care Worker - Wages</i>	
4a	[Enter description]
4b	[Enter description]
4c	[Enter description]
4d	[Enter description]
4e	[Enter description]

<i>Direct Care Worker - Benefits</i>	
5a	[Enter description]
5b	[Enter description]
5c	[Enter description]
5d	[Enter description]
5e	[Enter description]
<i>Facility Expenses</i>	
6a	[Enter description]
6b	[Enter description]
6c	[Enter description]
6d	[Enter description]
6e	[Enter description]

<i>Travel Expenses</i>	
7a	[Enter description]
7b	[Enter description]
7c	[Enter description]
7d	[Enter description]
7e	[Enter description]
<i>Other Operating Expenses</i>	
8a	[Enter description]
8b	[Enter description]
8c	[Enter description]
8d	[Enter description]
8e	[Enter description]

Attachment 5 - Provider Survey Analysis – Case Management and Consultant Services

Home and Community Based Services (HCBS) Rate Study

**Provider Survey Analysis -
Case Management and Consultant Services**

- prepared for -

**New Mexico Health Care Authority -
Developmental Disabilities Supports Division**

- prepared by -

Burns & Associates, a Division of Health Management Associates
<https://www.healthmanagement.com/about/burns-associates/>

November 6, 2025

**Home and Community Based Services Rate Study
Provider Survey Analysis - Case Management Consultant Services
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division**

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**Home and Community Based Services Rate Study
 Provider Survey Analysis - Case Management Consultant Services
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Survey Participation by Waiver and Service

	Response Rate (Billing Providers)			Response Rate (FY2024 Payments)		
	Ct. Providers	Ct. Responded	Response Rate	Total FY24 Claims	Claims w/ Response	Response Rate
Case Management On-going (DD Waiver)	11	11	100%	\$17,824,387	\$17,824,387	100%
Case Management On-going (MF Waiver)	1	1	100%			
Consultant Services (Mi Via Waiver)	11	11	100%	\$13,588,180	\$13,588,180	100%

**Home and Community Based Services Rate Study
 Provider Survey Analysis - Case Management Consultant Services
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Case Management/ Consultant Wages or Monthly Payment per Case

Survey Count	Reported Hours	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers	Reported Hours	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
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Hourly Wages

		Employees						Employees Excluding Supervisors					
Case Manager (DD Waiver)	2	40,400	\$19.97	\$19.97	\$19.97	\$20.35	\$20.35	38,320	\$19.19	\$19.19	\$19.19	\$20.07	\$20.07
Consultant (Mi Via)	5	121,117	\$24.03	\$24.03	\$26.66	\$28.26	\$28.26	106,887	\$24.14	\$24.14	\$25.93	\$25.33	\$25.33

Payment per Case per Month

		Employees						Employees Excluding Supervisors					
Case Manager (DD Waiver)	3		\$367.26	\$367.26	\$370.79	\$359.70	\$359.70		\$273.00	\$273.00	\$273.00	\$273.00	\$273.00

Payment per Case per Month

		Contractors						Contractors Excluding Supervisors					
Case Manager (DD Waiver)	8		\$307.16	\$307.16	\$302.20	\$322.92	\$322.92		\$306.54	\$306.54	\$302.20	\$320.81	\$320.81
Consultant (Mi Via)	6		\$279.94	\$279.94	\$331.57	\$332.87	\$332.87		\$279.94	\$279.94	\$331.57	\$332.58	\$332.58

**Home and Community Based Services Rate Study
 Provider Survey Analysis - Case Management Consultant Services
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Average Annual Turnover Rates Reported by Providers per Staff Type

	Employees					
	Survey Count	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
Case Manager (DD Waiver)	2	16.0%	16.0%	16.0%	8.0%	8.0%

**Home and Community Based Services Rate Study
 Provider Survey Analysis - Case Management Consultant Services
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Average Annual Training Hours in First and After First Year of Service per by Staff Type

	Training Hours in First Year						Training Hours After the First Year						Est. Annual Training Hours Based on Reported Turnover					
	Survey Count	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers	Survey Count	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers	

Employees

Case Manager (DD Waiver)	2	264	264	264	460	460	0	30	30	30	39	39	49	49	49	72	72
Consultant (Mi Via)	4	166	166	80	48	48	0	50	50	40	41	41	96	96	56	44	44

Contractors

Case Manager (DD Waiver)	3	55	55	50	61	61	0	18	18	20	18	18	22	22	23	22	22
Consultant (Mi Via)	4	57	57	40	41	41	0	34	34	30	22	22	38	38	32	25	25

**Home and Community Based Services Rate Study
 Provider Survey Analysis - Case Management Consultant Services
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Benefits for Case Managers and Consultants

	Full-Time	Part-Time
Responding Providers	10	2
Ct. Reported Staff	121	3

Benefit	Access to Benefit				Eligibility among Agencies that Offer Benefit										Benefit Level Among Staff Receiving Benefit ²					Effective Benefit Level ³
	Responding Agencies	# of Agencies that Offer	% of Agencies that Offer	% of Staff who Have Access	% of Staff Eligible					% of Staff Participating										
					Average (Mean) with Outliers	Average (Mean) without Outliers	Median	Weighted Average with Outliers ¹	Weighted Average without Outliers ¹	Average (Mean) with Outliers	Average (Mean) without Outliers	Median	Weighted Average with Outliers ¹	Weighted Average without Outliers ¹	Average (Mean) with Outliers	Average (Mean) without Outliers	Median	Weighted Average with Outliers ¹	Weighted Average without Outliers ¹	

Full-Time

Holidays	10	7	70%	67%	100%	100%	100%	100%	100%							15.6	12.5	14.0	14.6	12.7	8.5
Paid Time Off	10	8	80%	84%	93%	100%	100%	97%	100%							18.6	15.7	17.0	17.7	13.7	11.6
Health Insurance	10	7	70%	83%	89%	98%	100%	96%	99%	47%	47%	56%	52%	52%	\$808	\$808	\$811	\$884	\$884	\$383	
Other Benefits	10	6	60%	78%	90%	100%	100%	97%	100%	85%	85%	100%	85%	85%	\$173	\$173	\$173	\$183	\$183	\$121	

Part-Time

Holidays	2	0	0%	0%	-	-	-	-	-							-	-	-	-	-	-
Paid Time Off	2	1	50%	2%	100%	100%	100%	100%	100%							7.0	1.0	7.0	7.0	7.0	0.1
Health Insurance	2	0	0%	0%	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Other Benefits	2	0	0%	0%	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

Worker's Compensation (amount per \$100 wages)																\$3.21	\$3.21	\$0.87	\$4.12	\$4.12	
State Unemployment Security Tax Rate																1.27%	0.36%	0.34%	0.96%	0.36%	

¹Weighted averages are weighted by reported staff for each employment type (full-time and part-time).

²Holidays and paid time off represent days per year; health insurance and other benefits represent the monthly employer-paid premiums (excluding employee contributions).

³The effective benefit level is calculated by multiplying the weighted average (without outliers) benefit level by the "% of Staff who Have Access" and by the "% of Staff Participating" for health insurance and other benefits, or by the "% of Staff who Have Access" by the "% of Staff Eligible" for holidays and paid time off.

**Home and Community Based Services Rate Study
 Provider Survey Analysis - Case Management Consultant Services
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Administration and Program Support Costs - Case Management & Consulting Agencies

Admin. (All Respondents)	Admin. (Respondents <50%)	Prog. Support (All Respondents)	Prog. Support (Respondents <50%)
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Summary

Count of Providers	13	12	14	14
Program revenues	\$25,515,908	\$25,156,820	\$26,988,953	\$26,988,953
Median rate (excluding Gross Receipts Tax)	12.4%	12.2%	5.7%	5.7%
Weighted average rate (excluding Gross Receipts Tax)	12.2%	11.6%	7.5%	7.5%
Median Gross Receipts Tax rate	7.6%	7.6%		
Weighted average Gross Receipts Tax (GRT) rate	10.3%	10.2%		

**Home and Community Based Services Rate Study
 Provider Survey Analysis - Case Management Consultant Services
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 Developmental Disabilities Supports Division**

Administration and Program Support Costs - Case Management & Consulting Agencies

	Admin. (All Respondents)	Admin. (Respondents <50%)	Prog. Support (All Respondents)	Prog. Support (Respondents <50%)
Staffing Costs				
Wages	\$1,270,879	\$972,227	\$1,018,971	\$1,018,971
Payroll taxes and benefits	\$108,278	\$92,565	\$189,190	\$189,190
Subtotal - Staffing Costs	\$1,379,157	\$1,064,792	\$1,208,161	\$1,208,161
Benefits Rate	8.5%	9.5%	18.6%	18.6%
Other Operating Costs				
<i>Facility Expenses Supporting Administrative/ Program Support/ Other Functions</i>				
Facility rent/mortgage/depreciation	\$366,669	\$307,031	\$202,605	\$188,270
Facility repairs and modifications	\$57,009	\$52,150	\$7,081	\$6,481
Facility maintenance/janitorial/landscaping/snow removal	\$43,214	\$35,564	\$16,022	\$12,422
Facility utilities/telecommunications/etc.	\$108,096	\$93,299	\$93,192	\$74,000
<i>Other Service-Specific Expenses</i>				
Equipment and software for remote support and telehealth services	\$0	\$0	\$41,318	\$37,111
<i>Travel Expenses</i>				
Agency owned/leased vehicle expenses	\$78,691	\$55,067	\$166,711	\$161,783
Reimbursement for use of staff personal vehicles	\$0	\$0	\$2,777	\$2,777
Other travel related expenses (e.g., airfare for out of state travel)	\$122,033	\$122,033	\$31,221	\$30,873
<i>Taxes, Interest, and Insurance</i>				
New Mexico Gross Receipts Taxes (GRT)	\$2,873,125	\$2,190,068	\$0	\$0
Other taxes (exclude payroll taxes and personal income taxes)	\$77,197	\$48,670	\$0	\$0
Interest expense (non-mortgage and non-vehicle)	\$3,974	\$3,954	\$0	\$0
All general insurance (exclude vehicle insurance and staff benefits)	\$419,204	\$368,327	\$0	\$0

**Home and Community Based Services Rate Study
 Provider Survey Analysis - Case Management Consultant Services
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 Developmental Disabilities Supports Division**

Administration and Program Support Costs - Case Management & Consulting Agencies

	Admin. (All Respondents)	Admin. (Respondents <50%)	Prog. Support (All Respondents)	Prog. Support (Respondents <50%)
<i>All Other Operating Expenses</i>				
Licensing/certification/accreditation fees	\$14,992	\$10,608	\$3,715	\$100
Hiring expenses (e.g., advertising, background checks, placement fees, etc.)	\$86,097	\$83,198	\$5,239	\$2,829
Training Expense (e.g., fees and materials; exclude staff payroll costs)	\$43,989	\$13,322	\$22,704	\$20,295
Office equipment and furniture	\$18,317	\$15,326	\$5,670	\$5,408
Information technology expense (e.g., computers and software)	\$114,705	\$100,824	\$49,718	\$9,387
Office supplies (include postage)	\$116,697	\$107,831	\$34,836	\$21,851
Advertising	\$22,556	\$21,978	\$13,554	\$11,819
Dues and subscriptions	\$30,160	\$13,373	\$14,392	\$6,062
Professional consulting - legal/accounting/payroll processing fees/etc.	\$234,195	\$164,439	\$25,754	\$10,321
Staff immunizations	\$108	\$108	\$0	\$0
Personal protective equipment	\$2,026	\$1,976	\$0	\$0
Allocated corporate office overhead	\$150,375	\$150,375	\$138,752	\$138,752
All Other Expenses	\$143,650	\$86,092	\$62,193	\$62,193
Subtotal - Other Operating Costs	\$5,127,078	\$4,045,614	\$937,454	\$802,734
Grand Total	\$6,506,236	\$5,110,406	\$2,145,616	\$2,010,895

**Home and Community Based Services Rate Study
 Provider Survey Analysis - Case Management Consultant Services
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Case Management (Developmental Disabilities Waiver)

		Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
Responding providers	11					
Number of individuals receiving Case Management	5,021					

Service Design and Caseloads

Average number of case management contacts per individual per year		232.5	35.8	12.0	59.3	29.9
Of these, how many are face-to-face contacts in the individual's home?		57.3	8.6	10.0	15.3	8.0
Average current caseload per Case Manager (on an FTE basis)		23.9	23.9	23.5	24.3	24.3
Average number of hours (direct and indirect) Case Managers provide per individual case, per month		6	6	7	6	6

Mileage

Average miles driven per week per staff to travel between service visits		284	284	294	276	276
Average miles driven per week per staff to transport individuals		300	300	300	300	300

Office Space and Technology Funding

Percent of agencies that provide dedicated office space to Case Managers	82%					
Percent of agencies that fund technology for Case Managers (e.g., laptops, cell phones, etc.)	45%					

**Home and Community Based Services Rate Study
 Provider Survey Analysis - Case Management Consultant Services
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Consultant Services (Mi Via Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
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Responding providers	13				
Number of individuals receiving Consultant Services	3,876				

Service Design and Caseloads

Average number of Consultant contacts per individual per year	2,545.0	25.1	12.0	5,795.1	22.0
Of these, how many are face-to-face contacts in the individual's home?	641.2	11.7	12.0	1,453.6	11.3
Average current caseload per Consultant (on an FTE basis)	27.8	30.0	30.0	31.7	31.7
Average number of hours (direct and indirect) Consultants provide per individual case, per month	7	4	4	6	4

Mileage

Average miles driven per week per staff to travel between service visits	4,632	148	150	8,999	211
Average miles driven per week per staff to transport individuals	-	-	-		

Office Space and Technology Funding

Percent of agencies that provide dedicated office space to Consultants	92%				
Percent of agencies that fund technology for Consultants (e.g., laptops, cell phones, etc.)	38%				

Attachment 6 - Provider Survey Analysis – All Other HCBS

Home and Community Based Services (HCBS) Rate Study

Provider Survey Analysis

- prepared for -

New Mexico Health Care Authority -
Developmental Disabilities Supports Division

- prepared by -

Burns & Associates, a Division of Health Management Associates
<https://www.healthmanagement.com/about/burns-associates/>

November 6, 2025

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

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**Home and Community Based Services Rate Study
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Survey Participation by Waiver and Service

	Response Rate (Billing Providers)			Response Rate (FY2024 Payments)		
	Ct. Providers	Ct. Responded	Response Rate	Total FY24 Claims	Claims w/ Response	Response Rate
Developmental Disabilities Waiver - Total	171	151	88%	\$457,122,128	\$407,231,309	89%
Supported Living	53	46	87%	\$189,459,526	\$163,956,386	87%
Family Living	51	47	92%	\$104,220,108	\$95,934,267	92%
Intensive Medical Living Services	8	8	100%	\$4,363,110	\$4,363,110	100%
Customized In-Home Supports	47	43	91%	\$14,536,196	\$13,216,630	91%
Respite	37	34	92%	\$4,871,001	\$4,505,038	92%
Customized Community Support, Group	60	53	88%	\$17,384,355	\$14,793,380	85%
Customized Community Support, Individual	69	62	90%	\$68,478,157	\$60,459,624	88%
CIE - Group	5	4	80%	\$379,331	\$379,287	100%
CIE - Maintenance (including Intensive)	33	30	91%	\$4,246,230	\$3,722,571	88%
CIE - Self Employment	9	9	100%	\$281,681	\$281,681	100%
Behavior Support Consultation	27	24	89%	\$9,519,928	\$8,986,340	94%
Nutritional Counseling	2	1	50%	\$82,110	\$7,245	9%
Adult Nursing Services, LPN	17	12	71%	\$225,456	\$174,705	77%
Adult Nursing Services, RN	51	46	90%	\$2,611,827	\$2,487,368	95%
Occupational Therapy	26	23	88%	\$7,189,737	\$6,894,598	96%
Occupational Therapy Assistant	16	14	88%	\$3,200,234	\$2,740,489	86%
Physical Therapy	31	28	90%	\$7,222,061	\$6,166,477	85%
Physical Therapy Assistant	18	16	89%	\$3,215,481	\$3,019,362	94%
Speech Language Pathology	35	30	86%	\$15,635,599	\$15,142,751	97%

**Home and Community Based Services Rate Study
 Provider Survey Analysis
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Survey Participation by Waiver and Service

	Response Rate (Billing Providers)			Response Rate (FY2024 Payments)		
	Ct. Providers	Ct. Responded	Response Rate	Total FY24 Claims	Claims w/ Response	Response Rate
Medically Fragile Waiver - Total	12	6	50%	\$1,659,403	\$1,176,944	71%
Respite	6	4	67%	\$986,191	\$720,753	73%
Home Health Aide	3	3	100%	\$408,157	\$408,157	100%
Private Duty Nursing – Adults- RN	3	2	67%	\$210,205	\$2,581	1%
Private Duty Nursing – Adults- LPN	1	1	100%			100%
Nutritional Counseling	1	0	0%			0%
Behavior Support Consultation	1	1	100%			100%
Occupational Therapy	1	0	0%			0%
Customized Community Support, Group	3	1	33%			51%
Mi Via Waiver						
In-Home Living Supports	45	26	58%	\$117,754,206	\$100,819,317	86%

**Home and Community Based Services Rate Study
 Provider Survey Analysis
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 Developmental Disabilities Supports Division**

Direct Care Wages (Employees)

	Survey Count	Employees						Employees Excluding Supervisors					
		Reported Hours	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers	Reported Hours	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
Direct Support Professional	63	4,839,262	\$18.60	\$17.73	\$17.52	\$18.49	\$17.22	4,415,557	\$18.00	\$17.34	\$17.21	\$18.13	\$16.86
Registered Nurse	12	27,944	\$55.27	\$46.33	\$45.12	\$43.62	\$43.58	19,012	\$57.29	\$57.29	\$45.12	\$43.59	\$43.59
Licensed Practical Nurse	7	27,922	\$30.97	\$32.63	\$31.32	\$30.84	\$31.52	25,842	\$30.40	\$31.97	\$31.32	\$30.45	\$31.16
Behavioral Support Consultant	4	8,330	\$45.70	\$45.70	\$39.83	\$44.95	\$44.95	6,250	\$51.80	\$51.80	\$41.35	\$50.79	\$50.79
Physical Therapist	3	9,584	\$85.46	\$85.46	\$94.59	\$90.34	\$90.34	4,703	\$106.44	\$106.44	\$106.44	\$109.59	\$109.59
Occupational Therapist	2	7,437	\$105.62	\$105.62	\$105.62	\$112.54	\$112.54	5,120	\$108.63	\$108.63	\$108.63	\$108.63	\$108.63
Occupational Therapist Assistant	2	4,256	\$81.13	\$81.13	\$81.13	\$87.03	\$87.03	4,256	\$81.13	\$81.13	\$81.13	\$87.03	\$87.03
Speech Language Therapist	5	40,073	\$101.40	\$101.40	\$105.19	\$107.02	\$107.02	38,366	\$99.90	\$99.90	\$102.60	\$105.81	\$105.81
Dietician	0	0	-	-	-	-	-	0	-	-	-	-	-
Home Health Aide	2	7,097	\$12.94	\$12.94	\$12.94	\$13.15	\$13.15	7,097	\$12.94	\$12.94	\$12.94	\$13.15	\$13.15

**Home and Community Based Services Rate Study
 Provider Survey Analysis
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Direct Care Wages (Contractors)

	Survey Count	Contractors						Contractors Excluding Supervisors					
		Reported Hours	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers	Reported Hours	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
Direct Support Professional	21	2,333,597	\$17.21	\$17.19	\$16.07	\$17.01	\$18.01	2,251,677	\$17.23	\$17.22	\$15.75	\$17.07	\$18.12
Registered Nurse	2	2,251	\$35.00	\$35.00	\$35.00	\$22.28	\$22.28	2,251	\$35.00	\$35.00	\$35.00	\$22.28	\$22.28
Behavioral Support Consultant	17	69,062	\$76.21	\$76.25	\$78.66	\$65.29	\$75.82	65,595	\$72.25	\$75.21	\$77.68	\$63.70	\$75.77
Physical Therapist	13	17,909	\$115.91	\$115.91	\$114.00	\$127.69	\$127.69	13,062	\$111.60	\$111.60	\$103.07	\$122.18	\$122.18
Physical Therapist Assistant	6	6,031	\$75.34	\$75.34	\$77.61	\$77.90	\$77.90	6,031	\$75.34	\$75.34	\$77.61	\$77.90	\$77.90
Occupational Therapist	14	23,288	\$106.73	\$101.62	\$109.52	\$106.83	\$103.94	13,026	\$105.85	\$99.12	\$107.38	\$110.94	\$105.93
Occupational Therapist Assistant	8	14,557	\$73.06	\$73.06	\$75.99	\$68.93	\$68.93	14,467	\$71.07	\$71.07	\$75.83	\$68.81	\$68.81
Speech Language Therapist	16	30,661	\$115.70	\$120.60	\$111.77	\$123.30	\$126.64	29,389	\$115.83	\$120.74	\$111.77	\$122.02	\$125.46
Dietician	0	0	-	-	-	-	-	0	-	-	-	-	-

**Home and Community Based Services Rate Study
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Average Annual Turnover Rates Reported by Providers per Staff Type

	Employees						Contractors					
	Survey Count	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers	Survey Count	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
Direct Support Professional	38	46.0%	44.0%	46.0%	54.0%	50.0%	12	26.0%	19.0%	19.0%	32.0%	28.0%
Registered Nurse	2	28.0%	28.0%	28.0%	28.0%	28.0%	0	-	-	-	-	-
Licensed Practical Nurse	1	20.0%	20.0%	20.0%	20.0%	20.0%	0	-	-	-	-	-
Behavioral Support Consultant	2	67.0%	67.0%	67.0%	76.0%	76.0%	4	51.0%	51.0%	49.0%	33.0%	33.0%
Physical Therapist	0	-	-	-	-	-	1	30.0%	30.0%	30.0%	30.0%	30.0%
Physical Therapist Assistant	0	-	-	-	-	-	0	-	-	-	-	-
Occupational Therapist	1	50.0%	50.0%	50.0%	50.0%	50.0%	4	24.0%	24.0%	32.0%	22.0%	22.0%
Occupational Therapist Assistant	0	-	-	-	-	-	2	24.0%	24.0%	24.0%	22.0%	22.0%
Speech Language Therapist	1	6.0%	6.0%	6.0%	6.0%	6.0%	0	-	-	-	-	-
Dietician	0	-	-	-	-	-	0	-	-	-	-	-
Home Health Aide	1	35.0%	35.0%	35.0%	35.0%	35.0%	0	-	-	-	-	-

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Average Annual Training Hours in First and After First Year of Service per by Staff Type

Training Hours in First Year						Training Hours After the First Year						Est. Annual Training Hours Based on Reported Turnover					
Survey Count	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers	Survey Count	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers	

Employees

Direct Support Professional	46	144	69	57	312	88	45	37	27	20	56	39	90	48	39	184	64
Registered Nurse	9	61	53	54	65	58	10	21	13	11	24	17	32	24	23	36	28
Licensed Practical Nurse	6	68	68	48	81	81	6	34	34	28	41	41	40	40	32	49	49
Behavioral Support Consultant	4	922	922	74	547	547	4	104	104	23	68	68	726	726	62	432	432
Physical Therapist	3	37	37	40	41	41	3	15	15	14	14	14	-	-	-	-	-
Occupational Therapist	2	29	29	29	45	45	2	10	10	10	14	14	19	19	19	29	29
Occupational Therapist Assistant	2	26	26	26	44	44	2	9	9	9	14	14	-	-	-	-	-
Speech Language Therapist	3	46	46	45	45	45	3	12	12	14	14	14	14	14	16	16	16
Dietician	0	-	-	-	-	-	0	-	-	-	-	-	-	-	-	-	-
Home Health Aide	2	60	60	60	69	69	2	50	50	50	54	54	54	54	54	59	59

**Home and Community Based Services Rate Study
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Average Annual Training Hours in First and After First Year of Service per by Staff Type

Training Hours in First Year							Training Hours After the First Year						Est. Annual Training Hours Based on Reported Turnover					
Survey Count	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers		Survey Count	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers		Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers

Contractors

Direct Support Professional	17	42	37	40	43	43	16	15	14	12	19	19		23	20	20	26	26
Behavioral Support Consultant	13	52	52	41	43	43	13	18	18	20	22	22		29	29	27	28	28
Physical Therapist	8	45	45	48	51	51	9	16	15	15	16	15		24	24	25	26	26
Physical Therapist Assistant	3	53	53	50	45	45	3	18	18	18	16	16		-	-	-	-	-
Occupational Therapist	10	53	45	48	54	48	10	16	14	15	19	16		24	21	22	27	23
Occupational Therapist Assistant	6	61	61	53	51	51	6	19	19	19	26	26		28	28	26	32	32
Speech Language Therapist	8	36	29	35	39	31	10	14	14	15	15	15		-	-	-	-	-
Dietician	0	-	-	-	-	-	0	-	-	-	-	-		-	-	-	-	-

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Provider Survey Analysis
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Developmental Disabilities Supports Division**

Benefits for Direct Care Workers

	Full-Time	Part-Time
Responding Providers	85	55
Ct. Reported Staff	3,094	1,197

Benefit	Access to Benefit				Eligibility among Agencies that Offer Benefit										Benefit Level Among Staff Receiving Benefit ²					Effective Benefit Level ³
	Responding Agencies	# of Agencies that Offer	% of Agencies that Offer	% of Staff who Have Access	% of Staff Eligible					% of Staff Participating					Benefit Level					
					Average (Mean) with Outliers	Average (Mean) without Outliers	Median	Weighted Average with Outliers ¹	Weighted Average without Outliers ¹	Average (Mean) with Outliers	Average (Mean) without Outliers	Median	Weighted Average with Outliers ¹	Weighted Average without Outliers ¹	Average (Mean) with Outliers	Average (Mean) without Outliers	Median	Weighted Average with Outliers ¹	Weighted Average without Outliers ¹	

Full-Time

Holidays	89	67	75%	91%	97%	99%	100%	96%	98%						8.2	8.1	8.5	8.0	8.0	7.2
Paid Time Off	89	70	79%	95%	95%	99%	100%	93%	99%						11.6	10.7	10.0	11.6	10.4	9.8
Health Insurance	89	58	65%	90%	95%	98%	100%	86%	96%	45%	45%	38%	36%	36%	\$677	\$590	\$586	\$558	\$549	\$176
Other Benefits	89	53	60%	70%	96%	98%	100%	94%	95%	69%	69%	84%	65%	65%	\$137	\$99	\$57	\$107	\$53	\$24

Part-Time

Holidays	59	34	58%	12%	94%	100%	100%	94%	99%						7.2	7.0	7.0	7.3	7.2	0.9
Paid Time Off	58	39	67%	12%	95%	98%	100%	95%	98%						6.4	5.4	6.0	6.3	5.8	0.7
Health Insurance	57	8	14%	9%	73%	86%	78%	70%	78%	55%	55%	55%	40%	40%	\$826	\$1	\$826	\$826	\$826	\$30
Other Benefits	54	18	33%	7%	92%	97%	100%	87%	99%	69%	69%	100%	77%	77%	\$55	\$55	\$58	\$51	\$51	\$3

Worker's Compensation (amount per \$100 wages)															\$2.31	\$1.99	\$1.89	\$2.45	\$2.01	
State Unemployment Security Tax Rate															1.04%	0.72%	0.57%	0.89%	0.84%	

¹Weighted averages are weighted by reported staff for each employment type (full-time and part-time).

²Holidays and paid time off represent days per year; health insurance and other benefits represent the monthly employer-paid premiums (excluding employee contributions).

³The effective benefit level is calculated by multiplying the weighted average (without outliers) benefit level by the "% of Staff who Have Access" and by the "% of Staff Participating" for health insurance and other benefits, or by the "% of Staff who Have Access" by the "% of Staff Eligible" for holidays and paid time off.

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Administration and Program Support Costs

Admin. (All Respondents)	Admin. (Respondents <50%)	Prog. Support (All Respondents)	Prog. Support (Respondents <50%)
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Summary

Count of Providers	120	110	123	120
Program revenues	\$424,294,742	\$418,507,524	\$449,114,236	\$448,519,616
Median rate (excluding Gross Receipts Tax)	16.9%	15.0%	8.4%	8.0%
Weighted average rate (excluding Gross Receipts Tax)	13.3%	12.4%	9.1%	9.0%
Median Gross Receipts Tax rate	7.5%	7.5%		
Weighted average Gross Receipts Tax (GRT) rate	6.6%	6.6%		

**Home and Community Based Services Rate Study
 Provider Survey Analysis
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 Developmental Disabilities Supports Division**

Administration and Program Support Costs

	Admin. (All Respondents)	Admin. (Respondents <50%)	Prog. Support (All Respondents)	Prog. Support (Respondents <50%)
Staffing Costs				
Wages	\$31,607,317	\$24,697,161	\$27,792,882	\$24,501,494
Payroll taxes and benefits	\$5,851,411	\$5,006,206	\$5,187,449	\$4,398,964
Subtotal - Staffing Costs	\$37,458,728	\$29,703,367	\$32,980,331	\$28,900,458
Benefits Rate	18.5%	20.3%	18.7%	18.0%
Other Operating Costs				
<i>Facility Expenses Supporting Administrative/ Program Support/ Other Functions</i>				
Other facility rent/mortgage/depreciation	\$1,573,721	\$1,426,650	\$823,820	\$823,820
Other facility repairs and modifications	\$202,211	\$186,245	\$191,413	\$191,413
Other facility maintenance/janitorial/landscaping/snow removal/pest control	\$129,361	\$114,759	\$160,642	\$160,642
Other facility utilities/telecommunications/etc.	\$419,731	\$399,936	\$353,349	\$353,349
<i>Other Service-Specific Expenses</i>				
Non-staff recruitment, certification, and placement expenses for Family Living homes	\$16,152	\$16,152	\$3,340	\$3,340
Electronic Visit Verification-related costs (e.g., equipment, software)	\$109,793	\$109,793	\$10,300	\$10,300
Equipment and software for remote support and telehealth services	\$19,938	\$200	\$242,541	\$222,803
<i>Travel Expenses</i>				
Agency owned/leased vehicle expenses	\$976,232	\$623,455	\$1,318,809	\$1,131,687
Reimbursement for use of staff personal vehicles	\$514,431	\$457,565	\$374,351	\$374,351
Other travel related expenses (e.g., airfare for out of state travel)	\$194,141	\$167,909	\$205,945	\$185,048
<i>Taxes, Interest, and Insurance</i>				
New Mexico Gross Receipts Taxes (GRT)	\$21,174,521	\$20,154,075	\$0	\$0
Other taxes (exclude payroll taxes and personal income taxes)	\$2,098,840	\$2,050,129	\$0	\$0
Interest expense (non-mortgage and non-vehicle)	\$2,328,836	\$1,550,806	\$0	\$0
All general insurance (exclude vehicle insurance and staff benefits)	\$6,256,758	\$5,443,241	\$253,782	\$0

**Home and Community Based Services Rate Study
 Provider Survey Analysis
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 Developmental Disabilities Supports Division**

Administration and Program Support Costs

	Admin. (All Respondents)	Admin. (Respondents <50%)	Prog. Support (All Respondents)	Prog. Support (Respondents <50%)
<i>All Other Operating Expenses</i>				
Licensing/certification/accreditation fees	\$187,308	\$142,204	\$128,744	\$127,644
Hiring expenses (e.g., advertising, background checks, placement fees, etc.)	\$348,752	\$272,081	\$299,491	\$254,544
Training Expense (e.g., fees and materials; exclude staff payroll costs)	\$2,050,056	\$357,665	\$313,428	\$264,387
Office equipment and furniture	\$535,930	\$470,166	\$250,679	\$246,887
Information technology expense (e.g., computers and software)	\$1,532,311	\$986,080	\$801,119	\$770,844
Office supplies (include postage)	\$881,210	\$781,332	\$420,586	\$402,943
Advertising	\$397,768	\$389,562	\$155,530	\$148,924
Dues and subscriptions	\$186,817	\$172,841	\$181,538	\$179,315
Clinical consulting - pharmaceutical consultants, therapeutic consultants, etc.	\$108,583	\$82,134	\$206,669	\$204,089
Professional consulting - legal/accounting/payroll processing fees/etc.	\$2,197,602	\$2,100,192	\$470,519	\$420,581
Staff immunizations	\$452	\$416	\$2,907	\$2,907
Personal protective equipment	\$54,097	\$48,661	\$27,853	\$27,853
Allocated corporate office overhead	\$2,526,534	\$2,398,167	\$265,942	\$265,942
All other expenses	\$2,224,630	\$1,322,119	\$512,929	\$284,029
Subtotal - Other Operating Costs	\$49,246,718	\$42,224,536	\$7,976,225	\$7,057,643
Grand Total	\$86,705,446	\$71,927,903	\$40,956,556	\$35,958,101

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Supported Living and Intensive Medical Living Services (Developmental Disabilities Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
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Responding providers	44			
Number of homes managed by responding providers	452			
Number of individuals residing in the homes	1,237			

Home Characteristics

Average absence days per individual per year (due to hospitalization, vacation, etc.)		8	7	6	7	7
Percent of agencies that permit overnight shiftworkers to sleep	20%					
Of these agencies, percent that pay the same wage for asleep hours as awake hours	31%					

Activities Outside of the Home

Percent of individuals participating in activities outside the home		88%	95%	100%	89%	94%
Average number of hours per week participants are scheduled to participate		29	30	30	29	30
Average number of hours per week participants actually participate		25	25	25	23	23

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Supported Living and Intensive Medical Living Services Details (Developmental Disabilities Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
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Responding Providers	42					
Number of reported homes across all providers	359					
Average occupancy rate		91%	94%	100%	93%	95%

Distribution of Residents by Rate Category/ Type

Total Residents	1,062					
Percent at Category 1	3%					
Percent at Category 2	12%					
Percent at Category 3	22%					
Percent at Category 4	61%					
Percent Intensive Medical Living Services	2%					

Weekly Home Staffing Hours by Home Size (based on occupancy)

<i>One bed - total participants reported</i>	33					
Awake Hours		145	148	138	145	148
Percent of homes reporting awake hours	100%					
Asleep Hours		59	59	56	59	59
Percent of homes reporting asleep hours	15%					
Total Staff Hours		15432%	15486%	16800%	15432%	15486%
Percent of hours paid as overtime		17%	14%	10%	17%	14%

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Supported Living and Intensive Medical Living Services Details (Developmental Disabilities Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
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Weekly Home Staffing Hours by Home Size (based on occupancy) - cont.

<i>Two beds - total participants reported</i>		102				
Awake Hours		164	157	168	164	157
Percent of homes reporting awake hours	100%					
Asleep Hours		60	60	63	60	60
Percent of homes reporting asleep hours	24%					
Total Staff Hours		179	173	168	179	173
Percent of hours paid as overtime		18%	15%	12%	18%	15%
<i>Three beds - total participants reported</i>		480				
Awake Hours		210	205	208	210	205
Percent of homes reporting awake hours	100%					
Asleep Hours		57	60	63	57	60
Percent of homes reporting asleep hours	17%					
Total Staff Hours		220	213	209	220	213
Percent of hours paid as overtime		18%	16%	12%	18%	16%
<i>Four beds - total participants reported</i>		464				
Awake Hours		251	238	252	251	238
Percent of homes reporting awake hours	100%					
Asleep Hours		88	88	88	88	88
Percent of homes reporting asleep hours	4%					
Total Staff Hours		254	242	252	254	242
Percent of hours paid as overtime		23%	19%	16%	23%	19%

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Supported Living and Intensive Medical Living Services Details (Developmental Disabilities Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
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Weekly Hours of Clinician Support per Home by Home Size (based on occupancy)

<i>One bed</i>					
RNs	3	3	3	3	3
LPNs	2	2	2	2	2
CNAs	1	1	1	1	1
Nutritionists/ Dieticians	1	1	1	1	1
<i>Two beds</i>					
RNs	5	4	2	5	4
LPNs	3	2	2	3	2
CNAs	1	1	1	1	1
Nutritionists/ Dieticians	1	1	1	1	1
<i>Three beds</i>					
RNs	6	5	4	6	5
LPNs	3	2	2	3	2
CNAs	2	2	1	2	2
Nutritionists/ Dieticians	1	1	1	1	1
<i>Four beds</i>					
RNs	6	5	5	6	5
LPNs	3	2	3	3	2
CNAs	5	5	2	5	5
Nutritionists/ Dieticians	1	1	1	1	1

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Supported Living and Intensive Medical Living Services Details (Developmental Disabilities Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
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Vehicle Details

Average number of vehicles per home		1.2	1.2	1.0	1.2	1.2
Average purchase cost		\$42,048	\$38,329	\$35,951	\$42,810	\$38,739
Average monthly lease cost		\$1,128	\$1,159	\$1,216	\$1,128	\$1,156
Average annual mileage for agency-operated vehicles per home		15,239	13,825	12,000	15,535	13,931
Percentage of providers reporting mileage for agency-operated vehicles	69%					
Annual mileage for staff-owned vehicles per home		10,454	7,375	6,954	10,361	7,427
Percentage of providers reporting mileage for staff-owned vehicles	50%					

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Family Living (Developmental Disabilities Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
------------------------	-------------------------	--------	---------------------------------	----------------------------------

Responding providers	44					
Number of homes managed by responding providers	452					
Number of individuals residing in the homes	1,237					
Average absence days per individual per year (due to hospitalization, vacation, etc.)		8	7	7	10	8

Recruitment, Certification, and Placement

Average staff hours required to recruit, train, and approve a Family Living home prior to a placement		32	31	35	29	29
Average number of Family Living homes that received initial approval and placement in the reported fiscal year per agency		7.3	5.5	5.0	9.5	7.0
Typical number of years a Family Living home contracts with an agency		8.7	7.8	9.0	10.8	8.8
Average mileage driven per week for recruitment activities per home recruiter		72	64	35	55	49

Family Home Supervision

Average number of Family Living homes per full-time home supervisor/ internal service		15.0	15.0	15.0	18.2	18.2
Average number of face-to-face visits per year per agency supervisor/ internal service coordinators per Family Living home		51.2	28.4	12.0	66.7	20.4
Average mileage driven per week per home supervisor/ internal service coordinator		120	109	110	128	110

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Family Living (Developmental Disabilities Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
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Family Home Training

Percent of providers that provide on-going training (after initial placement) to Family Living	98%					
Average number of annual training hours delivered to Family Living providers		14	10	10	16	11
Percent of training hours provided face-to-face (rather than online or other remote training)		63%	66%	72%	66%	67%
Percent of providers reporting that training hours typically delivered by the same staff person who supervises the home	48%					
Percent of training hours that Family Living providers receive with a group of other providers		36%	34%	40%	39%	38%
As applicable, average number of participants in a group training session		5.5	5.1	5.0	7.2	6.4
Average mileage driven per week per trainer		75	69	50	65	51

Average Hours of Clinician Support per Year per Participant by Each of the Following:

Registered Nurses		77	21	12	101	19
Licensed Practical Nurses		13	11	10	19	17
Certified Nursing Assistants		-	-	-	-	-
Registered Dietician/ Licensed Nutritionist		12	5	2	24	7

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Family Living Details (Developmental Disabilities Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
------------------------	-------------------------	--------	---------------------------------	----------------------------------

Responding providers	41					
Number of individuals receiving Family Living services from responding providers	1,810					
Years participants have lived in their Family Living home		6.6	5.8	3.5	7.6	6.5

Payments to Family Living Homes

Average daily rate		\$101	\$96	\$90	\$95	\$94
Percent of homes paid a daily rate	12%					
Average monthly rate		\$2,773	\$2,769	\$2,700	\$2,792	\$2,790
Percent of homes paid a monthly rate	88%					
<i>Room & Board Payments</i>						
Percent of participants for whom the agency serves as the representative payee	0.7%					
Average monthly room & board payment		\$1,399	\$1,399	\$790	\$1,149	\$1,149

Substitute Care

Average substitute care hours per year per participant		412	409	500	442	439
<i>Distribution of participants by level of substitute care hours</i>						
No substitute care	34%					
Less than 50 hours	2%					
50 - 100 hours	1%					
100 - 250 hours	5%					
250 - 500 hours	10%					
500 - 749 hours	11%					
750 or more hours	36%					

**Home and Community Based Services Rate Study
 Provider Survey Analysis
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 Developmental Disabilities Supports Division**

Customized In-Home Supports (Developmental Disabilities Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
------------------------	-------------------------	--------	---------------------------------	----------------------------------

Responding providers	36				
Number of individuals receiving Customized In Home Supports	318				

Service Design

Average number of hours of Customized In-Home Supports that an individual receives in a week	33.0	30.0	29.5	35.7	34.3
Average number of face-to-face Customized In-Home Supports visits per week per DSP	8.7	6.3	5.0	13.8	7.7
Average length in hours of an Customized In-Home Supports visit	4.4	4.2	4.0	5.2	5.1
Percent of Customized In-Home Supports hours delivered to groups of two or more individuals	20%	5%	0%	56%	12%

Mileage

Average miles driven per week per DSP to travel to and from individual visits	74	47	48	104	52
Average miles driven per week per DSP to transport individuals	56	41	30	127	45

**Home and Community Based Services Rate Study
 Provider Survey Analysis
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 Developmental Disabilities Supports Division**

In-Home Living Supports (Mi Via Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
------------------------	-------------------------	--------	---------------------------------	----------------------------------

Responding providers	24	
Number of individuals receiving In-Home Living Supports	2,292	

Service Design

Average number of hours of In-Home Living Supports that an individual receives in a week	121.8	81.5	42.0	60.3	56.9
Average number of face-to-face In-Home Living Supports visits per week per DSP	8.4	8.4	7.0	8.9	8.9
Average length in hours of an In-Home Living Supports visit	13.5	13.5	8.6	11.6	11.6
Percent of In-Home Living Supports hours provided by your agency delivered to groups of two or more individuals	14%	5%	5%	7%	4%

Mileage

Average miles driven per week per DSP to travel to and from individual visits	21	21	17	12	12
Average miles driven per week per DSP to transport individuals	57	44	43	65	64

**Home and Community Based Services Rate Study
 Provider Survey Analysis
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 Developmental Disabilities Supports Division**

Home Health Aide (Medically Fragile Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
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Responding providers	3				
Number of individuals receiving Home Health Aide services	19				

Service Design

Average number of hours of Home Health Aide supports that an individual receives in a week		29.3	29.3	36.0	26.9	26.9
Average number of face-to-face Home Health Aide visits per week per DSP		4.3	4.3	4.0	4.4	4.4
Average length in hours of a Home Health Aide visit		6.9	6.9	7.3	6.0	6.0

Mileage

Average miles driven per week per DSP to travel to and from individual visits		8	8	8	6	6
Average miles driven per week per DSP to transport individuals		-	-	-		

**Home and Community Based Services Rate Study
 Provider Survey Analysis
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 Developmental Disabilities Supports Division**

Respite (Developmental Disabilities Waiver and Medically Fragile Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
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Responding providers	35				
Number of individuals receiving Respite (Developmental Disabilities Waiver)	343				
Number of individuals receiving Respite (Medically Fragile Waiver)	37				

Service Design

Average length of a Respite encounter (in hours)	6.3	6.0	5.0	6.2	6.1
Percentage of visits that are provided in an individual's home or place of residence	50%	52%	60%	55%	55%
Percentage of visits that are provided in private home of a Respite provider	24%	25%	20%	21%	21%
Percentage of visits that are provided in another community setting (such as an Supported Living/ IMLS home)	27%	24%	19%	24%	23%

Mileage

Average miles driven per week per DSP to travel to and from individual visits	74	47	48	104	52
Average miles driven per week per DSP to transport individuals	56	41	30	127	45

**Home and Community Based Services Rate Study
 Provider Survey Analysis
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 Developmental Disabilities Supports Division**

Customized Community Support, Individual (Developmental Disabilities Waiver)

		Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
Responding providers	60					
Number of individuals receiving Customized Community Support - Individual (Developmental Disabilities Waiver)	2,355					
Number of individuals receiving Customized Community Support - Individual (Medically Fragile Waiver)	12					

Service Design

Average number of hours of Customized Community Support - Individual that an individual	22.8	23.4	24.0	24.8	24.8
Average number of face-to-face Customized Community Support - Individual visits per week per	7.8	6.3	5.0	7.1	5.6
Average length in hours of an Customized Community Support - Individual visit	5.3	5.1	5.3	5.3	5.2

Mileage

Average miles driven per week per DSP to travel to and from individual visits	113	73	40	216	78
Average miles driven per week per DSP to transport individuals	139	118	90	156	122

**Home and Community Based Services Rate Study
 Provider Survey Analysis
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 Developmental Disabilities Supports Division**

Customized Community Support, Group (Developmental Disabilities Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
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Responding Providers	39	
Number of reported sites across all providers	54	

Attributes of sites where/ out of which services are delivered or administered

Average hours per week programs are operated		34.3	34.2	34.3	37.8	37.5
Average attendance rate		86%	90%	86%	90%	92%
Average operating cost per square foot		\$17.58	\$13.39	\$17.58	\$17.91	\$12.41
Average group size (participants per DSP)		2.4	2.1	2.4	2.4	2.2
Sites by Customized Community Support, Group type:						
<u>Developmental Disabilities Waiver, Small Group</u>						
Total reported sites	40					
Average proportion of time delivered in the following settings:						
Facility-based setting		1%	0%	1%	0%	0%
Community-based setting*		99%	100%	99%	100%	100%
Remotely		0%	0%	0%	0%	0%
<u>Developmental Disabilities Waiver, Jackson Class</u>						
Total reported sites	7					
Average proportion of time delivered in the following settings:						
Facility-based setting		49%	49%	49%	62%	62%
Community-based setting*		51%	51%	51%	38%	38%
Remotely		0%	0%	0%	0%	0%

**Home and Community Based Services Rate Study
 Provider Survey Analysis
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 Developmental Disabilities Supports Division**

Customized Community Support, Group (Developmental Disabilities Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
------------------------	-------------------------	--------	---------------------------------	----------------------------------

<u>Developmental Disabilities Waiver, Category 1</u>					
Total reported sites	26				
Average proportion of time delivered in the following settings:					
Facility-based setting		25%	22%	25%	30%
Community-based setting*		75%	78%	75%	70%
Remotely		0%	0%	0%	0%
<u>Developmental Disabilities Waiver, Category 2</u>					
Total reported sites	22				
Average proportion of time delivered in the following settings:					
Facility-based setting		31%	30%	31%	37%
Community-based setting*		69%	70%	69%	63%
Remotely		0%	0%	0%	0%
<u>Medically Fragile Waiver participants</u>					
Total reported sites	1.0				
Average proportion of time delivered in the following settings:					
Facility-based setting		0%	0%	0%	0%
Community-based setting*		100%	100%	100%	100%
Remotely		0%	0%	0%	0%

* A setting not owned/ operated by the provider, such as going to a public park or theater.

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Customized Community Support, Group (Developmental Disabilities Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
------------------------	-------------------------	--------	---------------------------------	----------------------------------

Weekly Hours of Clinician Support per Site/ Program

	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
RNs	9	7	9	15	7
LPNs	7	5	7	8	7
Home Health Aides	-	-	-	-	-
Nutritionists/ Dieticians	11	5	11	14	9

Vehicle Details

	Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
Average number of vehicles (owned or leased by reporting agencies) utilized for Customized Community Support - Group services per site	4.2	3.6	4.2	7.1	4.6
Average weekly mileage per vehicle	144	123	144	147	128
Typical vehicle size (in terms of passengers) for agency-owned and leased vehicles	7	7	7	8	7
As applicable, average purchase price of agency-owned vehicles	\$49,114	\$42,667	\$49,114	\$41,781	\$41,193
As applicable, average monthly lease price of agency-leased vehicles	\$957	\$957	\$957	\$825	\$825
Avg. # of miles per week driven by DSPs in their personal vehicles to transport individuals receiving services	104	90	104	127	93

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Community Integrated Employment - Individual (Developmental Disabilities Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
------------------------	-------------------------	--------	---------------------------------	----------------------------------

Responding providers by service:		
Job Development	12	
Job Coaching	15	
Job Maintenance/ Intensive	21	
Number of individuals receiving each service:		
Job Development	78	
Job Coaching	131	
Job Maintenance/ Intensive	156	

Caseloads and Other Service Factors - Job Development

Average current caseload per full time equivalent staff	10.0	10.0	4.0	5.1	4.5
Average number of individuals successfully placed in employment per full time equivalent job developer each year	3.4	3.4	2.5	5.0	5.0
For individuals successfully placed in employment, % that remained employed for at least 90 days	88%	96%	100%	87%	96%
Average number of staff hours required to successfully place an individual in employment	84.2	84.2	90.0	103.9	103.9
Percentage of individuals served who are not successfully placed	32%	25%	30%	28%	28%
Estimated number of hours of support per individual without a successful placement	69.0	69.0	65.0	73.8	73.8
Mileage					
Average miles driven per week per DSP to travel to and from individual visits	46	31	38	42	34
Average miles driven per week per DSP to transport individuals	22	22	23	23	23

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Community Integrated Employment - Individual (Developmental Disabilities Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
------------------------	-------------------------	--------	---------------------------------	----------------------------------

Caseloads and Other Service Factors - Job Coaching & Job Maintenance/ Intensive

Average current caseload per full time equivalent staff:					
Job Coaching	6.9	5.3	3.0	8.2	4.3
Job Maintenance/ Intensive	6.6	4.0	3.0	5.5	4.3
Average hours per week worked by individuals receiving each service:					
Job Coaching	11	11	10	10	9
Job Maintenance/ Intensive	13	11	10	11	11
Average hourly wage earned by individuals receiving each service:					
Job Coaching	\$13.48	\$13.16	\$13.00	\$13.67	\$13.57
Job Maintenance/ Intensive	\$13.69	\$13.28	\$13.00	\$13.34	\$13.05
Mileage					
Average miles driven per week per DSP to travel to and from individual visits	27	23	25	32	32
Average miles driven per week per DSP to transport individuals	112	48	16	265	58

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Community Integrated Employment - Self Employment (Developmental Disabilities Waiver)

		Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
Responding providers	7					
Number of individuals receiving Community Integrated Employment - Self Employment	11					
<i>Caseload and Service Design</i>						
Average current caseload per full time equivalent staff		1.4	1.2	1.0	1.7	1.3
Average number of ongoing support hours per week each individual receives		15.8	15.8	10.0	13.4	13.4
<i>Mileage</i>						
Average miles driven per week per DSP to travel to and from individual visits		13	13	10	17	17
Average miles driven per week per DSP to transport individuals		100	100	38	72	72

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Community Integrated Employment - Group (Developmental Disabilities Waiver)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
------------------------	-------------------------	--------	---------------------------------	----------------------------------

Responding providers	10				
Number of individuals receiving Community Integrated Employment - Group	37				

Group Sizes and Avg. Attendance Rates

Average number of individuals per DSP when providing services in the center/facility	2.2	1.8	2.0	2.5	1.8
Average number of individuals per DSP when providing services in the community	3.0	2.0	2.0	4.2	1.9
Average attendance rate for individuals receiving services	87%	88%	90%	89%	89%

Vehicles and Mileage

Average number of agency-owned/ leased vehicles per program	2.0	2.0	2.0	2.2	2.2
Number that accommodate non-ambulatory individuals	3.0	3.0	3.0	1.9	1.9
Average number of miles per vehicle per week	178.6	178.6	117.8	155.9	155.9
Percent of miles associated with transporting individuals to/from their homes	62%	62%	63%	58%	58%
Percent of miles reported associated with 'in-program' transportation	38%	38%	37%	42%	42%
Typical vehicle size (in terms of passengers)	5.2	5.2	6.5	6.6	6.6
Average useful life (in miles) of vehicles before disposal	200,000	200,000	200,000	200,000	200,000
Average purchase price of agency-owned vehicles reported	\$59,858	\$59,858	\$62,795	\$64,366	\$64,366
Average monthly lease price of agency-leased vehicles	\$1,547	\$1,547	\$1,547	\$1,547	\$1,547
Average number of miles per vehicle per week incurred by staff-owned vehicles used in service delivery	149	149	50	182	182

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Behavioral Support Consultation (All Waivers)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
------------------------	-------------------------	--------	---------------------------------	----------------------------------

Responding providers	27				
Number of individuals receiving Beh. Supp. Consultation (Developmental Disabilities Waiver)	2,003				
Number of individuals receiving Beh. Supp. Consultation (Medically Fragile Waiver)	9				
Number of individuals receiving Beh. Supp. Consultation (Mi Via Waiver)	23				

Service Design

Average length in hours of a Behavioral Support Consultation visit		1.3	1.1	1.0	1.6	1.1
Percentage of Behavioral Support Consultant services delivered in the following settings:						
In a home- or community-based setting		70%	73%	72%	69%	72%
Through a telehealth model		13%	13%	14%	15%	13%
In an office/ clinic setting		16%	15%	14%	16%	15%

Mileage

Average miles driven per week per staff to travel between service visits		170	164	160	210	169
Average miles driven per week per staff to transport individuals		22	27	14	38	38

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Adult/ Private Duty Nursing - Registered Nurses (All Waivers)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
------------------------	-------------------------	--------	---------------------------------	----------------------------------

Responding providers	38			
Number of individuals receiving Adult/ Private Duty Nursing (RN) - (Developmental Disabilities Waiver)	2,065			
Number of individuals receiving Adult/ Private Duty Nursing (RN) - (Medically Fragile Waiver)	132			
Number of individuals receiving Adult/ Private Duty Nursing (RN) - (Mi Via Waiver)	3			

Service Design

Average length - in hours - of a service encounter	1.7	1.3	1.0	1.5	1.5
Percentage of Adult/ Private Duty Nursing (RN) - services delivered in the following settings:					
In a home- or community-based setting	54%	57%	58%	53%	55%
Through a telehealth model	13%	12%	13%	13%	13%
In an office/ clinic setting	34%	31%	29%	34%	32%

Mileage

Average miles driven per week per staff to travel between service visits	91	70	48	139	100
Average miles driven per week per staff to transport individuals	58	58	63	85	85

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Adult/ Private Duty Nursing - Licensed Practical Nurses (All Waivers)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
------------------------	-------------------------	--------	---------------------------------	----------------------------------

Responding providers	3			
Number of individuals receiving Adult/ Private Duty Nursing (LPN) - (Developmental Disabilities Waiver)	66			
Number of individuals receiving Adult/ Private Duty Nursing (LPN) - (Medically Fragile Waiver)	0			
Number of individuals receiving Adult/ Private Duty Nursing (LPN) - (Mi Via Waiver)	0			

Service Design

Average length - in hours - of a service encounter	1.7	1.3	1.0	1.5	1.3
Percentage of Adult/ Private Duty Nursing (LPN) - services delivered in the following settings:					
In a home- or community-based setting	66%	66%	73%	48%	48%
Through a telehealth model	7%	6%	9%	9%	9%
In an office/ clinic setting	26%	28%	18%	42%	42%

Mileage

Average miles driven per week per staff to travel between service visits	89	44	30	228	37
Average miles driven per week per staff to transport individuals	59	78	68	65	65

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Therapy Services - Physical Therapists (All Waivers)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
------------------------	-------------------------	--------	---------------------------------	----------------------------------

Responding providers	32				
Number of individuals receiving Physical Therapy (Developmental Disabilities Waiver)	1,437				
Number of individuals receiving Physical Therapy (Medically Fragile Waiver)	44				
Number of individuals receiving Physical Therapy (Mi Via Waiver)	36				

Service Design

Average length - in hours - of a service encounter	1.0	1.0	1.0	1.0	1.0
Percentage of Physical Therapy services delivered in the following settings:					
In a home- or community-based setting	65%	68%	78%	80%	81%
Through a telehealth model	8%	5%	4%	5%	3%
In an office/ clinic setting	28%	27%	18%	15%	15%

Mileage

Average miles driven per week per staff to travel between service visits	174	124	115	198	112
Average miles driven per week per staff to transport individuals	41	24	23	49	33

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Therapy Services - Occupational Therapists (All Waivers)

		Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
Responding providers	26					
Number of individuals receiving Occupational Therapy (Developmental Disabilities Waiver)	1,407					
Number of individuals receiving Occupational Therapy (Medically Fragile Waiver)	127					
Number of individuals receiving Occupational Therapy (Mi Via Waiver)	61					

Service Design

		1.2	1.1	1.0	1.0	1.0
Average length - in hours - of a service encounter						
Percentage of Occupational Therapy services delivered in the following settings:						
In a home- or community-based setting		63%	66%	71%	65%	68%
Through a telehealth model		6%	4%	4%	6%	4%
In an office/ clinic setting		31%	30%	25%	29%	28%

Mileage

		151	135	175	151	143
Average miles driven per week per staff to travel between service visits						
Average miles driven per week per staff to transport individuals		46	46	24	57	57

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Therapy Services - Speech Language Pathologists (All Waivers)

		Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
Responding providers	26					
Number of individuals receiving Speech Language Pathology services (Developmental Disabilities Waiver)	1,650					
Number of individuals receiving Speech Language Pathology services (Medically Fragile Waiver)	77					
Number of individuals receiving Speech Language Pathology services (Mi Via Waiver)	76					

Service Design

Average length - in hours - of a service encounter		2.3	1.1	1.0	2.2	1.0
Percentage of Speech Language Pathology services delivered in the following settings:						
In a home- or community-based setting		67%	72%	72%	70%	71%
Through a telehealth model		14%	8%	8%	4%	3%
In an office/ clinic setting		19%	20%	20%	26%	26%

Mileage

Average miles driven per week per staff to travel between service visits		133	115	105	149	133
Average miles driven per week per staff to transport individuals		102	102	75	102	102

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Therapy Services - Physical Therapy Assistants (All Waivers)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
------------------------	-------------------------	--------	---------------------------------	----------------------------------

Responding providers	14				
Number of individuals receiving Physical Therapy Assistant services (Developmental Disabilities Waiver)	548				
Number of individuals receiving Physical Therapy Assistant (Medically Fragile Waiver)	22				
Number of individuals receiving Physical Therapy Assistant (Mi Via Waiver)	1				

Service Design

Average length - in hours - of a service encounter	0.9	1.0	1.0	0.9	1.0
Percentage of Physical Therapy Assistant services delivered in the following settings:					
In a home- or community-based setting	80%	78%	82%	75%	76%
Through a telehealth model	3%	3%	3%	2%	2%
In an office/ clinic setting	18%	19%	15%	23%	22%

Mileage

Average miles driven per week per staff to travel between service visits	94	80	52	176	98
Average miles driven per week per staff to transport individuals	83	100	19	87	87

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Therapy Services - Occupational Therapy Assistants (All Waivers)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
------------------------	-------------------------	--------	---------------------------------	----------------------------------

Responding providers	14				
Number of individuals receiving Occupational Therapy Assistant services (Developmental Disabilities Waiver)	617				
Number of individuals receiving Occupational Therapy Assistant (Medically Fragile Waiver)	102				
Number of individuals receiving Occupational Therapy Assistant (Mi Via Waiver)	7				

Service Design

Average length - in hours - of a service encounter	1.1	0.9	1.0	0.9	0.9
Percentage of Occupational Therapy Assistant services delivered in the following settings:					
In a home- or community-based setting	69%	70%	84%	72%	73%
Through a telehealth model	6%	6%	5%	8%	8%
In an office/ clinic setting	25%	24%	12%	20%	20%

Mileage

Average miles driven per week per staff to travel between service visits	99	99	39	106	106
Average miles driven per week per staff to transport individuals	108	108	25	50	50

**Home and Community Based Services Rate Study
 Provider Survey Analysis
 prepared for New Mexico Health Care Authority
 Developmental Disabilities Supports Division**

Nutritional Counseling (All Waivers)

Average w/ Outliers	Average w/o Outliers	Median	Weighted Avg. w/ Outliers	Weighted Avg. w/o Outliers
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Responding providers	11				
Number of individuals receiving Nutritional Counseling (Developmental Disabilities Waiver)	322				
Number of individuals receiving Nutritional Counseling (Medically Fragile Waiver)	11				
Number of individuals receiving Nutritional Counseling (Mi Via Waiver)	1				

Service Design

Average length - in hours - of a service encounter	1.1	1.0	1.0	1.6	1.1
Percentage of Nutritional Counseling services delivered in the following settings:					
In a home- or community-based setting	39%	39%	38%	44%	44%
Through a telehealth model	19%	19%	18%	24%	24%
In an office/ clinic setting	41%	41%	44%	32%	32%

Mileage

Average miles driven per week per staff to travel between service visits	69	69	69	34	34
Average miles driven per week per staff to transport individuals	5	5	5	5	5

Attachment 7 - Time Study Instrument - Case Management and Consultant Services

New Mexico Health Care Authority
Developmental Disabilities Supports Division

**Home and Community Based Services (HCBS)
Rate Study**

Time Study - Case Management & Consultant Services

– distributed by –

BURNS & ASSOCIATES
A Division of Health Management Associates

August 28, 2025

Please complete and submit your time study to ddsd-rate-study@healthmanagement.com by **September 30th, 2025**.

Questions? Contact Derek Barber with Health Management Associates at ddsd-rate-study@healthmanagement.com or (517) 993-9229.

General Instructions for Completing Time Study

Overview of Time Study

The New Mexico Health Care Authority's Developmental Disabilities Supports Division (DDSD) is in the process of reviewing payment rates for services covered under the Developmental Disabilities, Mi Via, and Medically Fragile Waivers. DDSD has contracted with Burns & Associates, a division of Health Management Associates (HMA-Burns), to assist with this rate study. As part of the rate study, HMA-Burns has developed this workbook to understand the responsibilities of Case Managers and Consultants who support these waivers.

Confidentiality

All data collected through the time study will be kept confidential. HMA-Burns will not share the data reported with a worker's employer or with DDSD. All completed workbook will be combined and reported in total.

Instructions for Completing the Time Study Workbook

1. Save this workbook so that you can report your daily tasks over the next 14 days. You may choose to print a form to allow you to record time throughout the day and then transfer the information to the spreadsheet.
2. Select cells with an "i" icon to access additional instructions. Refer to the example time study day on the 'Example Day' tab, which provides an example of what a completed day may look like.
3. Complete all questions on the **Contact Details and Background Form**. Additional instructions for select lines follow:
 - a. On Line 4, select 'Employee' if you receive a W-2 from your agency, or 'Contractor' if you are not directly employed but receive a 1099 statement from your agency.
 - b. Report the first date for which you will be reporting time on Line 10 and the end date (14 days later) will automatically calculate on Line 11. Each "Day" tab represents a single day in the 14-day consecutive period for which you will report your time.
 - c. On Lines 12 through 14, report your current active caseload of waiver participants for each waiver program (including the Developmental Disabilities Waiver, Mi Via Waiver, and Medically-Fragile Waiver). If you do not carry a caseload in any given waiver, leave the corresponding cell
 - d. Complete the expense reporting on Lines 15 - 27 **only** if you are a contractor. Report expenses for a recent 12-month period for which you have complete and reliable data.

General Instructions for Completing Time Study

4. Use the "Day 1" spreadsheet to report time for the first day of the 14-day period. Day 2 represents the 2nd day in the 14-day period, and so on. You will complete an individual day tab for each of the 14 days in the two-week time study period, whether you worked that day or not. If you are paid on an hourly basis, report only paid time. Additional instructions for each daily worksheet are below:
- a. Select the drop down list in Line 1 to report 'Yes' if worked any part of the day. If you did not work on any day within the 14-day reporting period, select the 'No' response and reason that most closely describes why you did not work (e.g., 'No – I was not scheduled to work today'). If you select any of the 'No' choices, the rest of the form will black-out and you will not need to report any additional information for the day.
 - b. On Line 2, report the total work related miles you drove for the day (for example, traveling between service visits, transporting service recipients, etc.) Do not include mileage spent commuting to/ from work for the day.
 - c. Start with the time you were scheduled to begin the workday. The form is set-up to report time across a full 24-hour period (in 15-minute time periods and beginning at 12:00 am). Please report your time **only** for your actual work hours.
 - d. For each 15-minute time period you worked, select the activity that best describes the nature of the task you performed in Column H. If you performed two tasks at the same time (such as recordkeeping while also attending a staff meeting), select the option that took the greater focus.
 - e. For each 15-minute selection, enter the applicable street address, city, and zip code for where the task was performed in Columns I through K. You do not need to enter an address for travel time.

General Instructions for Completing Time Study

f. Review the following additional guidance when reporting activities in Column H:

- **Time 'lost' due to missed appointment:** If you were scheduled to perform a service but the service was canceled (for example, due to the client’s illness) select this option. This option should only be used to report time that was not spent on some other activity. Consider the following example for an appointment scheduled for 9:00 AM, but the client no-shows:

Time	Activity	Drop-Down Option
9:00-9:15	knocking on the individual’s door, attempting to contact them	Time 'lost' due to missed appointments
9:15-9:30	drive back to the office	Paid travel time
9:30-9:45	catch-up on phone calls on behalf of clients	Performing collateral contacts (non-billable)
9:45-10:00	catch-up on phone calls on behalf of clients	Performing collateral contacts (non-billable)

In this example, although the missed appointment was an hour, only the first 15 minutes would be reported as “Time ‘lost’ due to missed appointments” as the remaining time was spent on other activities.

- **Paid travel time:** Use this option to report time spent driving between service encounters, transporting individuals, or performing other Case Management/ Consultant-related tasks. Do not use this option for time spent driving to your first work location for the day (for example, the drive from your home to the office or the first service location), or driving from your last work location for the day (for example, your drive

Have Questions or Need Assistance?

For questions or assistance in completing the Time Study workbook, please email us at DDSD-Rate-Study@healthmanagement.com, or call Derek Barber at (517) 993-9229.

Submitting your Completed Time Study Workbook

At the end of the 14-day timekeeping period, please submit your survey via email to DDSD-Rate-Study@healthmanagement.com. Please complete your time study by no later than **September 30th, 2025**.

Contact Details and Background Details (click ⓘ icons for directions)

Line	Factor	Input
Contact and Background Information		
1	Name	
2	Email address	
3	Contact phone number	
4	Employment status (select from the drop down)	
5	Job title	
6	Select the county in which you <u>primarily</u> worked during the two week time study period	
7	Name of provider/ agency for which you provide billable services (as applicable)	
8	How long have you been providing Case Management and/ or Consulting services (select from the drop down)?	
9	Select the highest level of education you have obtained	
Time Study Period		
10	Time study start date (enter M/D/YYYY format)	
11	Time study end date	
Report your current <u>active</u> caseload for each of the following DDS waiver programs:		
12	Developmental Disabilities Waiver	
13	Mi Via Waiver participants	
14	Medically-Fragile Waiver	

ⓘ ⓘ ⓘ ⓘ ⓘ ⓘ

Contact Details and Background Details (click ⓘ icons for directions)

Line	Factor	Input
<p>Annual Business Expenses Incurred by Contractors Complete this section only if you are a contractor (as reported on Line 4). Report expense information for a recent 12-month period for which you have reliable expense details.</p>		
15	Professional liability insurance	
16	Licensing, credentialing, continuing education/ training expenses	
17	Information technology/ equipment	
18	Service/ office supplies	
19	Travel and transportation expenses	
20	Bookkeeping and administrative support (including tax preparation, legal consultation)	
21	Other expense (report expense amount at right, and enter a description of the expense below):	
	[Enter a brief description of this expense]	
22	Other expense (report expense amount at right, and enter a description of the expense below):	
	[Enter a brief description of this expense]	
23	Other expense (report expense amount at right, and enter a description of the expense below):	
	[Enter a brief description of this expense]	
24	Other expense (report expense amount at right, and enter a description of the expense below):	
	[Enter a brief description of this expense]	
25	Other expense (report expense amount at right, and enter a description of the expense below):	
	[Enter a brief description of this expense]	
26	Total Annual Contractor Expenses	
27	What percentage of your time during the reported fiscal year was spent supporting a DDSD HCBS Waiver program?	

Line	Day 1
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1	Did you work today?	Yes	①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)	17.0	

Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
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3	12:00 AM - 12:15 AM			
4	12:15 AM - 12:30 AM			
5	12:30 AM - 12:45 AM			
6	12:45 AM - 1:00 AM			
7	1:00 AM - 1:15 AM			
8	1:15 AM - 1:30 AM			
9	1:30 AM - 1:45 AM			
10	1:45 AM - 2:00 AM			
11	2:00 AM - 2:15 AM			
12	2:15 AM - 2:30 AM			
13	2:30 AM - 2:45 AM			
14	2:45 AM - 3:00 AM			
15	3:00 AM - 3:15 AM			
16	3:15 AM - 3:30 AM			
17	3:30 AM - 3:45 AM			
18	3:45 AM - 4:00 AM			
19	4:00 AM - 4:15 AM			
20	4:15 AM - 4:30 AM			
21	4:30 AM - 4:45 AM			
22	4:45 AM - 5:00 AM			
23	5:00 AM - 5:15 AM			
24	5:15 AM - 5:30 AM			
25	5:30 AM - 5:45 AM			
26	5:45 AM - 6:00 AM			
27	6:00 AM - 6:15 AM			
28	6:15 AM - 6:30 AM			
29	6:30 AM - 6:45 AM			

EXAMPLE ONLY
(See Below)

Line	Day 1		
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1	Did you work today?	Yes	
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)	17.0	

Time of Day	Activity (select service type from drop down) ⓘ	Street Address	City	Zip Code
30	6:45 AM - 7:00 AM			
31	7:00 AM - 7:15 AM			
32	7:15 AM - 7:30 AM			
33	7:30 AM - 7:45 AM			
34	7:45 AM - 8:00 AM			
35	8:00 AM - 8:15 AM	Employer time (e.g., staff meetings, receiving supervision)	123 Oak Street	Albuquerque 87199
36	8:15 AM - 8:30 AM	Employer time (e.g., staff meetings, receiving supervision)	123 Oak Street	Albuquerque 87199
37	8:30 AM - 8:45 AM	Employer time (e.g., staff meetings, receiving supervision)	123 Oak Street	Albuquerque 87199
38	8:45 AM - 9:00 AM	Employer time (e.g., staff meetings, receiving supervision)	123 Oak Street	Albuquerque 87199
39	9:00 AM - 9:15 AM	Paid travel time	N/A	
40	9:15 AM - 9:30 AM	Paid travel time	N/A	
41	9:30 AM - 9:45 AM	Meeting with individuals (whether face-to-face or remotely)	123 Maple Street	Albuquerque 87199
42	9:45 AM - 10:00 AM	Meeting with individuals (whether face-to-face or remotely)	123 Maple Street	Albuquerque 87199
43	10:00 AM - 10:15 AM	Meeting with individuals (whether face-to-face or remotely)	123 Maple Street	Albuquerque 87199
44	10:15 AM - 10:30 AM	Meeting with individuals (whether face-to-face or remotely)	123 Maple Street	Albuquerque 87199
45	10:30 AM - 10:45 AM	Meeting with individuals (whether face-to-face or remotely)	123 Maple Street	Albuquerque 87199
46	10:45 AM - 11:00 AM	Paid travel time	N/A	
47	11:00 AM - 11:15 AM	Paid travel time	N/A	
48	11:15 AM - 11:30 AM	Meeting with individuals (whether face-to-face or remotely)	123 Pine Street	Albuquerque 87199
49	11:30 AM - 11:45 AM	Meeting with individuals (whether face-to-face or remotely)	123 Pine Street	Albuquerque 87199
50	11:45 AM - 12:00 PM	Meeting with individuals (whether face-to-face or remotely)	123 Pine Street	Albuquerque 87199
51	12:00 PM - 12:15 PM	Meeting with individuals (whether face-to-face or remotely)	123 Pine Street	Albuquerque 87199
52	12:15 PM - 12:30 PM	Paid break	N/A	
53	12:30 PM - 12:45 PM	Paid break	N/A	
54	12:45 PM - 1:00 PM	Paid break	N/A	
55	1:00 PM - 1:15 PM	Paid break	N/A	
56	1:15 PM - 1:30 PM	Paid travel time	N/A	

Line	Day 1		
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1	Did you work today?	Yes	
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)	17.0	



Time of Day	Activity (select service type from drop down)	Street Address	City	Zip Code
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57	1:30 PM - 1:45 PM	Paid travel time	N/A		
58	1:45 PM - 2:00 PM	Recordkeeping/ report writing	123 Oak Street	Albuquerque	87199
59	2:00 PM - 2:15 PM	Recordkeeping/ report writing	123 Oak Street	Albuquerque	87199
60	2:15 PM - 2:30 PM	Recordkeeping/ report writing	123 Oak Street	Albuquerque	87199
61	2:30 PM - 2:45 PM	Recordkeeping/ report writing	123 Oak Street	Albuquerque	87199
62	2:45 PM - 3:00 PM	Performing assessments/ developing person-centered plans	123 Oak Street	Albuquerque	87199
63	3:00 PM - 3:15 PM	Performing assessments/ developing person-centered plans	123 Oak Street	Albuquerque	87199
64	3:15 PM - 3:30 PM	Performing assessments/ developing person-centered plans	123 Oak Street	Albuquerque	87199
65	3:30 PM - 3:45 PM	Performing assessments/ developing person-centered plans	123 Oak Street	Albuquerque	87199
66	3:45 PM - 4:00 PM	Performing assessments/ developing person-centered plans	123 Oak Street	Albuquerque	87199
67	4:00 PM - 4:15 PM	Performing assessments/ developing person-centered plans	123 Oak Street	Albuquerque	87199
68	4:15 PM - 4:30 PM	Performing assessments/ developing person-centered plans	123 Oak Street	Albuquerque	87199
69	4:30 PM - 4:45 PM	Performing assessments/ developing person-centered plans	123 Oak Street	Albuquerque	87199
70	4:45 PM - 5:00 PM	Performing assessments/ developing person-centered plans	123 Oak Street	Albuquerque	87199
71	5:00 PM - 5:15 PM				
72	5:15 PM - 5:30 PM				
73	5:30 PM - 5:45 PM				
74	5:45 PM - 6:00 PM				
75	6:00 PM - 6:15 PM				
76	6:15 PM - 6:30 PM				
77	6:30 PM - 6:45 PM				
78	6:45 PM - 7:00 PM				
79	7:00 PM - 7:15 PM				
80	7:15 PM - 7:30 PM				
81	7:30 PM - 7:45 PM				
82	7:45 PM - 8:00 PM				
83	8:00 PM - 8:15 PM				

Line	Day 1
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1	Did you work today?	Yes	①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)	17.0	

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
84	8:15 PM - 8:30 PM				
85	8:30 PM - 8:45 PM				
86	8:45 PM - 9:00 PM				
87	9:00 PM - 9:15 PM				
88	9:15 PM - 9:30 PM				
89	9:30 PM - 9:45 PM				
90	9:45 PM - 10:00 PM				
91	10:00 PM - 10:15 PM				
92	10:15 PM - 10:30 PM				
93	10:30 PM - 10:45 PM				
94	10:45 PM - 11:00 PM				
95	11:00 PM - 11:15 PM				
96	11:15 PM - 11:30 PM				
97	11:30 PM - 11:45 PM				
98	11:45 PM - 12:00 AM				

Line	Day 1		
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
3	12:00 AM - 12:15 AM				
4	12:15 AM - 12:30 AM				
5	12:30 AM - 12:45 AM				
6	12:45 AM - 1:00 AM				
7	1:00 AM - 1:15 AM				
8	1:15 AM - 1:30 AM				
9	1:30 AM - 1:45 AM				
10	1:45 AM - 2:00 AM				
11	2:00 AM - 2:15 AM				
12	2:15 AM - 2:30 AM				
13	2:30 AM - 2:45 AM				
14	2:45 AM - 3:00 AM				
15	3:00 AM - 3:15 AM				
16	3:15 AM - 3:30 AM				
17	3:30 AM - 3:45 AM				
18	3:45 AM - 4:00 AM				
19	4:00 AM - 4:15 AM				
20	4:15 AM - 4:30 AM				
21	4:30 AM - 4:45 AM				
22	4:45 AM - 5:00 AM				
23	5:00 AM - 5:15 AM				
24	5:15 AM - 5:30 AM				
25	5:30 AM - 5:45 AM				
26	5:45 AM - 6:00 AM				
27	6:00 AM - 6:15 AM				
28	6:15 AM - 6:30 AM				
29	6:30 AM - 6:45 AM				

Line	Day 1
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
30	6:45 AM - 7:00 AM				
31	7:00 AM - 7:15 AM				
32	7:15 AM - 7:30 AM				
33	7:30 AM - 7:45 AM				
34	7:45 AM - 8:00 AM				
35	8:00 AM - 8:15 AM				
36	8:15 AM - 8:30 AM				
37	8:30 AM - 8:45 AM				
38	8:45 AM - 9:00 AM				
39	9:00 AM - 9:15 AM				
40	9:15 AM - 9:30 AM				
41	9:30 AM - 9:45 AM				
42	9:45 AM - 10:00 AM				
43	10:00 AM - 10:15 AM				
44	10:15 AM - 10:30 AM				
45	10:30 AM - 10:45 AM				
46	10:45 AM - 11:00 AM				
47	11:00 AM - 11:15 AM				
48	11:15 AM - 11:30 AM				
49	11:30 AM - 11:45 AM				
50	11:45 AM - 12:00 PM				
51	12:00 PM - 12:15 PM				
52	12:15 PM - 12:30 PM				
53	12:30 PM - 12:45 PM				
54	12:45 PM - 1:00 PM				
55	1:00 PM - 1:15 PM				
56	1:15 PM - 1:30 PM				

Line	Day 1
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
57	1:30 PM - 1:45 PM				
58	1:45 PM - 2:00 PM				
59	2:00 PM - 2:15 PM				
60	2:15 PM - 2:30 PM				
61	2:30 PM - 2:45 PM				
62	2:45 PM - 3:00 PM				
63	3:00 PM - 3:15 PM				
64	3:15 PM - 3:30 PM				
65	3:30 PM - 3:45 PM				
66	3:45 PM - 4:00 PM				
67	4:00 PM - 4:15 PM				
68	4:15 PM - 4:30 PM				
69	4:30 PM - 4:45 PM				
70	4:45 PM - 5:00 PM				
71	5:00 PM - 5:15 PM				
72	5:15 PM - 5:30 PM				
73	5:30 PM - 5:45 PM				
74	5:45 PM - 6:00 PM				
75	6:00 PM - 6:15 PM				
76	6:15 PM - 6:30 PM				
77	6:30 PM - 6:45 PM				
78	6:45 PM - 7:00 PM				
79	7:00 PM - 7:15 PM				
80	7:15 PM - 7:30 PM				
81	7:30 PM - 7:45 PM				
82	7:45 PM - 8:00 PM				
83	8:00 PM - 8:15 PM				

Line	Day 1
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
84	8:15 PM - 8:30 PM				
85	8:30 PM - 8:45 PM				
86	8:45 PM - 9:00 PM				
87	9:00 PM - 9:15 PM				
88	9:15 PM - 9:30 PM				
89	9:30 PM - 9:45 PM				
90	9:45 PM - 10:00 PM				
91	10:00 PM - 10:15 PM				
92	10:15 PM - 10:30 PM				
93	10:30 PM - 10:45 PM				
94	10:45 PM - 11:00 PM				
95	11:00 PM - 11:15 PM				
96	11:15 PM - 11:30 PM				
97	11:30 PM - 11:45 PM				
98	11:45 PM - 12:00 AM				

Line	Day 2		
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
3	12:00 AM - 12:15 AM			
4	12:15 AM - 12:30 AM			
5	12:30 AM - 12:45 AM			
6	12:45 AM - 1:00 AM			
7	1:00 AM - 1:15 AM			
8	1:15 AM - 1:30 AM			
9	1:30 AM - 1:45 AM			
10	1:45 AM - 2:00 AM			
11	2:00 AM - 2:15 AM			
12	2:15 AM - 2:30 AM			
13	2:30 AM - 2:45 AM			
14	2:45 AM - 3:00 AM			
15	3:00 AM - 3:15 AM			
16	3:15 AM - 3:30 AM			
17	3:30 AM - 3:45 AM			
18	3:45 AM - 4:00 AM			
19	4:00 AM - 4:15 AM			
20	4:15 AM - 4:30 AM			
21	4:30 AM - 4:45 AM			
22	4:45 AM - 5:00 AM			
23	5:00 AM - 5:15 AM			
24	5:15 AM - 5:30 AM			
25	5:30 AM - 5:45 AM			
26	5:45 AM - 6:00 AM			
27	6:00 AM - 6:15 AM			
28	6:15 AM - 6:30 AM			
29	6:30 AM - 6:45 AM			

Line	Day 2
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
30	6:45 AM - 7:00 AM				
31	7:00 AM - 7:15 AM				
32	7:15 AM - 7:30 AM				
33	7:30 AM - 7:45 AM				
34	7:45 AM - 8:00 AM				
35	8:00 AM - 8:15 AM				
36	8:15 AM - 8:30 AM				
37	8:30 AM - 8:45 AM				
38	8:45 AM - 9:00 AM				
39	9:00 AM - 9:15 AM				
40	9:15 AM - 9:30 AM				
41	9:30 AM - 9:45 AM				
42	9:45 AM - 10:00 AM				
43	10:00 AM - 10:15 AM				
44	10:15 AM - 10:30 AM				
45	10:30 AM - 10:45 AM				
46	10:45 AM - 11:00 AM				
47	11:00 AM - 11:15 AM				
48	11:15 AM - 11:30 AM				
49	11:30 AM - 11:45 AM				
50	11:45 AM - 12:00 PM				
51	12:00 PM - 12:15 PM				
52	12:15 PM - 12:30 PM				
53	12:30 PM - 12:45 PM				
54	12:45 PM - 1:00 PM				
55	1:00 PM - 1:15 PM				
56	1:15 PM - 1:30 PM				

Line	Day 2
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
57	1:30 PM - 1:45 PM				
58	1:45 PM - 2:00 PM				
59	2:00 PM - 2:15 PM				
60	2:15 PM - 2:30 PM				
61	2:30 PM - 2:45 PM				
62	2:45 PM - 3:00 PM				
63	3:00 PM - 3:15 PM				
64	3:15 PM - 3:30 PM				
65	3:30 PM - 3:45 PM				
66	3:45 PM - 4:00 PM				
67	4:00 PM - 4:15 PM				
68	4:15 PM - 4:30 PM				
69	4:30 PM - 4:45 PM				
70	4:45 PM - 5:00 PM				
71	5:00 PM - 5:15 PM				
72	5:15 PM - 5:30 PM				
73	5:30 PM - 5:45 PM				
74	5:45 PM - 6:00 PM				
75	6:00 PM - 6:15 PM				
76	6:15 PM - 6:30 PM				
77	6:30 PM - 6:45 PM				
78	6:45 PM - 7:00 PM				
79	7:00 PM - 7:15 PM				
80	7:15 PM - 7:30 PM				
81	7:30 PM - 7:45 PM				
82	7:45 PM - 8:00 PM				
83	8:00 PM - 8:15 PM				

Line	Day 2
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
84	8:15 PM - 8:30 PM				
85	8:30 PM - 8:45 PM				
86	8:45 PM - 9:00 PM				
87	9:00 PM - 9:15 PM				
88	9:15 PM - 9:30 PM				
89	9:30 PM - 9:45 PM				
90	9:45 PM - 10:00 PM				
91	10:00 PM - 10:15 PM				
92	10:15 PM - 10:30 PM				
93	10:30 PM - 10:45 PM				
94	10:45 PM - 11:00 PM				
95	11:00 PM - 11:15 PM				
96	11:15 PM - 11:30 PM				
97	11:30 PM - 11:45 PM				
98	11:45 PM - 12:00 AM				

Line	Day 3
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
3	12:00 AM - 12:15 AM				
4	12:15 AM - 12:30 AM				
5	12:30 AM - 12:45 AM				
6	12:45 AM - 1:00 AM				
7	1:00 AM - 1:15 AM				
8	1:15 AM - 1:30 AM				
9	1:30 AM - 1:45 AM				
10	1:45 AM - 2:00 AM				
11	2:00 AM - 2:15 AM				
12	2:15 AM - 2:30 AM				
13	2:30 AM - 2:45 AM				
14	2:45 AM - 3:00 AM				
15	3:00 AM - 3:15 AM				
16	3:15 AM - 3:30 AM				
17	3:30 AM - 3:45 AM				
18	3:45 AM - 4:00 AM				
19	4:00 AM - 4:15 AM				
20	4:15 AM - 4:30 AM				
21	4:30 AM - 4:45 AM				
22	4:45 AM - 5:00 AM				
23	5:00 AM - 5:15 AM				
24	5:15 AM - 5:30 AM				
25	5:30 AM - 5:45 AM				
26	5:45 AM - 6:00 AM				
27	6:00 AM - 6:15 AM				
28	6:15 AM - 6:30 AM				
29	6:30 AM - 6:45 AM				

Line	Day 3
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
30	6:45 AM - 7:00 AM				
31	7:00 AM - 7:15 AM				
32	7:15 AM - 7:30 AM				
33	7:30 AM - 7:45 AM				
34	7:45 AM - 8:00 AM				
35	8:00 AM - 8:15 AM				
36	8:15 AM - 8:30 AM				
37	8:30 AM - 8:45 AM				
38	8:45 AM - 9:00 AM				
39	9:00 AM - 9:15 AM				
40	9:15 AM - 9:30 AM				
41	9:30 AM - 9:45 AM				
42	9:45 AM - 10:00 AM				
43	10:00 AM - 10:15 AM				
44	10:15 AM - 10:30 AM				
45	10:30 AM - 10:45 AM				
46	10:45 AM - 11:00 AM				
47	11:00 AM - 11:15 AM				
48	11:15 AM - 11:30 AM				
49	11:30 AM - 11:45 AM				
50	11:45 AM - 12:00 PM				
51	12:00 PM - 12:15 PM				
52	12:15 PM - 12:30 PM				
53	12:30 PM - 12:45 PM				
54	12:45 PM - 1:00 PM				
55	1:00 PM - 1:15 PM				
56	1:15 PM - 1:30 PM				

Line	Day 3
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
57	1:30 PM - 1:45 PM				
58	1:45 PM - 2:00 PM				
59	2:00 PM - 2:15 PM				
60	2:15 PM - 2:30 PM				
61	2:30 PM - 2:45 PM				
62	2:45 PM - 3:00 PM				
63	3:00 PM - 3:15 PM				
64	3:15 PM - 3:30 PM				
65	3:30 PM - 3:45 PM				
66	3:45 PM - 4:00 PM				
67	4:00 PM - 4:15 PM				
68	4:15 PM - 4:30 PM				
69	4:30 PM - 4:45 PM				
70	4:45 PM - 5:00 PM				
71	5:00 PM - 5:15 PM				
72	5:15 PM - 5:30 PM				
73	5:30 PM - 5:45 PM				
74	5:45 PM - 6:00 PM				
75	6:00 PM - 6:15 PM				
76	6:15 PM - 6:30 PM				
77	6:30 PM - 6:45 PM				
78	6:45 PM - 7:00 PM				
79	7:00 PM - 7:15 PM				
80	7:15 PM - 7:30 PM				
81	7:30 PM - 7:45 PM				
82	7:45 PM - 8:00 PM				
83	8:00 PM - 8:15 PM				

Line	Day 3
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
84	8:15 PM - 8:30 PM				
85	8:30 PM - 8:45 PM				
86	8:45 PM - 9:00 PM				
87	9:00 PM - 9:15 PM				
88	9:15 PM - 9:30 PM				
89	9:30 PM - 9:45 PM				
90	9:45 PM - 10:00 PM				
91	10:00 PM - 10:15 PM				
92	10:15 PM - 10:30 PM				
93	10:30 PM - 10:45 PM				
94	10:45 PM - 11:00 PM				
95	11:00 PM - 11:15 PM				
96	11:15 PM - 11:30 PM				
97	11:30 PM - 11:45 PM				
98	11:45 PM - 12:00 AM				

Line	Day 4
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
3	12:00 AM - 12:15 AM			
4	12:15 AM - 12:30 AM			
5	12:30 AM - 12:45 AM			
6	12:45 AM - 1:00 AM			
7	1:00 AM - 1:15 AM			
8	1:15 AM - 1:30 AM			
9	1:30 AM - 1:45 AM			
10	1:45 AM - 2:00 AM			
11	2:00 AM - 2:15 AM			
12	2:15 AM - 2:30 AM			
13	2:30 AM - 2:45 AM			
14	2:45 AM - 3:00 AM			
15	3:00 AM - 3:15 AM			
16	3:15 AM - 3:30 AM			
17	3:30 AM - 3:45 AM			
18	3:45 AM - 4:00 AM			
19	4:00 AM - 4:15 AM			
20	4:15 AM - 4:30 AM			
21	4:30 AM - 4:45 AM			
22	4:45 AM - 5:00 AM			
23	5:00 AM - 5:15 AM			
24	5:15 AM - 5:30 AM			
25	5:30 AM - 5:45 AM			
26	5:45 AM - 6:00 AM			
27	6:00 AM - 6:15 AM			
28	6:15 AM - 6:30 AM			
29	6:30 AM - 6:45 AM			

Line	Day 4
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
30	6:45 AM - 7:00 AM			
31	7:00 AM - 7:15 AM			
32	7:15 AM - 7:30 AM			
33	7:30 AM - 7:45 AM			
34	7:45 AM - 8:00 AM			
35	8:00 AM - 8:15 AM			
36	8:15 AM - 8:30 AM			
37	8:30 AM - 8:45 AM			
38	8:45 AM - 9:00 AM			
39	9:00 AM - 9:15 AM			
40	9:15 AM - 9:30 AM			
41	9:30 AM - 9:45 AM			
42	9:45 AM - 10:00 AM			
43	10:00 AM - 10:15 AM			
44	10:15 AM - 10:30 AM			
45	10:30 AM - 10:45 AM			
46	10:45 AM - 11:00 AM			
47	11:00 AM - 11:15 AM			
48	11:15 AM - 11:30 AM			
49	11:30 AM - 11:45 AM			
50	11:45 AM - 12:00 PM			
51	12:00 PM - 12:15 PM			
52	12:15 PM - 12:30 PM			
53	12:30 PM - 12:45 PM			
54	12:45 PM - 1:00 PM			
55	1:00 PM - 1:15 PM			
56	1:15 PM - 1:30 PM			

Line	Day 4
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
57	1:30 PM - 1:45 PM				
58	1:45 PM - 2:00 PM				
59	2:00 PM - 2:15 PM				
60	2:15 PM - 2:30 PM				
61	2:30 PM - 2:45 PM				
62	2:45 PM - 3:00 PM				
63	3:00 PM - 3:15 PM				
64	3:15 PM - 3:30 PM				
65	3:30 PM - 3:45 PM				
66	3:45 PM - 4:00 PM				
67	4:00 PM - 4:15 PM				
68	4:15 PM - 4:30 PM				
69	4:30 PM - 4:45 PM				
70	4:45 PM - 5:00 PM				
71	5:00 PM - 5:15 PM				
72	5:15 PM - 5:30 PM				
73	5:30 PM - 5:45 PM				
74	5:45 PM - 6:00 PM				
75	6:00 PM - 6:15 PM				
76	6:15 PM - 6:30 PM				
77	6:30 PM - 6:45 PM				
78	6:45 PM - 7:00 PM				
79	7:00 PM - 7:15 PM				
80	7:15 PM - 7:30 PM				
81	7:30 PM - 7:45 PM				
82	7:45 PM - 8:00 PM				
83	8:00 PM - 8:15 PM				

Line	Day 4
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
84	8:15 PM - 8:30 PM				
85	8:30 PM - 8:45 PM				
86	8:45 PM - 9:00 PM				
87	9:00 PM - 9:15 PM				
88	9:15 PM - 9:30 PM				
89	9:30 PM - 9:45 PM				
90	9:45 PM - 10:00 PM				
91	10:00 PM - 10:15 PM				
92	10:15 PM - 10:30 PM				
93	10:30 PM - 10:45 PM				
94	10:45 PM - 11:00 PM				
95	11:00 PM - 11:15 PM				
96	11:15 PM - 11:30 PM				
97	11:30 PM - 11:45 PM				
98	11:45 PM - 12:00 AM				

Line	Day 5
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
3	12:00 AM - 12:15 AM			
4	12:15 AM - 12:30 AM			
5	12:30 AM - 12:45 AM			
6	12:45 AM - 1:00 AM			
7	1:00 AM - 1:15 AM			
8	1:15 AM - 1:30 AM			
9	1:30 AM - 1:45 AM			
10	1:45 AM - 2:00 AM			
11	2:00 AM - 2:15 AM			
12	2:15 AM - 2:30 AM			
13	2:30 AM - 2:45 AM			
14	2:45 AM - 3:00 AM			
15	3:00 AM - 3:15 AM			
16	3:15 AM - 3:30 AM			
17	3:30 AM - 3:45 AM			
18	3:45 AM - 4:00 AM			
19	4:00 AM - 4:15 AM			
20	4:15 AM - 4:30 AM			
21	4:30 AM - 4:45 AM			
22	4:45 AM - 5:00 AM			
23	5:00 AM - 5:15 AM			
24	5:15 AM - 5:30 AM			
25	5:30 AM - 5:45 AM			
26	5:45 AM - 6:00 AM			
27	6:00 AM - 6:15 AM			
28	6:15 AM - 6:30 AM			
29	6:30 AM - 6:45 AM			

Line	Day 5
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
30	6:45 AM - 7:00 AM				
31	7:00 AM - 7:15 AM				
32	7:15 AM - 7:30 AM				
33	7:30 AM - 7:45 AM				
34	7:45 AM - 8:00 AM				
35	8:00 AM - 8:15 AM				
36	8:15 AM - 8:30 AM				
37	8:30 AM - 8:45 AM				
38	8:45 AM - 9:00 AM				
39	9:00 AM - 9:15 AM				
40	9:15 AM - 9:30 AM				
41	9:30 AM - 9:45 AM				
42	9:45 AM - 10:00 AM				
43	10:00 AM - 10:15 AM				
44	10:15 AM - 10:30 AM				
45	10:30 AM - 10:45 AM				
46	10:45 AM - 11:00 AM				
47	11:00 AM - 11:15 AM				
48	11:15 AM - 11:30 AM				
49	11:30 AM - 11:45 AM				
50	11:45 AM - 12:00 PM				
51	12:00 PM - 12:15 PM				
52	12:15 PM - 12:30 PM				
53	12:30 PM - 12:45 PM				
54	12:45 PM - 1:00 PM				
55	1:00 PM - 1:15 PM				
56	1:15 PM - 1:30 PM				

Line	Day 5
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
57	1:30 PM - 1:45 PM				
58	1:45 PM - 2:00 PM				
59	2:00 PM - 2:15 PM				
60	2:15 PM - 2:30 PM				
61	2:30 PM - 2:45 PM				
62	2:45 PM - 3:00 PM				
63	3:00 PM - 3:15 PM				
64	3:15 PM - 3:30 PM				
65	3:30 PM - 3:45 PM				
66	3:45 PM - 4:00 PM				
67	4:00 PM - 4:15 PM				
68	4:15 PM - 4:30 PM				
69	4:30 PM - 4:45 PM				
70	4:45 PM - 5:00 PM				
71	5:00 PM - 5:15 PM				
72	5:15 PM - 5:30 PM				
73	5:30 PM - 5:45 PM				
74	5:45 PM - 6:00 PM				
75	6:00 PM - 6:15 PM				
76	6:15 PM - 6:30 PM				
77	6:30 PM - 6:45 PM				
78	6:45 PM - 7:00 PM				
79	7:00 PM - 7:15 PM				
80	7:15 PM - 7:30 PM				
81	7:30 PM - 7:45 PM				
82	7:45 PM - 8:00 PM				
83	8:00 PM - 8:15 PM				

Line	Day 5
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
84	8:15 PM - 8:30 PM				
85	8:30 PM - 8:45 PM				
86	8:45 PM - 9:00 PM				
87	9:00 PM - 9:15 PM				
88	9:15 PM - 9:30 PM				
89	9:30 PM - 9:45 PM				
90	9:45 PM - 10:00 PM				
91	10:00 PM - 10:15 PM				
92	10:15 PM - 10:30 PM				
93	10:30 PM - 10:45 PM				
94	10:45 PM - 11:00 PM				
95	11:00 PM - 11:15 PM				
96	11:15 PM - 11:30 PM				
97	11:30 PM - 11:45 PM				
98	11:45 PM - 12:00 AM				

Line	Day 6
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
3	12:00 AM - 12:15 AM			
4	12:15 AM - 12:30 AM			
5	12:30 AM - 12:45 AM			
6	12:45 AM - 1:00 AM			
7	1:00 AM - 1:15 AM			
8	1:15 AM - 1:30 AM			
9	1:30 AM - 1:45 AM			
10	1:45 AM - 2:00 AM			
11	2:00 AM - 2:15 AM			
12	2:15 AM - 2:30 AM			
13	2:30 AM - 2:45 AM			
14	2:45 AM - 3:00 AM			
15	3:00 AM - 3:15 AM			
16	3:15 AM - 3:30 AM			
17	3:30 AM - 3:45 AM			
18	3:45 AM - 4:00 AM			
19	4:00 AM - 4:15 AM			
20	4:15 AM - 4:30 AM			
21	4:30 AM - 4:45 AM			
22	4:45 AM - 5:00 AM			
23	5:00 AM - 5:15 AM			
24	5:15 AM - 5:30 AM			
25	5:30 AM - 5:45 AM			
26	5:45 AM - 6:00 AM			
27	6:00 AM - 6:15 AM			
28	6:15 AM - 6:30 AM			
29	6:30 AM - 6:45 AM			

Line	Day 6
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
30	6:45 AM - 7:00 AM			
31	7:00 AM - 7:15 AM			
32	7:15 AM - 7:30 AM			
33	7:30 AM - 7:45 AM			
34	7:45 AM - 8:00 AM			
35	8:00 AM - 8:15 AM			
36	8:15 AM - 8:30 AM			
37	8:30 AM - 8:45 AM			
38	8:45 AM - 9:00 AM			
39	9:00 AM - 9:15 AM			
40	9:15 AM - 9:30 AM			
41	9:30 AM - 9:45 AM			
42	9:45 AM - 10:00 AM			
43	10:00 AM - 10:15 AM			
44	10:15 AM - 10:30 AM			
45	10:30 AM - 10:45 AM			
46	10:45 AM - 11:00 AM			
47	11:00 AM - 11:15 AM			
48	11:15 AM - 11:30 AM			
49	11:30 AM - 11:45 AM			
50	11:45 AM - 12:00 PM			
51	12:00 PM - 12:15 PM			
52	12:15 PM - 12:30 PM			
53	12:30 PM - 12:45 PM			
54	12:45 PM - 1:00 PM			
55	1:00 PM - 1:15 PM			
56	1:15 PM - 1:30 PM			

Line	Day 6
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
57	1:30 PM - 1:45 PM				
58	1:45 PM - 2:00 PM				
59	2:00 PM - 2:15 PM				
60	2:15 PM - 2:30 PM				
61	2:30 PM - 2:45 PM				
62	2:45 PM - 3:00 PM				
63	3:00 PM - 3:15 PM				
64	3:15 PM - 3:30 PM				
65	3:30 PM - 3:45 PM				
66	3:45 PM - 4:00 PM				
67	4:00 PM - 4:15 PM				
68	4:15 PM - 4:30 PM				
69	4:30 PM - 4:45 PM				
70	4:45 PM - 5:00 PM				
71	5:00 PM - 5:15 PM				
72	5:15 PM - 5:30 PM				
73	5:30 PM - 5:45 PM				
74	5:45 PM - 6:00 PM				
75	6:00 PM - 6:15 PM				
76	6:15 PM - 6:30 PM				
77	6:30 PM - 6:45 PM				
78	6:45 PM - 7:00 PM				
79	7:00 PM - 7:15 PM				
80	7:15 PM - 7:30 PM				
81	7:30 PM - 7:45 PM				
82	7:45 PM - 8:00 PM				
83	8:00 PM - 8:15 PM				

Line	Day 6
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
84	8:15 PM - 8:30 PM				
85	8:30 PM - 8:45 PM				
86	8:45 PM - 9:00 PM				
87	9:00 PM - 9:15 PM				
88	9:15 PM - 9:30 PM				
89	9:30 PM - 9:45 PM				
90	9:45 PM - 10:00 PM				
91	10:00 PM - 10:15 PM				
92	10:15 PM - 10:30 PM				
93	10:30 PM - 10:45 PM				
94	10:45 PM - 11:00 PM				
95	11:00 PM - 11:15 PM				
96	11:15 PM - 11:30 PM				
97	11:30 PM - 11:45 PM				
98	11:45 PM - 12:00 AM				

Line	Day 7
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
3	12:00 AM - 12:15 AM				
4	12:15 AM - 12:30 AM				
5	12:30 AM - 12:45 AM				
6	12:45 AM - 1:00 AM				
7	1:00 AM - 1:15 AM				
8	1:15 AM - 1:30 AM				
9	1:30 AM - 1:45 AM				
10	1:45 AM - 2:00 AM				
11	2:00 AM - 2:15 AM				
12	2:15 AM - 2:30 AM				
13	2:30 AM - 2:45 AM				
14	2:45 AM - 3:00 AM				
15	3:00 AM - 3:15 AM				
16	3:15 AM - 3:30 AM				
17	3:30 AM - 3:45 AM				
18	3:45 AM - 4:00 AM				
19	4:00 AM - 4:15 AM				
20	4:15 AM - 4:30 AM				
21	4:30 AM - 4:45 AM				
22	4:45 AM - 5:00 AM				
23	5:00 AM - 5:15 AM				
24	5:15 AM - 5:30 AM				
25	5:30 AM - 5:45 AM				
26	5:45 AM - 6:00 AM				
27	6:00 AM - 6:15 AM				
28	6:15 AM - 6:30 AM				
29	6:30 AM - 6:45 AM				

Line	Day 7
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
30	6:45 AM - 7:00 AM			
31	7:00 AM - 7:15 AM			
32	7:15 AM - 7:30 AM			
33	7:30 AM - 7:45 AM			
34	7:45 AM - 8:00 AM			
35	8:00 AM - 8:15 AM			
36	8:15 AM - 8:30 AM			
37	8:30 AM - 8:45 AM			
38	8:45 AM - 9:00 AM			
39	9:00 AM - 9:15 AM			
40	9:15 AM - 9:30 AM			
41	9:30 AM - 9:45 AM			
42	9:45 AM - 10:00 AM			
43	10:00 AM - 10:15 AM			
44	10:15 AM - 10:30 AM			
45	10:30 AM - 10:45 AM			
46	10:45 AM - 11:00 AM			
47	11:00 AM - 11:15 AM			
48	11:15 AM - 11:30 AM			
49	11:30 AM - 11:45 AM			
50	11:45 AM - 12:00 PM			
51	12:00 PM - 12:15 PM			
52	12:15 PM - 12:30 PM			
53	12:30 PM - 12:45 PM			
54	12:45 PM - 1:00 PM			
55	1:00 PM - 1:15 PM			
56	1:15 PM - 1:30 PM			

Line	Day 7
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
57	1:30 PM - 1:45 PM				
58	1:45 PM - 2:00 PM				
59	2:00 PM - 2:15 PM				
60	2:15 PM - 2:30 PM				
61	2:30 PM - 2:45 PM				
62	2:45 PM - 3:00 PM				
63	3:00 PM - 3:15 PM				
64	3:15 PM - 3:30 PM				
65	3:30 PM - 3:45 PM				
66	3:45 PM - 4:00 PM				
67	4:00 PM - 4:15 PM				
68	4:15 PM - 4:30 PM				
69	4:30 PM - 4:45 PM				
70	4:45 PM - 5:00 PM				
71	5:00 PM - 5:15 PM				
72	5:15 PM - 5:30 PM				
73	5:30 PM - 5:45 PM				
74	5:45 PM - 6:00 PM				
75	6:00 PM - 6:15 PM				
76	6:15 PM - 6:30 PM				
77	6:30 PM - 6:45 PM				
78	6:45 PM - 7:00 PM				
79	7:00 PM - 7:15 PM				
80	7:15 PM - 7:30 PM				
81	7:30 PM - 7:45 PM				
82	7:45 PM - 8:00 PM				
83	8:00 PM - 8:15 PM				

Line	Day 7
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
84	8:15 PM - 8:30 PM				
85	8:30 PM - 8:45 PM				
86	8:45 PM - 9:00 PM				
87	9:00 PM - 9:15 PM				
88	9:15 PM - 9:30 PM				
89	9:30 PM - 9:45 PM				
90	9:45 PM - 10:00 PM				
91	10:00 PM - 10:15 PM				
92	10:15 PM - 10:30 PM				
93	10:30 PM - 10:45 PM				
94	10:45 PM - 11:00 PM				
95	11:00 PM - 11:15 PM				
96	11:15 PM - 11:30 PM				
97	11:30 PM - 11:45 PM				
98	11:45 PM - 12:00 AM				

Line	Day 8
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
3	12:00 AM - 12:15 AM			
4	12:15 AM - 12:30 AM			
5	12:30 AM - 12:45 AM			
6	12:45 AM - 1:00 AM			
7	1:00 AM - 1:15 AM			
8	1:15 AM - 1:30 AM			
9	1:30 AM - 1:45 AM			
10	1:45 AM - 2:00 AM			
11	2:00 AM - 2:15 AM			
12	2:15 AM - 2:30 AM			
13	2:30 AM - 2:45 AM			
14	2:45 AM - 3:00 AM			
15	3:00 AM - 3:15 AM			
16	3:15 AM - 3:30 AM			
17	3:30 AM - 3:45 AM			
18	3:45 AM - 4:00 AM			
19	4:00 AM - 4:15 AM			
20	4:15 AM - 4:30 AM			
21	4:30 AM - 4:45 AM			
22	4:45 AM - 5:00 AM			
23	5:00 AM - 5:15 AM			
24	5:15 AM - 5:30 AM			
25	5:30 AM - 5:45 AM			
26	5:45 AM - 6:00 AM			
27	6:00 AM - 6:15 AM			
28	6:15 AM - 6:30 AM			
29	6:30 AM - 6:45 AM			

Line	Day 8
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
30	6:45 AM - 7:00 AM			
31	7:00 AM - 7:15 AM			
32	7:15 AM - 7:30 AM			
33	7:30 AM - 7:45 AM			
34	7:45 AM - 8:00 AM			
35	8:00 AM - 8:15 AM			
36	8:15 AM - 8:30 AM			
37	8:30 AM - 8:45 AM			
38	8:45 AM - 9:00 AM			
39	9:00 AM - 9:15 AM			
40	9:15 AM - 9:30 AM			
41	9:30 AM - 9:45 AM			
42	9:45 AM - 10:00 AM			
43	10:00 AM - 10:15 AM			
44	10:15 AM - 10:30 AM			
45	10:30 AM - 10:45 AM			
46	10:45 AM - 11:00 AM			
47	11:00 AM - 11:15 AM			
48	11:15 AM - 11:30 AM			
49	11:30 AM - 11:45 AM			
50	11:45 AM - 12:00 PM			
51	12:00 PM - 12:15 PM			
52	12:15 PM - 12:30 PM			
53	12:30 PM - 12:45 PM			
54	12:45 PM - 1:00 PM			
55	1:00 PM - 1:15 PM			
56	1:15 PM - 1:30 PM			

Line	Day 8
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
57	1:30 PM - 1:45 PM				
58	1:45 PM - 2:00 PM				
59	2:00 PM - 2:15 PM				
60	2:15 PM - 2:30 PM				
61	2:30 PM - 2:45 PM				
62	2:45 PM - 3:00 PM				
63	3:00 PM - 3:15 PM				
64	3:15 PM - 3:30 PM				
65	3:30 PM - 3:45 PM				
66	3:45 PM - 4:00 PM				
67	4:00 PM - 4:15 PM				
68	4:15 PM - 4:30 PM				
69	4:30 PM - 4:45 PM				
70	4:45 PM - 5:00 PM				
71	5:00 PM - 5:15 PM				
72	5:15 PM - 5:30 PM				
73	5:30 PM - 5:45 PM				
74	5:45 PM - 6:00 PM				
75	6:00 PM - 6:15 PM				
76	6:15 PM - 6:30 PM				
77	6:30 PM - 6:45 PM				
78	6:45 PM - 7:00 PM				
79	7:00 PM - 7:15 PM				
80	7:15 PM - 7:30 PM				
81	7:30 PM - 7:45 PM				
82	7:45 PM - 8:00 PM				
83	8:00 PM - 8:15 PM				

Line	Day 8
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
84	8:15 PM - 8:30 PM				
85	8:30 PM - 8:45 PM				
86	8:45 PM - 9:00 PM				
87	9:00 PM - 9:15 PM				
88	9:15 PM - 9:30 PM				
89	9:30 PM - 9:45 PM				
90	9:45 PM - 10:00 PM				
91	10:00 PM - 10:15 PM				
92	10:15 PM - 10:30 PM				
93	10:30 PM - 10:45 PM				
94	10:45 PM - 11:00 PM				
95	11:00 PM - 11:15 PM				
96	11:15 PM - 11:30 PM				
97	11:30 PM - 11:45 PM				
98	11:45 PM - 12:00 AM				

Line	Day 9		
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
3	12:00 AM - 12:15 AM			
4	12:15 AM - 12:30 AM			
5	12:30 AM - 12:45 AM			
6	12:45 AM - 1:00 AM			
7	1:00 AM - 1:15 AM			
8	1:15 AM - 1:30 AM			
9	1:30 AM - 1:45 AM			
10	1:45 AM - 2:00 AM			
11	2:00 AM - 2:15 AM			
12	2:15 AM - 2:30 AM			
13	2:30 AM - 2:45 AM			
14	2:45 AM - 3:00 AM			
15	3:00 AM - 3:15 AM			
16	3:15 AM - 3:30 AM			
17	3:30 AM - 3:45 AM			
18	3:45 AM - 4:00 AM			
19	4:00 AM - 4:15 AM			
20	4:15 AM - 4:30 AM			
21	4:30 AM - 4:45 AM			
22	4:45 AM - 5:00 AM			
23	5:00 AM - 5:15 AM			
24	5:15 AM - 5:30 AM			
25	5:30 AM - 5:45 AM			
26	5:45 AM - 6:00 AM			
27	6:00 AM - 6:15 AM			
28	6:15 AM - 6:30 AM			
29	6:30 AM - 6:45 AM			

Line	Day 9
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
30	6:45 AM - 7:00 AM				
31	7:00 AM - 7:15 AM				
32	7:15 AM - 7:30 AM				
33	7:30 AM - 7:45 AM				
34	7:45 AM - 8:00 AM				
35	8:00 AM - 8:15 AM				
36	8:15 AM - 8:30 AM				
37	8:30 AM - 8:45 AM				
38	8:45 AM - 9:00 AM				
39	9:00 AM - 9:15 AM				
40	9:15 AM - 9:30 AM				
41	9:30 AM - 9:45 AM				
42	9:45 AM - 10:00 AM				
43	10:00 AM - 10:15 AM				
44	10:15 AM - 10:30 AM				
45	10:30 AM - 10:45 AM				
46	10:45 AM - 11:00 AM				
47	11:00 AM - 11:15 AM				
48	11:15 AM - 11:30 AM				
49	11:30 AM - 11:45 AM				
50	11:45 AM - 12:00 PM				
51	12:00 PM - 12:15 PM				
52	12:15 PM - 12:30 PM				
53	12:30 PM - 12:45 PM				
54	12:45 PM - 1:00 PM				
55	1:00 PM - 1:15 PM				
56	1:15 PM - 1:30 PM				

Line	Day 9
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
57	1:30 PM - 1:45 PM				
58	1:45 PM - 2:00 PM				
59	2:00 PM - 2:15 PM				
60	2:15 PM - 2:30 PM				
61	2:30 PM - 2:45 PM				
62	2:45 PM - 3:00 PM				
63	3:00 PM - 3:15 PM				
64	3:15 PM - 3:30 PM				
65	3:30 PM - 3:45 PM				
66	3:45 PM - 4:00 PM				
67	4:00 PM - 4:15 PM				
68	4:15 PM - 4:30 PM				
69	4:30 PM - 4:45 PM				
70	4:45 PM - 5:00 PM				
71	5:00 PM - 5:15 PM				
72	5:15 PM - 5:30 PM				
73	5:30 PM - 5:45 PM				
74	5:45 PM - 6:00 PM				
75	6:00 PM - 6:15 PM				
76	6:15 PM - 6:30 PM				
77	6:30 PM - 6:45 PM				
78	6:45 PM - 7:00 PM				
79	7:00 PM - 7:15 PM				
80	7:15 PM - 7:30 PM				
81	7:30 PM - 7:45 PM				
82	7:45 PM - 8:00 PM				
83	8:00 PM - 8:15 PM				

Line	Day 9
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
84	8:15 PM - 8:30 PM				
85	8:30 PM - 8:45 PM				
86	8:45 PM - 9:00 PM				
87	9:00 PM - 9:15 PM				
88	9:15 PM - 9:30 PM				
89	9:30 PM - 9:45 PM				
90	9:45 PM - 10:00 PM				
91	10:00 PM - 10:15 PM				
92	10:15 PM - 10:30 PM				
93	10:30 PM - 10:45 PM				
94	10:45 PM - 11:00 PM				
95	11:00 PM - 11:15 PM				
96	11:15 PM - 11:30 PM				
97	11:30 PM - 11:45 PM				
98	11:45 PM - 12:00 AM				

Line	Day 10		
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
3	12:00 AM - 12:15 AM			
4	12:15 AM - 12:30 AM			
5	12:30 AM - 12:45 AM			
6	12:45 AM - 1:00 AM			
7	1:00 AM - 1:15 AM			
8	1:15 AM - 1:30 AM			
9	1:30 AM - 1:45 AM			
10	1:45 AM - 2:00 AM			
11	2:00 AM - 2:15 AM			
12	2:15 AM - 2:30 AM			
13	2:30 AM - 2:45 AM			
14	2:45 AM - 3:00 AM			
15	3:00 AM - 3:15 AM			
16	3:15 AM - 3:30 AM			
17	3:30 AM - 3:45 AM			
18	3:45 AM - 4:00 AM			
19	4:00 AM - 4:15 AM			
20	4:15 AM - 4:30 AM			
21	4:30 AM - 4:45 AM			
22	4:45 AM - 5:00 AM			
23	5:00 AM - 5:15 AM			
24	5:15 AM - 5:30 AM			
25	5:30 AM - 5:45 AM			
26	5:45 AM - 6:00 AM			
27	6:00 AM - 6:15 AM			
28	6:15 AM - 6:30 AM			
29	6:30 AM - 6:45 AM			

Line	Day 10
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
30	6:45 AM - 7:00 AM				
31	7:00 AM - 7:15 AM				
32	7:15 AM - 7:30 AM				
33	7:30 AM - 7:45 AM				
34	7:45 AM - 8:00 AM				
35	8:00 AM - 8:15 AM				
36	8:15 AM - 8:30 AM				
37	8:30 AM - 8:45 AM				
38	8:45 AM - 9:00 AM				
39	9:00 AM - 9:15 AM				
40	9:15 AM - 9:30 AM				
41	9:30 AM - 9:45 AM				
42	9:45 AM - 10:00 AM				
43	10:00 AM - 10:15 AM				
44	10:15 AM - 10:30 AM				
45	10:30 AM - 10:45 AM				
46	10:45 AM - 11:00 AM				
47	11:00 AM - 11:15 AM				
48	11:15 AM - 11:30 AM				
49	11:30 AM - 11:45 AM				
50	11:45 AM - 12:00 PM				
51	12:00 PM - 12:15 PM				
52	12:15 PM - 12:30 PM				
53	12:30 PM - 12:45 PM				
54	12:45 PM - 1:00 PM				
55	1:00 PM - 1:15 PM				
56	1:15 PM - 1:30 PM				

Line	Day 10
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
57	1:30 PM - 1:45 PM				
58	1:45 PM - 2:00 PM				
59	2:00 PM - 2:15 PM				
60	2:15 PM - 2:30 PM				
61	2:30 PM - 2:45 PM				
62	2:45 PM - 3:00 PM				
63	3:00 PM - 3:15 PM				
64	3:15 PM - 3:30 PM				
65	3:30 PM - 3:45 PM				
66	3:45 PM - 4:00 PM				
67	4:00 PM - 4:15 PM				
68	4:15 PM - 4:30 PM				
69	4:30 PM - 4:45 PM				
70	4:45 PM - 5:00 PM				
71	5:00 PM - 5:15 PM				
72	5:15 PM - 5:30 PM				
73	5:30 PM - 5:45 PM				
74	5:45 PM - 6:00 PM				
75	6:00 PM - 6:15 PM				
76	6:15 PM - 6:30 PM				
77	6:30 PM - 6:45 PM				
78	6:45 PM - 7:00 PM				
79	7:00 PM - 7:15 PM				
80	7:15 PM - 7:30 PM				
81	7:30 PM - 7:45 PM				
82	7:45 PM - 8:00 PM				
83	8:00 PM - 8:15 PM				

Line	Day 10
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
84	8:15 PM - 8:30 PM				
85	8:30 PM - 8:45 PM				
86	8:45 PM - 9:00 PM				
87	9:00 PM - 9:15 PM				
88	9:15 PM - 9:30 PM				
89	9:30 PM - 9:45 PM				
90	9:45 PM - 10:00 PM				
91	10:00 PM - 10:15 PM				
92	10:15 PM - 10:30 PM				
93	10:30 PM - 10:45 PM				
94	10:45 PM - 11:00 PM				
95	11:00 PM - 11:15 PM				
96	11:15 PM - 11:30 PM				
97	11:30 PM - 11:45 PM				
98	11:45 PM - 12:00 AM				

Line	Day 11
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
3	12:00 AM - 12:15 AM			
4	12:15 AM - 12:30 AM			
5	12:30 AM - 12:45 AM			
6	12:45 AM - 1:00 AM			
7	1:00 AM - 1:15 AM			
8	1:15 AM - 1:30 AM			
9	1:30 AM - 1:45 AM			
10	1:45 AM - 2:00 AM			
11	2:00 AM - 2:15 AM			
12	2:15 AM - 2:30 AM			
13	2:30 AM - 2:45 AM			
14	2:45 AM - 3:00 AM			
15	3:00 AM - 3:15 AM			
16	3:15 AM - 3:30 AM			
17	3:30 AM - 3:45 AM			
18	3:45 AM - 4:00 AM			
19	4:00 AM - 4:15 AM			
20	4:15 AM - 4:30 AM			
21	4:30 AM - 4:45 AM			
22	4:45 AM - 5:00 AM			
23	5:00 AM - 5:15 AM			
24	5:15 AM - 5:30 AM			
25	5:30 AM - 5:45 AM			
26	5:45 AM - 6:00 AM			
27	6:00 AM - 6:15 AM			
28	6:15 AM - 6:30 AM			
29	6:30 AM - 6:45 AM			

Line	Day 11
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
30	6:45 AM - 7:00 AM			
31	7:00 AM - 7:15 AM			
32	7:15 AM - 7:30 AM			
33	7:30 AM - 7:45 AM			
34	7:45 AM - 8:00 AM			
35	8:00 AM - 8:15 AM			
36	8:15 AM - 8:30 AM			
37	8:30 AM - 8:45 AM			
38	8:45 AM - 9:00 AM			
39	9:00 AM - 9:15 AM			
40	9:15 AM - 9:30 AM			
41	9:30 AM - 9:45 AM			
42	9:45 AM - 10:00 AM			
43	10:00 AM - 10:15 AM			
44	10:15 AM - 10:30 AM			
45	10:30 AM - 10:45 AM			
46	10:45 AM - 11:00 AM			
47	11:00 AM - 11:15 AM			
48	11:15 AM - 11:30 AM			
49	11:30 AM - 11:45 AM			
50	11:45 AM - 12:00 PM			
51	12:00 PM - 12:15 PM			
52	12:15 PM - 12:30 PM			
53	12:30 PM - 12:45 PM			
54	12:45 PM - 1:00 PM			
55	1:00 PM - 1:15 PM			
56	1:15 PM - 1:30 PM			

Line	Day 11
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
57	1:30 PM - 1:45 PM				
58	1:45 PM - 2:00 PM				
59	2:00 PM - 2:15 PM				
60	2:15 PM - 2:30 PM				
61	2:30 PM - 2:45 PM				
62	2:45 PM - 3:00 PM				
63	3:00 PM - 3:15 PM				
64	3:15 PM - 3:30 PM				
65	3:30 PM - 3:45 PM				
66	3:45 PM - 4:00 PM				
67	4:00 PM - 4:15 PM				
68	4:15 PM - 4:30 PM				
69	4:30 PM - 4:45 PM				
70	4:45 PM - 5:00 PM				
71	5:00 PM - 5:15 PM				
72	5:15 PM - 5:30 PM				
73	5:30 PM - 5:45 PM				
74	5:45 PM - 6:00 PM				
75	6:00 PM - 6:15 PM				
76	6:15 PM - 6:30 PM				
77	6:30 PM - 6:45 PM				
78	6:45 PM - 7:00 PM				
79	7:00 PM - 7:15 PM				
80	7:15 PM - 7:30 PM				
81	7:30 PM - 7:45 PM				
82	7:45 PM - 8:00 PM				
83	8:00 PM - 8:15 PM				

Line	Day 11
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
84	8:15 PM - 8:30 PM				
85	8:30 PM - 8:45 PM				
86	8:45 PM - 9:00 PM				
87	9:00 PM - 9:15 PM				
88	9:15 PM - 9:30 PM				
89	9:30 PM - 9:45 PM				
90	9:45 PM - 10:00 PM				
91	10:00 PM - 10:15 PM				
92	10:15 PM - 10:30 PM				
93	10:30 PM - 10:45 PM				
94	10:45 PM - 11:00 PM				
95	11:00 PM - 11:15 PM				
96	11:15 PM - 11:30 PM				
97	11:30 PM - 11:45 PM				
98	11:45 PM - 12:00 AM				

Line	Day 12
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
3	12:00 AM - 12:15 AM				
4	12:15 AM - 12:30 AM				
5	12:30 AM - 12:45 AM				
6	12:45 AM - 1:00 AM				
7	1:00 AM - 1:15 AM				
8	1:15 AM - 1:30 AM				
9	1:30 AM - 1:45 AM				
10	1:45 AM - 2:00 AM				
11	2:00 AM - 2:15 AM				
12	2:15 AM - 2:30 AM				
13	2:30 AM - 2:45 AM				
14	2:45 AM - 3:00 AM				
15	3:00 AM - 3:15 AM				
16	3:15 AM - 3:30 AM				
17	3:30 AM - 3:45 AM				
18	3:45 AM - 4:00 AM				
19	4:00 AM - 4:15 AM				
20	4:15 AM - 4:30 AM				
21	4:30 AM - 4:45 AM				
22	4:45 AM - 5:00 AM				
23	5:00 AM - 5:15 AM				
24	5:15 AM - 5:30 AM				
25	5:30 AM - 5:45 AM				
26	5:45 AM - 6:00 AM				
27	6:00 AM - 6:15 AM				
28	6:15 AM - 6:30 AM				
29	6:30 AM - 6:45 AM				

Line	Day 12
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
30	6:45 AM - 7:00 AM				
31	7:00 AM - 7:15 AM				
32	7:15 AM - 7:30 AM				
33	7:30 AM - 7:45 AM				
34	7:45 AM - 8:00 AM				
35	8:00 AM - 8:15 AM				
36	8:15 AM - 8:30 AM				
37	8:30 AM - 8:45 AM				
38	8:45 AM - 9:00 AM				
39	9:00 AM - 9:15 AM				
40	9:15 AM - 9:30 AM				
41	9:30 AM - 9:45 AM				
42	9:45 AM - 10:00 AM				
43	10:00 AM - 10:15 AM				
44	10:15 AM - 10:30 AM				
45	10:30 AM - 10:45 AM				
46	10:45 AM - 11:00 AM				
47	11:00 AM - 11:15 AM				
48	11:15 AM - 11:30 AM				
49	11:30 AM - 11:45 AM				
50	11:45 AM - 12:00 PM				
51	12:00 PM - 12:15 PM				
52	12:15 PM - 12:30 PM				
53	12:30 PM - 12:45 PM				
54	12:45 PM - 1:00 PM				
55	1:00 PM - 1:15 PM				
56	1:15 PM - 1:30 PM				

Line	Day 12
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
57	1:30 PM - 1:45 PM				
58	1:45 PM - 2:00 PM				
59	2:00 PM - 2:15 PM				
60	2:15 PM - 2:30 PM				
61	2:30 PM - 2:45 PM				
62	2:45 PM - 3:00 PM				
63	3:00 PM - 3:15 PM				
64	3:15 PM - 3:30 PM				
65	3:30 PM - 3:45 PM				
66	3:45 PM - 4:00 PM				
67	4:00 PM - 4:15 PM				
68	4:15 PM - 4:30 PM				
69	4:30 PM - 4:45 PM				
70	4:45 PM - 5:00 PM				
71	5:00 PM - 5:15 PM				
72	5:15 PM - 5:30 PM				
73	5:30 PM - 5:45 PM				
74	5:45 PM - 6:00 PM				
75	6:00 PM - 6:15 PM				
76	6:15 PM - 6:30 PM				
77	6:30 PM - 6:45 PM				
78	6:45 PM - 7:00 PM				
79	7:00 PM - 7:15 PM				
80	7:15 PM - 7:30 PM				
81	7:30 PM - 7:45 PM				
82	7:45 PM - 8:00 PM				
83	8:00 PM - 8:15 PM				

Line	Day 12
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
84	8:15 PM - 8:30 PM				
85	8:30 PM - 8:45 PM				
86	8:45 PM - 9:00 PM				
87	9:00 PM - 9:15 PM				
88	9:15 PM - 9:30 PM				
89	9:30 PM - 9:45 PM				
90	9:45 PM - 10:00 PM				
91	10:00 PM - 10:15 PM				
92	10:15 PM - 10:30 PM				
93	10:30 PM - 10:45 PM				
94	10:45 PM - 11:00 PM				
95	11:00 PM - 11:15 PM				
96	11:15 PM - 11:30 PM				
97	11:30 PM - 11:45 PM				
98	11:45 PM - 12:00 AM				

Line	Day 13
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
3	12:00 AM - 12:15 AM				
4	12:15 AM - 12:30 AM				
5	12:30 AM - 12:45 AM				
6	12:45 AM - 1:00 AM				
7	1:00 AM - 1:15 AM				
8	1:15 AM - 1:30 AM				
9	1:30 AM - 1:45 AM				
10	1:45 AM - 2:00 AM				
11	2:00 AM - 2:15 AM				
12	2:15 AM - 2:30 AM				
13	2:30 AM - 2:45 AM				
14	2:45 AM - 3:00 AM				
15	3:00 AM - 3:15 AM				
16	3:15 AM - 3:30 AM				
17	3:30 AM - 3:45 AM				
18	3:45 AM - 4:00 AM				
19	4:00 AM - 4:15 AM				
20	4:15 AM - 4:30 AM				
21	4:30 AM - 4:45 AM				
22	4:45 AM - 5:00 AM				
23	5:00 AM - 5:15 AM				
24	5:15 AM - 5:30 AM				
25	5:30 AM - 5:45 AM				
26	5:45 AM - 6:00 AM				
27	6:00 AM - 6:15 AM				
28	6:15 AM - 6:30 AM				
29	6:30 AM - 6:45 AM				

Line	Day 13
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
30	6:45 AM - 7:00 AM				
31	7:00 AM - 7:15 AM				
32	7:15 AM - 7:30 AM				
33	7:30 AM - 7:45 AM				
34	7:45 AM - 8:00 AM				
35	8:00 AM - 8:15 AM				
36	8:15 AM - 8:30 AM				
37	8:30 AM - 8:45 AM				
38	8:45 AM - 9:00 AM				
39	9:00 AM - 9:15 AM				
40	9:15 AM - 9:30 AM				
41	9:30 AM - 9:45 AM				
42	9:45 AM - 10:00 AM				
43	10:00 AM - 10:15 AM				
44	10:15 AM - 10:30 AM				
45	10:30 AM - 10:45 AM				
46	10:45 AM - 11:00 AM				
47	11:00 AM - 11:15 AM				
48	11:15 AM - 11:30 AM				
49	11:30 AM - 11:45 AM				
50	11:45 AM - 12:00 PM				
51	12:00 PM - 12:15 PM				
52	12:15 PM - 12:30 PM				
53	12:30 PM - 12:45 PM				
54	12:45 PM - 1:00 PM				
55	1:00 PM - 1:15 PM				
56	1:15 PM - 1:30 PM				

Line	Day 13
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
57	1:30 PM - 1:45 PM				
58	1:45 PM - 2:00 PM				
59	2:00 PM - 2:15 PM				
60	2:15 PM - 2:30 PM				
61	2:30 PM - 2:45 PM				
62	2:45 PM - 3:00 PM				
63	3:00 PM - 3:15 PM				
64	3:15 PM - 3:30 PM				
65	3:30 PM - 3:45 PM				
66	3:45 PM - 4:00 PM				
67	4:00 PM - 4:15 PM				
68	4:15 PM - 4:30 PM				
69	4:30 PM - 4:45 PM				
70	4:45 PM - 5:00 PM				
71	5:00 PM - 5:15 PM				
72	5:15 PM - 5:30 PM				
73	5:30 PM - 5:45 PM				
74	5:45 PM - 6:00 PM				
75	6:00 PM - 6:15 PM				
76	6:15 PM - 6:30 PM				
77	6:30 PM - 6:45 PM				
78	6:45 PM - 7:00 PM				
79	7:00 PM - 7:15 PM				
80	7:15 PM - 7:30 PM				
81	7:30 PM - 7:45 PM				
82	7:45 PM - 8:00 PM				
83	8:00 PM - 8:15 PM				

Line	Day 13
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
84	8:15 PM - 8:30 PM				
85	8:30 PM - 8:45 PM				
86	8:45 PM - 9:00 PM				
87	9:00 PM - 9:15 PM				
88	9:15 PM - 9:30 PM				
89	9:30 PM - 9:45 PM				
90	9:45 PM - 10:00 PM				
91	10:00 PM - 10:15 PM				
92	10:15 PM - 10:30 PM				
93	10:30 PM - 10:45 PM				
94	10:45 PM - 11:00 PM				
95	11:00 PM - 11:15 PM				
96	11:15 PM - 11:30 PM				
97	11:30 PM - 11:45 PM				
98	11:45 PM - 12:00 AM				

Line	Day 14
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
3	12:00 AM - 12:15 AM			
4	12:15 AM - 12:30 AM			
5	12:30 AM - 12:45 AM			
6	12:45 AM - 1:00 AM			
7	1:00 AM - 1:15 AM			
8	1:15 AM - 1:30 AM			
9	1:30 AM - 1:45 AM			
10	1:45 AM - 2:00 AM			
11	2:00 AM - 2:15 AM			
12	2:15 AM - 2:30 AM			
13	2:30 AM - 2:45 AM			
14	2:45 AM - 3:00 AM			
15	3:00 AM - 3:15 AM			
16	3:15 AM - 3:30 AM			
17	3:30 AM - 3:45 AM			
18	3:45 AM - 4:00 AM			
19	4:00 AM - 4:15 AM			
20	4:15 AM - 4:30 AM			
21	4:30 AM - 4:45 AM			
22	4:45 AM - 5:00 AM			
23	5:00 AM - 5:15 AM			
24	5:15 AM - 5:30 AM			
25	5:30 AM - 5:45 AM			
26	5:45 AM - 6:00 AM			
27	6:00 AM - 6:15 AM			
28	6:15 AM - 6:30 AM			
29	6:30 AM - 6:45 AM			

Line	Day 14
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
30	6:45 AM - 7:00 AM			
31	7:00 AM - 7:15 AM			
32	7:15 AM - 7:30 AM			
33	7:30 AM - 7:45 AM			
34	7:45 AM - 8:00 AM			
35	8:00 AM - 8:15 AM			
36	8:15 AM - 8:30 AM			
37	8:30 AM - 8:45 AM			
38	8:45 AM - 9:00 AM			
39	9:00 AM - 9:15 AM			
40	9:15 AM - 9:30 AM			
41	9:30 AM - 9:45 AM			
42	9:45 AM - 10:00 AM			
43	10:00 AM - 10:15 AM			
44	10:15 AM - 10:30 AM			
45	10:30 AM - 10:45 AM			
46	10:45 AM - 11:00 AM			
47	11:00 AM - 11:15 AM			
48	11:15 AM - 11:30 AM			
49	11:30 AM - 11:45 AM			
50	11:45 AM - 12:00 PM			
51	12:00 PM - 12:15 PM			
52	12:15 PM - 12:30 PM			
53	12:30 PM - 12:45 PM			
54	12:45 PM - 1:00 PM			
55	1:00 PM - 1:15 PM			
56	1:15 PM - 1:30 PM			

Line	Day 14
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
57	1:30 PM - 1:45 PM				
58	1:45 PM - 2:00 PM				
59	2:00 PM - 2:15 PM				
60	2:15 PM - 2:30 PM				
61	2:30 PM - 2:45 PM				
62	2:45 PM - 3:00 PM				
63	3:00 PM - 3:15 PM				
64	3:15 PM - 3:30 PM				
65	3:30 PM - 3:45 PM				
66	3:45 PM - 4:00 PM				
67	4:00 PM - 4:15 PM				
68	4:15 PM - 4:30 PM				
69	4:30 PM - 4:45 PM				
70	4:45 PM - 5:00 PM				
71	5:00 PM - 5:15 PM				
72	5:15 PM - 5:30 PM				
73	5:30 PM - 5:45 PM				
74	5:45 PM - 6:00 PM				
75	6:00 PM - 6:15 PM				
76	6:15 PM - 6:30 PM				
77	6:30 PM - 6:45 PM				
78	6:45 PM - 7:00 PM				
79	7:00 PM - 7:15 PM				
80	7:15 PM - 7:30 PM				
81	7:30 PM - 7:45 PM				
82	7:45 PM - 8:00 PM				
83	8:00 PM - 8:15 PM				

Line	Day 14
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

	Time of Day	Activity (select service type from drop down) ①	Street Address	City	Zip Code
84	8:15 PM - 8:30 PM				
85	8:30 PM - 8:45 PM				
86	8:45 PM - 9:00 PM				
87	9:00 PM - 9:15 PM				
88	9:15 PM - 9:30 PM				
89	9:30 PM - 9:45 PM				
90	9:45 PM - 10:00 PM				
91	10:00 PM - 10:15 PM				
92	10:15 PM - 10:30 PM				
93	10:30 PM - 10:45 PM				
94	10:45 PM - 11:00 PM				
95	11:00 PM - 11:15 PM				
96	11:15 PM - 11:30 PM				
97	11:30 PM - 11:45 PM				
98	11:45 PM - 12:00 AM				

Attachment 8 - Time Study Instrument - All Other HCBS

New Mexico Health Care Authority
Developmental Disabilities Supports Division

**Home and Community Based Services (HCBS)
Rate Study**

Time Study

– distributed by –

BURNS & ASSOCIATES
A Division of Health Management Associates

August 28, 2025

Please complete and submit your time study to ddsd-rate-study@healthmanagement.com by **September 30th, 2025**.

Questions? Contact Derek Barber with Health Management Associates at ddsd-rate-study@healthmanagement.com or (517) 993-9229.

General Instructions for Completing Time Study

Overview of Time Study

The New Mexico Health Care Authority's Developmental Disabilities Supports Division (DDSD) is in the process of reviewing payment rates for services covered under the Developmental Disabilities, Mi Via, and Medically Fragile Waivers. DDSD has contracted with Burns & Associates, a division of Health Management Associates (HMA-Burns), to assist with this rate study. As part of the rate study, HMA-Burns has developed this spreadsheet to understand the responsibilities of workers who provide waiver services.

Confidentiality

All data collected through the time study will be kept confidential. HMA-Burns will not share the data reported with a worker's employer or with DDSD. All completed spreadsheets will be combined and reported in total.

Instructions for Completing the Time Study Workbook

1. Save this workbook so that you can report your daily tasks over the next 14 days. You may choose to print a form to allow you to record time throughout the day and then transfer the information to the spreadsheet.
2. Select cells with an "i" icon to access additional instructions. Refer to the example time study day on the 'Example Day' tab, which provides an example of what a completed day may look like.
3. Complete all questions on the **Contact Details and Background Form**. On Line 4, select 'Employee' if you receive a W-2 from your agency, or 'Contractor' if you are not directly employed but receive a 1099 statement from your agency. Report the first date for which you will be reporting time on Line 9 and the end date (14 days later) will automatically calculate on Line 10. Each "Day" tab represents a single day in the 14-day consecutive period for which you will report your time. Complete the expense reporting on Lines 11 - 23 **only** if you are a contractor and deliver one of the services noted in
4. Use the "Day 1" spreadsheet to report time for the first day of the 14-day period. Day 2 represents the 2nd day in the 14-day period, and so on. You will complete an individual day tab for each of the 14 days in the two-week time study period, whether you worked that day or not. If you are paid on an hourly basis, report only paid time. Additional instructions for each daily worksheet are below:
 - a. Select the drop down list in Line 1 to report 'Yes' if worked any part of the day. If you did not work on any day within the 14-day reporting period, select the 'No' response and reason that most closely describes why you did not work (e.g., 'No – I was not scheduled to work today'). If you select any of the 'No' choices, the rest of the form will black-out and you will not need to report any additional information for the day.
 - b. On Line 2, report the total work related miles you drove for the day (for example, traveling between service visits, transporting service recipients, etc.) Do not include mileage spent commuting to/ from work for the day.
 - c. Start with the time you were scheduled to begin the workday. The form is set-up to report time across a full 24-hour period (in 15-minute time periods and beginning at 12:00 am). Please report your time **only** for your actual work hours.

General Instructions for Completing Time Study

d. For each 15-minute time period you worked, you may select either a billable service from Column H or a non-billable activity from Column I. If you performed two non-billable tasks at the same time (such as recordkeeping while also attending a staff meeting), select the option that took the greater focus. ***Do not select both a billable and non-billable activity in the same 15-minute time period.***

e. For each 15-minute selection, enter the applicable street address, city, and zip code for where the task was performed. You do not need to enter an address for travel time.

f. Review the following additional guidance when reporting non-billable activities in Column I:

- Individuals working in a paid residential setting (such as a Supported Living home) should generally report all time spent in the home or conducting home business (such as grocery shopping for the home) as billable (except for breaks or time spent on other tasks away from the home),
- Please refer to the following additional guidance regarding select 'non-billable' activity codes in Column I of the daily worksheets:

- Time 'lost' due to missed appointment: If you were scheduled to perform a service but the service was canceled (for example, due to the client’s illness) select this option. This option should only be used to report time that was not spent on some other activity. Consider the following example for an appointment scheduled for 9:00 AM, but the client no-shows:

Time	Activity	Drop-Down Option
9:00-9:15	knocking on the individual’s door, attempting to contact them	Time 'lost' due to missed appointments
9:15-9:30	drive back to the office	Paid travel time (not transporting clients)
9:30-9:45	catch-up on phone calls on behalf of clients	Performing collateral contacts (non-billable)
9:45-10:00	catch-up on phone calls on behalf of clients	Performing collateral contacts (non-billable)

In this example, although the missed appointment was an hour, only the first 15 minutes would be reported as “Time ‘lost’ due to missed appointments” as the remaining time was spent on other activities.

General Instructions for Completing Time Study

- **Paid travel time (not transporting clients):** Use this option to report time spent driving between service encounters or performing work-related tasks. Do not use this option for time spent driving to your first work location for the day (for example, the drive from your home to the office or the first service location), or driving from your last work location for the day (for example, your drive home). Do not use this option if you are transporting a client as part of a service (this time should be reported as the billable service).
- **Recordkeeping/ report writing:** Use this code to report time spent maintaining client records and other recordkeeping or report writing. Only use this code if such recordkeeping/ report writing is considered a non-billable task based on the service specifications of the service you are
- **Program preparation (set-up or clean-up):** Some services (such as Customized Community Supports) may require a set-up or clean-up period before/ after services are delivered for a session or for a day. Use this code to report time spent setting up or cleaning up for a program or service, but only if the time is not also considered billable (e.g., if you began stacking chairs for a CCS program at the end of the day while still working with clients, that time should be considered billable and this code would not be used).

Have Questions or Need Assistance?

For questions or assistance in completing the Time Study workbook, please email us at DDSD-Rate-Study@healthmanagement.com, or call Derek Barber at (517) 993-9229.

Submitting your Completed Time Study Workbook

At the end of the 14-day timekeeping period, please submit your survey via email to DDSD-Rate-Study@healthmanagement.com. Please complete your time study by no later than **September 30th, 2025**.

Contact Details and Background Details (click ⓘ icons for directions)

Line	Factor	Input
<i>Contact and Background Information</i>		
1	Name	
2	Email address	
3	Contact phone number	
4	Employment status (select from the drop down)	
5	Job title	
6	Select the county in which you <u>primarily</u> worked during the two week time study period	
7	Name of provider/ agency for which you provide billable services (as applicable)	
8	How long have you been providing home and community based services?	
<i>Time Study Period</i>		
9	Time study start date (enter M/D/YYYY format)	
10	Time study end date	



Contact Details and Background Details (click ⓘ icons for directions)

Line	Factor	Input
<p>Annual Business Expenses Incurred by Contractors Complete this section only if you are a contractor (as reported on Line 4) <u>and</u> deliver one of the following billable services: Adult/ Private Duty Nursing (RN/LPN); Behavioral Support Consultation; Nutritional Counseling; Therapies (OT/PT/SLP or OT-Assistant/ PT-Assistant). ⓘ</p> <p>Report expense information for a recent 12-month period for which you have reliable expense details.</p>		
11	Professional liability insurance	
12	Licensing, credentialing, continuing education/ training expenses	
13	Information technology/ equipment	
14	Clinical/ therapeutic tools and supplies	
15	Travel and transportation expenses	
16	Bookkeeping and administrative support (including tax preparation, legal consultation)	
17	Other expense (report expense amount at right, and enter a description of the expense below):	
	[Enter a brief description of this expense]	
18	Other expense (report expense amount at right, and enter a description of the expense below):	
	[Enter a brief description of this expense]	
19	Other expense (report expense amount at right, and enter a description of the expense below):	
	[Enter a brief description of this expense]	
20	Other expense (report expense amount at right, and enter a description of the expense below):	
	[Enter a brief description of this expense]	
21	Other expense (report expense amount at right, and enter a description of the expense below):	
	[Enter a brief description of this expense]	
22	Total Annual Contractor Expenses	ⓘ
23	What percentage of your time during the reported fiscal year was spent supporting a DDSD HCBS Waiver program?	

Line	Example Day	
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1	Did you work today?	Yes	①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)	17.0	

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
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3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

EXAMPLE C

Line		Example Day
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/from work)

Time of Day	Street Address	City	Zip Code
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3	12:00 AM - 12:15 AM	ONLY	
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line	Example Day	
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1	Did you work today?	Yes	①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)	17.0	

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
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32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		Employer time (e.g., staff meetings, receiving supervision)
36	8:15 AM - 8:30 AM		Employer time (e.g., staff meetings, receiving supervision)
37	8:30 AM - 8:45 AM		Employer time (e.g., staff meetings, receiving supervision)
38	8:45 AM - 9:00 AM		Employer time (e.g., staff meetings, receiving supervision)
39	9:00 AM - 9:15 AM		Paid travel time (not transporting clients); (non-billable)
40	9:15 AM - 9:30 AM		Paid travel time (not transporting clients); (non-billable)
41	9:30 AM - 9:45 AM	Customized In-Home Supports	
42	9:45 AM - 10:00 AM	Customized In-Home Supports	
43	10:00 AM - 10:15 AM	Customized In-Home Supports	
44	10:15 AM - 10:30 AM	Customized In-Home Supports	
45	10:30 AM - 10:45 AM	Customized In-Home Supports	
46	10:45 AM - 11:00 AM	Customized In-Home Supports	
47	11:00 AM - 11:15 AM	Customized In-Home Supports	
48	11:15 AM - 11:30 AM	Customized In-Home Supports	
49	11:30 AM - 11:45 AM	Customized In-Home Supports	
50	11:45 AM - 12:00 PM	Customized In-Home Supports	
51	12:00 PM - 12:15 PM	Customized In-Home Supports	
52	12:15 PM - 12:30 PM	Customized In-Home Supports	
53	12:30 PM - 12:45 PM		Paid break
54	12:45 PM - 1:00 PM		Paid break
55	1:00 PM - 1:15 PM		Paid break
56	1:15 PM - 1:30 PM		Paid break
57	1:30 PM - 1:45 PM		Paid travel time (not transporting clients); (non-billable)
58	1:45 PM - 2:00 PM		Paid travel time (not transporting clients); (non-billable)
59	2:00 PM - 2:15 PM	Customized In-Home Supports	
60	2:15 PM - 2:30 PM	Customized In-Home Supports	

Line	Example Day
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM	123 Oak Street	Albuquerque 87199
36	8:15 AM - 8:30 AM	123 Oak Street	Albuquerque 87199
37	8:30 AM - 8:45 AM	123 Oak Street	Albuquerque 87199
38	8:45 AM - 9:00 AM	123 Oak Street	Albuquerque 87199
39	9:00 AM - 9:15 AM	N/A	
40	9:15 AM - 9:30 AM	N/A	
41	9:30 AM - 9:45 AM	123 Maple Street	Albuquerque 87199
42	9:45 AM - 10:00 AM	123 Maple Street	Albuquerque 87199
43	10:00 AM - 10:15 AM	123 Maple Street	Albuquerque 87199
44	10:15 AM - 10:30 AM	123 Maple Street	Albuquerque 87199
45	10:30 AM - 10:45 AM	123 Maple Street	Albuquerque 87199
46	10:45 AM - 11:00 AM	123 Maple Street	Albuquerque 87199
47	11:00 AM - 11:15 AM	123 Maple Street	Albuquerque 87199
48	11:15 AM - 11:30 AM	123 Maple Street	Albuquerque 87199
49	11:30 AM - 11:45 AM	123 Maple Street	Albuquerque 87199
50	11:45 AM - 12:00 PM	123 Maple Street	Albuquerque 87199
51	12:00 PM - 12:15 PM	123 Maple Street	Albuquerque 87199
52	12:15 PM - 12:30 PM	123 Maple Street	Albuquerque 87199
53	12:30 PM - 12:45 PM	N/A	
54	12:45 PM - 1:00 PM	N/A	
55	1:00 PM - 1:15 PM	N/A	
56	1:15 PM - 1:30 PM	N/A	
57	1:30 PM - 1:45 PM	N/A	
58	1:45 PM - 2:00 PM	N/A	
59	2:00 PM - 2:15 PM	123 Walnut Street	Albuquerque 87199
60	2:15 PM - 2:30 PM	123 Walnut Street	Albuquerque 87199

Line	Example Day	
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1	Did you work today?	Yes	①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)	17.0	

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
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61	2:30 PM - 2:45 PM	Customized In-Home Supports	
62	2:45 PM - 3:00 PM	Customized In-Home Supports	
63	3:00 PM - 3:15 PM	Customized In-Home Supports	
64	3:15 PM - 3:30 PM	Customized In-Home Supports	
65	3:30 PM - 3:45 PM	Customized In-Home Supports	
66	3:45 PM - 4:00 PM	Customized In-Home Supports	
67	4:00 PM - 4:15 PM	Customized In-Home Supports	
68	4:15 PM - 4:30 PM	Customized In-Home Supports	
69	4:30 PM - 4:45 PM	Customized In-Home Supports	
70	4:45 PM - 5:00 PM	Customized In-Home Supports	
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line	Example Day
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

61	2:30 PM - 2:45 PM	123 Walnut Street	Albuquerque	87199
62	2:45 PM - 3:00 PM	123 Walnut Street	Albuquerque	87199
63	3:00 PM - 3:15 PM	123 Walnut Street	Albuquerque	87199
64	3:15 PM - 3:30 PM	123 Walnut Street	Albuquerque	87199
65	3:30 PM - 3:45 PM	123 Walnut Street	Albuquerque	87199
66	3:45 PM - 4:00 PM	123 Walnut Street	Albuquerque	87199
67	4:00 PM - 4:15 PM	123 Walnut Street	Albuquerque	87199
68	4:15 PM - 4:30 PM	123 Walnut Street	Albuquerque	87199
69	4:30 PM - 4:45 PM	123 Walnut Street	Albuquerque	87199
70	4:45 PM - 5:00 PM	123 Walnut Street	Albuquerque	87199
71	5:00 PM - 5:15 PM			
72	5:15 PM - 5:30 PM			
73	5:30 PM - 5:45 PM			
74	5:45 PM - 6:00 PM			
75	6:00 PM - 6:15 PM			
76	6:15 PM - 6:30 PM			
77	6:30 PM - 6:45 PM			
78	6:45 PM - 7:00 PM			
79	7:00 PM - 7:15 PM			
80	7:15 PM - 7:30 PM			
81	7:30 PM - 7:45 PM			
82	7:45 PM - 8:00 PM			
83	8:00 PM - 8:15 PM			
84	8:15 PM - 8:30 PM			
85	8:30 PM - 8:45 PM			
86	8:45 PM - 9:00 PM			
87	9:00 PM - 9:15 PM			
88	9:15 PM - 9:30 PM			
89	9:30 PM - 9:45 PM			

Line	Example Day	
-------------	--------------------	--

1	Did you work today?	Yes	①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)	17.0	

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line	Example Day
------	-------------

1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line	Day 1	
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		

Line		Day 1
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		

Line	Day 1	
-------------	--------------	--

1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		
32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		

Line		Day 1
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		
32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		

Line	Day 1	
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
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57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		
61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		

Line		Day 1
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		
61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		

Line	Day 1
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
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84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		
90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line		Day 1
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		
90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line	Day 2
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
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3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line		Day 2
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line	Day 2
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
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32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line		Day 2
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line	Day 2
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line		Day 2
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line	Day 2
-------------	--------------

1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line		Day 2
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line	Day 3
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line		Day 3
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line	Day 3
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line		Day 3
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line	Day 3
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line		Day 3
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line	Day 3
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line		Day 3
-------------	--	--------------

1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line	Day 4
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line		Day 4
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line	Day 4
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line		Day 4
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line	Day 4
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line		Day 4
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line	Day 4
-------------	--------------

1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line		Day 4
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line	Day 5
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line		Day 5
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line	Day 5
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line		Day 5
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line	Day 5
-------------	--------------

1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line		Day 5
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line	Day 5
-------------	--------------

1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line		Day 5
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line	Day 6
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line		Day 6
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line	Day 6
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
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32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line		Day 6
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line	Day 6
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line		Day 6
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line	Day 6
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
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90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line		Day 6
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line	Day 7
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
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3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line		Day 7
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line	Day 7
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line		Day 7
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line	Day 7
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line		Day 7
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
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66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line	Day 7
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line		Day 7
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line	Day 8
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
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15	3:00 AM - 3:15 AM		
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23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line		Day 8
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
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23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line	Day 8
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line		Day 8
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line	Day 8
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line		Day 8
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line	Day 8
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
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90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line		Day 8
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line	Day 9
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line		Day 9
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line	Day 9
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
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32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line		Day 9
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line	Day 9
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line		Day 9
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line	Day 9
-------------	--------------

1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line		Day 9
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line	Day 10
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line		Day 10
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line	Day 10	
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line		Day 10
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line	Day 10	
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line		Day 10
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line	Day 10
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line		Day 10
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line	Day 11	
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line		Day 11
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line	Day 11	
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line		Day 11
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line	Day 11	
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line		Day 11
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line	Day 11
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line		Day 11
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line	Day 12
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line		Day 12
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line	Day 12
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line		Day 12
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line	Day 12
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line		Day 12
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line	Day 12
-------------	---------------

1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line		Day 12
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line	Day 13
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line		Day 13
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line	Day 13
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line		Day 13
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line	Day 13
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
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61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line		Day 13
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line	Day 13
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
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90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line		Day 13
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line	Day 14
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
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3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line		Day 14
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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3	12:00 AM - 12:15 AM		
4	12:15 AM - 12:30 AM		
5	12:30 AM - 12:45 AM		
6	12:45 AM - 1:00 AM		
7	1:00 AM - 1:15 AM		
8	1:15 AM - 1:30 AM		
9	1:30 AM - 1:45 AM		
10	1:45 AM - 2:00 AM		
11	2:00 AM - 2:15 AM		
12	2:15 AM - 2:30 AM		
13	2:30 AM - 2:45 AM		
14	2:45 AM - 3:00 AM		
15	3:00 AM - 3:15 AM		
16	3:15 AM - 3:30 AM		
17	3:30 AM - 3:45 AM		
18	3:45 AM - 4:00 AM		
19	4:00 AM - 4:15 AM		
20	4:15 AM - 4:30 AM		
21	4:30 AM - 4:45 AM		
22	4:45 AM - 5:00 AM		
23	5:00 AM - 5:15 AM		
24	5:15 AM - 5:30 AM		
25	5:30 AM - 5:45 AM		
26	5:45 AM - 6:00 AM		
27	6:00 AM - 6:15 AM		
28	6:15 AM - 6:30 AM		
29	6:30 AM - 6:45 AM		
30	6:45 AM - 7:00 AM		
31	7:00 AM - 7:15 AM		

Line	Day 14	
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
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32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line		Day 14
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
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32	7:15 AM - 7:30 AM		
33	7:30 AM - 7:45 AM		
34	7:45 AM - 8:00 AM		
35	8:00 AM - 8:15 AM		
36	8:15 AM - 8:30 AM		
37	8:30 AM - 8:45 AM		
38	8:45 AM - 9:00 AM		
39	9:00 AM - 9:15 AM		
40	9:15 AM - 9:30 AM		
41	9:30 AM - 9:45 AM		
42	9:45 AM - 10:00 AM		
43	10:00 AM - 10:15 AM		
44	10:15 AM - 10:30 AM		
45	10:30 AM - 10:45 AM		
46	10:45 AM - 11:00 AM		
47	11:00 AM - 11:15 AM		
48	11:15 AM - 11:30 AM		
49	11:30 AM - 11:45 AM		
50	11:45 AM - 12:00 PM		
51	12:00 PM - 12:15 PM		
52	12:15 PM - 12:30 PM		
53	12:30 PM - 12:45 PM		
54	12:45 PM - 1:00 PM		
55	1:00 PM - 1:15 PM		
56	1:15 PM - 1:30 PM		
57	1:30 PM - 1:45 PM		
58	1:45 PM - 2:00 PM		
59	2:00 PM - 2:15 PM		
60	2:15 PM - 2:30 PM		

Line	Day 14
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
-------------	---	--

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line		Day 14
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

61	2:30 PM - 2:45 PM		
62	2:45 PM - 3:00 PM		
63	3:00 PM - 3:15 PM		
64	3:15 PM - 3:30 PM		
65	3:30 PM - 3:45 PM		
66	3:45 PM - 4:00 PM		
67	4:00 PM - 4:15 PM		
68	4:15 PM - 4:30 PM		
69	4:30 PM - 4:45 PM		
70	4:45 PM - 5:00 PM		
71	5:00 PM - 5:15 PM		
72	5:15 PM - 5:30 PM		
73	5:30 PM - 5:45 PM		
74	5:45 PM - 6:00 PM		
75	6:00 PM - 6:15 PM		
76	6:15 PM - 6:30 PM		
77	6:30 PM - 6:45 PM		
78	6:45 PM - 7:00 PM		
79	7:00 PM - 7:15 PM		
80	7:15 PM - 7:30 PM		
81	7:30 PM - 7:45 PM		
82	7:45 PM - 8:00 PM		
83	8:00 PM - 8:15 PM		
84	8:15 PM - 8:30 PM		
85	8:30 PM - 8:45 PM		
86	8:45 PM - 9:00 PM		
87	9:00 PM - 9:15 PM		
88	9:15 PM - 9:30 PM		
89	9:30 PM - 9:45 PM		

Line	Day 14
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1	Did you work today?		①
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)		

Time of Day	Billable Service Name (select service type from drop down) ①	Non-Billable Activity (select activity type from drop down) ①
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90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Line		Day 14
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1	Did you work today?
2	How many miles did you travel for work today? Do not include normal commuting miles (to/ from work)

Time of Day	Street Address	City	Zip Code
-------------	----------------	------	----------

90	9:45 PM - 10:00 PM		
91	10:00 PM - 10:15 PM		
92	10:15 PM - 10:30 PM		
93	10:30 PM - 10:45 PM		
94	10:45 PM - 11:00 PM		
95	11:00 PM - 11:15 PM		
96	11:15 PM - 11:30 PM		
97	11:30 PM - 11:45 PM		
98	11:45 PM - 12:00 AM		

Attachment 9 - Time Study Analysis - Case Management and Consultant Services

Home and Community Based Services (HCBS) Rate
Study

Time Study Analysis -
Case Management and Consultant Services

- prepared for -

New Mexico Health Care Authority -
Developmental Disabilities Supports Division

- prepared by -

Burns & Associates, a Division of Health Management Associates
<https://www.healthmanagement.com/about/burns-associates/>

November 6, 2025

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division

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Average Mileage per Trip.....	5
Average Contractor Expenses.....	6

**Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division**

Time Study Counts

Number of submissions for Case Management/ Consultant services	338
Exclusions (zero reported hours or missing employee data)	8
Percentage of submissions excluded	2%
Number of Case Management/ Consultant time studies retained in the final dataset	330
Percentage of Case Management/ Consultant submissions that met all inclusion criteria	98%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division

	Average w/ Outliers	Average w/o Outliers	Median		Average w/ Outliers	Average w/o Outliers	Median
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DD Waiver Case Management | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor		
Count of time studies	20			165		
Meeting with individuals (whether face-to-face or remotely)	10.9%	12.2%	16.8%	19.3%	20.5%	23.5%
Assisting individuals with eligibility determinations	3.4%	3.4%	2.1%	2.9%	2.6%	2.3%
Performing assessments/ developing person-centered plans	9.0%	9.4%	9.1%	8.7%	8.9%	9.2%
Developing or reporting individual budgets	5.5%	5.0%	5.9%	5.4%	5.5%	5.9%
Monitoring plan implementation/ service utilization	5.0%	5.4%	6.0%	4.6%	4.3%	3.8%
Performing outreach/ collateral contacts on behalf of individuals	10.3%	11.2%	13.2%	9.5%	9.8%	11.2%
Recordkeeping/ report writing	20.0%	21.0%	25.3%	15.3%	15.5%	16.4%
Paid travel time	9.2%	11.6%	14.5%	15.3%	17.0%	19.8%
Time 'lost' due to missed appointments	0.2%	0.1%	0.0%	0.3%	0.2%	0.0%
Receiving training	1.8%	1.1%	0.0%	0.8%	0.5%	0.0%
Employer time (e.g., staff meetings, receiving supervision)	3.1%	3.2%	3.3%	2.0%	1.9%	1.9%
Agency management and administrative tasks	6.9%	3.6%	0.0%	2.0%	1.3%	0.0%
Supervisory activities	5.0%	4.7%	0.0%	0.3%	0.1%	0.0%
Paid break	3.6%	3.7%	0.0%	1.2%	0.9%	0.0%
Time off (paid)	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%
Time off (unpaid)	1.2%	0.2%	0.0%	4.1%	3.1%	0.0%
Performing all other activities not listed	4.8%	4.4%	3.8%	8.3%	8.0%	5.9%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Mi Via Waiver Case Management | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor		
Count of time studies	71			61		
Meeting with individuals (whether face-to-face or remotely)	15.8%	17.4%	22.0%	20.9%	24.4%	28.0%
Assisting individuals with eligibility determinations	1.6%	1.3%	0.7%	2.7%	2.5%	2.3%
Performing assessments/ developing person-centered plans	2.8%	2.3%	1.2%	3.2%	2.7%	1.2%
Developing or reporting individual budgets	6.0%	6.4%	7.0%	5.4%	5.4%	4.9%
Monitoring plan implementation/ service utilization	5.2%	5.0%	6.1%	4.7%	5.3%	6.0%
Performing outreach/ collateral contacts on behalf of individuals	5.7%	5.7%	6.4%	5.8%	6.0%	6.4%
Recordkeeping/ report writing	14.7%	15.8%	20.5%	14.8%	15.7%	18.8%
Paid travel time	14.3%	15.4%	16.6%	20.5%	22.9%	27.5%
Time 'lost' due to missed appointments	0.1%	0.1%	0.0%	0.2%	0.1%	0.0%
Receiving training	0.8%	0.4%	0.0%	0.2%	0.0%	0.0%
Employer time (e.g., staff meetings, receiving supervision)	2.9%	2.9%	3.5%	2.7%	1.9%	0.9%
Agency management and administrative tasks	11.8%	9.9%	7.9%	7.3%	6.0%	2.4%
Supervisory activities	2.3%	1.2%	0.0%	1.7%	0.3%	0.0%
Paid break	2.9%	3.1%	0.0%	0.9%	0.7%	0.0%
Time off (paid)	1.3%	0.7%	0.0%	0.1%	0.0%	0.0%
Time off (unpaid)	4.1%	4.7%	4.4%	2.9%	1.9%	0.0%
Performing all other activities not listed	7.7%	7.5%	3.8%	6.2%	4.3%	1.5%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
 prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division

	Average w/ Outliers	Average w/o Outliers	Median		Average w/ Outliers	Average w/o Outliers	Median
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Medically-Fragile Waiver Case Management | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>		Employee			Contractor		
Count of time studies	13				0		
Meeting with individuals (whether face-to-face or remotely)		8.9%	8.9%	10.0%			
Assisting individuals with eligibility determinations		0.3%	0.1%	0.0%			
Performing assessments/ developing person-centered plans		14.4%	13.7%	14.4%			
Developing or reporting individual budgets		1.2%	0.9%	0.9%			
Monitoring plan implementation/ service utilization		4.8%	4.6%	4.8%			
Performing outreach/ collateral contacts on behalf of individuals		9.1%	8.8%	9.7%			
Recordkeeping/ report writing		26.5%	30.8%	31.4%			
Paid travel time		7.2%	7.6%	8.0%			
Time 'lost' due to missed appointments		0.0%	0.0%	0.0%			
Receiving training		1.0%	0.5%	0.0%			
Employer time (e.g., staff meetings, receiving supervision)		1.8%	1.1%	0.4%			
Agency management and administrative tasks		17.6%	19.1%	20.5%			
Supervisory activities		1.7%	0.3%	0.0%			
Paid break		2.8%	2.3%	0.0%			
Time off (paid)		0.7%	0.0%	0.0%			
Time off (unpaid)		0.0%	0.0%	0.0%			
Performing all other activities not listed		1.9%	1.3%	0.0%			
Total		100.0%	100.0%	100.0%	0.0%	0.0%	0.0%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division

Time Study Count	Average w/ Outliers	Average w/o Outliers	Median	Time Study Count	Average w/ Outliers	Average w/o Outliers	Median
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Average Daily Miles Driven by Service | All Regions

		Employee				Contractor		
DD Waiver Case Management	18	68	60	55	161	78	65	60
Mi Via Waiver Case Management	66	97	89	84	58	84	79	76
Medically-Fragile Waiver Case Management	11	30	30	24	0			

**Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
 prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division**

Average Mileage per Trip by Service

Ct. Trips	Average w/ Outliers	Average w/o Outliers	Median
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All Regions				
DD Waiver Case Management	3,435	10	8	6
Mi Via Waiver Case Management	1,832	13	9	7
Medically-Fragile Waiver Case Management	131	12	11	9

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division

Average Contractor Expenses

Ct. Reporting	Average w/ Outliers	Average w/o Outliers	Median
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Developmental Disabilities Waiver - Statewide

Professional liability insurance	149	\$1,121	\$539	\$270
Licensing, credentialing, continuing education/ training expenses	86	\$659	\$201	\$100
Information technology/ equipment	148	\$1,763	\$1,516	\$1,363
Service/ office supplies	156	\$1,204	\$922	\$500
Travel and transportation expenses	155	\$5,242	\$4,381	\$3,413
Bookkeeping and administrative support	134	\$1,108	\$848	\$517
Other administrative expense	79	\$3,042	\$2,707	\$1,816
Utility expense	29	\$2,369	\$2,151	\$2,072
Meals	61	\$4,363	\$2,720	\$1,200
Subscriptions and memberships	5	\$376	\$376	\$256
Office (rent/ furniture)	50	\$4,198	\$3,328	\$2,452
Gifts	8	\$802	\$531	\$448
Health insurance	36	\$6,633	\$4,218	\$2,954
Other insurance	2	\$2,819	\$2,819	\$2,819
Miscellaneous	17	\$6,506	\$3,788	\$2,231
Other benefits (dental, retirement, etc.)	5	\$9,535	\$9,535	\$323
Taxes	5	\$7,525	\$7,525	\$7,440
Total Expenses	162	\$17,697	\$13,579	\$9,980

Mi Via Waiver - Statewide

Professional liability insurance	48	\$333	\$224	\$194
Licensing, credentialing, continuing education/ training expenses	29	\$203	\$157	\$100
Information technology/ equipment	49	\$1,178	\$937	\$666
Service/ office supplies	52	\$821	\$572	\$407
Travel and transportation expenses	53	\$5,448	\$4,245	\$2,365
Bookkeeping and administrative support	46	\$671	\$576	\$321
Other administrative expense	26	\$3,618	\$1,163	\$709
Utility expense	10	\$1,119	\$791	\$659
Meals	18	\$1,090	\$589	\$696
Subscriptions and memberships	4	\$719	\$719	\$438
Office (rent/ furniture)	15	\$1,017	\$826	\$554
Gifts	0	-	-	-
Health insurance	10	\$1,758	\$1,420	\$1,249
Other insurance	0	-	-	-
Miscellaneous	4	\$2,054	\$2,054	\$1,060
Other benefits (dental, retirement, etc.)	1	\$990	\$990	\$990
Taxes	2	\$1,953	\$1,953	\$1,953
Total Expenses	57	\$10,800	\$8,544	\$5,556

Attachment 10 - Time Study Analysis - All Other HCBS

Home and Community Based Services (HCBS)
Rate Study

Time Study Analysis

- prepared for -

New Mexico Health Care Authority -
Developmental Disabilities Supports Division

- prepared by -

Burns & Associates, a Division of Health Management Associates
<https://www.healthmanagement.com/about/burns-associates/>

November 6, 2025

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division

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**Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division**

Time Study Counts

Number of submissions for HCBS	2,686
Exclusions (zero reported billable hours or missing employee data)	334
Percentage of total HCBS submissions excluded	12%
Number of HCBS time studies retained in the final dataset	2,352
Percentage of HCBS submissions that met all inclusion criteria	88%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division

	Average w/ Outliers	Average w/o Outliers	Median		Average w/ Outliers	Average w/o Outliers	Median
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Supported Living/ Intensive Medical Living Services | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>		Employee			Contractor			
Count of time studies	853				10			
Providing direct services		89.9%	96.3%	100.0%		97.8%	98.2%	98.5%
Providing other billable services		3.7%	1.5%	0.0%		0.0%	0.0%	0.0%
Paid travel time (not transporting clients); (non-billable)		0.1%	0.0%	0.0%		0.2%	0.1%	0.0%
Participating in individual planning meetings (non-billable)		0.0%	0.0%	0.0%		0.0%	0.0%	0.0%
Participating in individual assessments (non-billable)		0.0%	0.0%	0.0%		0.0%	0.0%	0.0%
Developing a support plan on behalf of individuals (non-billable)		0.0%	0.0%	0.0%		0.0%	0.0%	0.0%
Program preparation (set-up or clean-up; non-billable)		0.2%	0.0%	0.0%		0.0%	0.0%	0.0%
Performing collateral contacts (non-billable)		0.1%	0.0%	0.0%		0.0%	0.0%	0.0%
Recordkeeping/ reporting writing (non-billable)		1.9%	1.3%	0.0%		1.3%	1.3%	1.4%
Employer time (e.g., staff meetings, receiving supervision)		0.3%	0.1%	0.0%		0.0%	0.0%	0.0%
Time 'lost' due to missed appointments		0.0%	0.0%	0.0%		0.0%	0.0%	0.0%
Receiving training (non-billable)		1.0%	0.4%	0.0%		0.0%	0.0%	0.0%
Paid break		0.0%	0.0%	0.0%		0.0%	0.0%	0.0%
Time off (paid)		0.3%	0.0%	0.0%		0.0%	0.0%	0.0%
Time off (unpaid)		0.7%	0.0%	0.0%		0.0%	0.0%	0.0%
Performing other non-billable activities		1.7%	0.3%	0.0%		0.7%	0.3%	0.0%
Total		100.0%	100.0%	100.0%		100.0%	100.0%	100.0%

Customized In-Home Supports | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>		Employee			Contractor			
Count of time studies	86				7			
Providing direct services		86.5%	91.3%	100.0%		92.0%	100.0%	100.0%
Providing other billable services		9.1%	7.2%	0.0%		6.5%	0.0%	0.0%
Paid travel time (not transporting clients); (non-billable)		0.9%	0.2%	0.0%		0.0%	0.0%	0.0%
Participating in individual planning meetings (non-billable)		0.1%	0.0%	0.0%		0.0%	0.0%	0.0%
Participating in individual assessments (non-billable)		0.0%	0.0%	0.0%		0.0%	0.0%	0.0%
Developing a support plan on behalf of individuals (non-billable)		0.0%	0.0%	0.0%		0.0%	0.0%	0.0%
Program preparation (set-up or clean-up; non-billable)		0.2%	0.0%	0.0%		0.0%	0.0%	0.0%
Performing collateral contacts (non-billable)		0.1%	0.0%	0.0%		0.0%	0.0%	0.0%
Recordkeeping/ reporting writing (non-billable)		1.6%	0.9%	0.0%		0.7%	0.0%	0.0%
Employer time (e.g., staff meetings, receiving supervision)		0.4%	0.1%	0.0%		0.0%	0.0%	0.0%
Time 'lost' due to missed appointments		0.0%	0.0%	0.0%		0.0%	0.0%	0.0%
Receiving training (non-billable)		0.0%	0.0%	0.0%		0.3%	0.0%	0.0%
Paid break		0.1%	0.0%	0.0%		0.5%	0.0%	0.0%
Time off (paid)		0.0%	0.0%	0.0%		0.0%	0.0%	0.0%
Time off (unpaid)		0.1%	0.0%	0.0%		0.0%	0.0%	0.0%
Performing other non-billable activities		0.8%	0.2%	0.0%		0.0%	0.0%	0.0%
Total		100.0%	100.0%	100.0%		100.0%	100.0%	100.0%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division

	Average w/ Outliers	Average w/o Outliers	Median		Average w/ Outliers	Average w/o Outliers	Median
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Home Health Aide | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor		
Count of time studies	7			1		
Providing direct services	98.1%	100.0%	100.0%	100.0%	100.0%	100.0%
Providing other billable services	1.9%	0.0%	0.0%	0.0%	0.0%	0.0%
Paid travel time (not transporting clients); (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Participating in individual planning meetings (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Participating in individual assessments (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Developing a support plan on behalf of individuals (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Program preparation (set-up or clean-up; non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Performing collateral contacts (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Recordkeeping/ reporting writing (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Employer time (e.g., staff meetings, receiving supervision)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Time 'lost' due to missed appointments	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Receiving training (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Paid break	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Time off (paid)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Time off (unpaid)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Performing other non-billable activities	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Homemaker/ Direct Support (Mi Via Waiver) | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor		
Count of time studies	4			0		
Providing direct services	100.0%	100.0%	100.0%			
Providing other billable services	0.0%	0.0%	0.0%			
Paid travel time (not transporting clients); (non-billable)	0.0%	0.0%	0.0%			
Participating in individual planning meetings (non-billable)	0.0%	0.0%	0.0%			
Participating in individual assessments (non-billable)	0.0%	0.0%	0.0%			
Developing a support plan on behalf of individuals (non-billable)	0.0%	0.0%	0.0%			
Program preparation (set-up or clean-up; non-billable)	0.0%	0.0%	0.0%			
Performing collateral contacts (non-billable)	0.0%	0.0%	0.0%			
Recordkeeping/ reporting writing (non-billable)	0.0%	0.0%	0.0%			
Employer time (e.g., staff meetings, receiving supervision)	0.0%	0.0%	0.0%			
Time 'lost' due to missed appointments	0.0%	0.0%	0.0%			
Receiving training (non-billable)	0.0%	0.0%	0.0%			
Paid break	0.0%	0.0%	0.0%			
Time off (paid)	0.0%	0.0%	0.0%			
Time off (unpaid)	0.0%	0.0%	0.0%			
Performing other non-billable activities	0.0%	0.0%	0.0%			
Total	100.0%	100.0%	100.0%	0.0%	0.0%	0.0%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division

	Average w/ Outliers	Average w/o Outliers	Median		Average w/ Outliers	Average w/o Outliers	Median
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In-Home Living Supports (Mi Via Waiver) | All Regions | All Hours

Staffing Pattern (as a percentage of total hours)	Employee			Contractor		
Count of time studies	7			111		
Providing direct services	93.2%	93.2%	100.0%	93.8%	94.1%	94.1%
Providing other billable services	6.8%	6.8%	0.0%	0.2%	0.0%	0.0%
Paid travel time (not transporting clients); (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Participating in individual planning meetings (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Participating in individual assessments (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Developing a support plan on behalf of individuals (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Program preparation (set-up or clean-up; non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Performing collateral contacts (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Recordkeeping/ reporting writing (non-billable)	0.0%	0.0%	0.0%	6.0%	5.9%	5.9%
Employer time (e.g., staff meetings, receiving supervision)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Time 'lost' due to missed appointments	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Receiving training (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Paid break	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Time off (paid)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Time off (unpaid)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Performing other non-billable activities	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Respite - Individual or Group (DD Waiver) | All Regions | All Hours

Staffing Pattern (as a percentage of total hours)	Employee			Contractor		
Count of time studies	15			31		
Providing direct services	91.7%	96.9%	100.0%	95.6%	97.4%	100.0%
Providing other billable services	8.3%	3.1%	0.0%	0.5%	0.0%	0.0%
Paid travel time (not transporting clients); (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Participating in individual planning meetings (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Participating in individual assessments (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Developing a support plan on behalf of individuals (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Program preparation (set-up or clean-up; non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Performing collateral contacts (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Recordkeeping/ reporting writing (non-billable)	0.0%	0.0%	0.0%	3.8%	2.6%	0.0%
Employer time (e.g., staff meetings, receiving supervision)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Time 'lost' due to missed appointments	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Receiving training (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Paid break	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Time off (paid)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Time off (unpaid)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Performing other non-billable activities	0.0%	0.0%	0.0%	0.1%	0.0%	0.0%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division

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Respite Standard (Mi Via Waiver) | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor		
	0			0		
Count of time studies						
Providing direct services						
Providing other billable services						
Paid travel time (not transporting clients); (non-billable)						
Participating in individual planning meetings (non-billable)						
Participating in individual assessments (non-billable)						
Developing a support plan on behalf of individuals (non-billable)						
Program preparation (set-up or clean-up; non-billable)						
Performing collateral contacts (non-billable)						
Recordkeeping/ reporting writing (non-billable)						
Employer time (e.g., staff meetings, receiving supervision)						
Time 'lost' due to missed appointments						
Receiving training (non-billable)						
Paid break						
Time off (paid)						
Time off (unpaid)						
Performing other non-billable activities						
Total		0.0%	0.0%	0.0%	0.0%	0.0%

Respite - Home Health Aide (Medically Fragile Waiver) | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor		
	1			0		
Count of time studies						
Providing direct services		100.0%	100.0%	100.0%		
Providing other billable services		0.0%	0.0%	0.0%		
Paid travel time (not transporting clients); (non-billable)		0.0%	0.0%	0.0%		
Participating in individual planning meetings (non-billable)		0.0%	0.0%	0.0%		
Participating in individual assessments (non-billable)		0.0%	0.0%	0.0%		
Developing a support plan on behalf of individuals (non-billable)		0.0%	0.0%	0.0%		
Program preparation (set-up or clean-up; non-billable)		0.0%	0.0%	0.0%		
Performing collateral contacts (non-billable)		0.0%	0.0%	0.0%		
Recordkeeping/ reporting writing (non-billable)		0.0%	0.0%	0.0%		
Employer time (e.g., staff meetings, receiving supervision)		0.0%	0.0%	0.0%		
Time 'lost' due to missed appointments		0.0%	0.0%	0.0%		
Receiving training (non-billable)		0.0%	0.0%	0.0%		
Paid break		0.0%	0.0%	0.0%		
Time off (paid)		0.0%	0.0%	0.0%		
Time off (unpaid)		0.0%	0.0%	0.0%		
Performing other non-billable activities		0.0%	0.0%	0.0%		
Total		100.0%	100.0%	100.0%	0.0%	0.0%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
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	Average w/ Outliers	Average w/o Outliers	Median		Average w/ Outliers	Average w/o Outliers	Median
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Respite - LPN (Medically Fragile Waiver or Mi Via Waiver) | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor		
	0			0		
Count of time studies						
Providing direct services						
Providing other billable services						
Paid travel time (not transporting clients); (non-billable)						
Participating in individual planning meetings (non-billable)						
Participating in individual assessments (non-billable)						
Developing a support plan on behalf of individuals (non-billable)						
Program preparation (set-up or clean-up; non-billable)						
Performing collateral contacts (non-billable)						
Recordkeeping/ reporting writing (non-billable)						
Employer time (e.g., staff meetings, receiving supervision)						
Time 'lost' due to missed appointments						
Receiving training (non-billable)						
Paid break						
Time off (paid)						
Time off (unpaid)						
Performing other non-billable activities						
Total		0.0%	0.0%	0.0%	0.0%	0.0%

Respite - RN (Medically Fragile Waiver or Mi Via Waiver) | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor		
	1			0		
Count of time studies						
Providing direct services		100.0%	100.0%	100.0%		
Providing other billable services		0.0%	0.0%	0.0%		
Paid travel time (not transporting clients); (non-billable)		0.0%	0.0%	0.0%		
Participating in individual planning meetings (non-billable)		0.0%	0.0%	0.0%		
Participating in individual assessments (non-billable)		0.0%	0.0%	0.0%		
Developing a support plan on behalf of individuals (non-billable)		0.0%	0.0%	0.0%		
Program preparation (set-up or clean-up; non-billable)		0.0%	0.0%	0.0%		
Performing collateral contacts (non-billable)		0.0%	0.0%	0.0%		
Recordkeeping/ reporting writing (non-billable)		0.0%	0.0%	0.0%		
Employer time (e.g., staff meetings, receiving supervision)		0.0%	0.0%	0.0%		
Time 'lost' due to missed appointments		0.0%	0.0%	0.0%		
Receiving training (non-billable)		0.0%	0.0%	0.0%		
Paid break		0.0%	0.0%	0.0%		
Time off (paid)		0.0%	0.0%	0.0%		
Time off (unpaid)		0.0%	0.0%	0.0%		
Performing other non-billable activities		0.0%	0.0%	0.0%		
Total		100.0%	100.0%	100.0%	0.0%	0.0%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
 prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division

	Average w/ Outliers	Average w/o Outliers	Median		Average w/ Outliers	Average w/o Outliers	Median
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Crisis Support | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor			
Count of time studies	0			0			
Providing direct services							
Providing other billable services							
Paid travel time (not transporting clients); (non-billable)							
Participating in individual planning meetings (non-billable)							
Participating in individual assessments (non-billable)							
Developing a support plan on behalf of individuals (non-billable)							
Program preparation (set-up or clean-up; non-billable)							
Performing collateral contacts (non-billable)							
Recordkeeping/ reporting writing (non-billable)							
Employer time (e.g., staff meetings, receiving supervision)							
Time 'lost' due to missed appointments							
Receiving training (non-billable)							
Paid break							
Time off (paid)							
Time off (unpaid)							
Performing other non-billable activities							
Total		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

Community Direct Support (Mi Via Waiver) | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor			
Count of time studies	51			136			
Providing direct services		94.5%	98.0%	100.0%	98.6%	99.9%	100.0%
Providing other billable services		4.6%	2.0%	0.0%	0.9%	0.1%	0.0%
Paid travel time (not transporting clients); (non-billable)		0.0%	0.0%	0.0%	0.2%	0.0%	0.0%
Participating in individual planning meetings (non-billable)		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Participating in individual assessments (non-billable)		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Developing a support plan on behalf of individuals (non-billable)		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Program preparation (set-up or clean-up; non-billable)		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Performing collateral contacts (non-billable)		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Recordkeeping/ reporting writing (non-billable)		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Employer time (e.g., staff meetings, receiving supervision)		0.9%	0.0%	0.0%	0.0%	0.0%	0.0%
Time 'lost' due to missed appointments		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Receiving training (non-billable)		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Paid break		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Time off (paid)		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Time off (unpaid)		0.0%	0.0%	0.0%	0.1%	0.0%	0.0%
Performing other non-billable activities		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Total		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division

	Average w/ Outliers	Average w/o Outliers	Median		Average w/ Outliers	Average w/o Outliers	Median
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Customized Community Group Supports (Mi Via Waiver) | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor			
Count of time studies	13			0			
Providing direct services		59.9%	69.8%	78.5%			
Providing other billable services		8.5%	7.1%	9.5%			
Paid travel time (not transporting clients); (non-billable)		1.0%	0.2%	0.0%			
Participating in individual planning meetings (non-billable)		0.0%	0.0%	0.0%			
Participating in individual assessments (non-billable)		0.0%	0.0%	0.0%			
Developing a support plan on behalf of individuals (non-billable)		0.0%	0.0%	0.0%			
Program preparation (set-up or clean-up; non-billable)		7.6%	8.2%	7.8%			
Performing collateral contacts (non-billable)		0.0%	0.0%	0.0%			
Recordkeeping/ reporting writing (non-billable)		4.4%	4.8%	4.2%			
Employer time (e.g., staff meetings, receiving supervision)		1.8%	2.0%	0.0%			
Time 'lost' due to missed appointments		0.0%	0.0%	0.0%			
Receiving training (non-billable)		1.4%	1.1%	0.0%			
Paid break		0.3%	0.0%	0.0%			
Time off (paid)		0.7%	0.0%	0.0%			
Time off (unpaid)		1.5%	0.2%	0.0%			
Performing other non-billable activities		12.9%	6.5%	0.0%			
Total		100.0%	100.0%	100.0%	0.0%	0.0%	0.0%

Customized Community Support, Group | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor			
Count of time studies	125			12			
Providing direct services		69.5%	77.3%	95.0%	93.1%	92.4%	92.7%
Providing other billable services		12.3%	10.9%	0.4%	0.0%	0.0%	0.0%
Paid travel time (not transporting clients); (non-billable)		0.6%	0.3%	0.0%	0.0%	0.0%	0.0%
Participating in individual planning meetings (non-billable)		0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
Participating in individual assessments (non-billable)		0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
Developing a support plan on behalf of individuals (non-billable)		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Program preparation (set-up or clean-up; non-billable)		3.2%	2.7%	0.5%	0.0%	0.0%	0.0%
Performing collateral contacts (non-billable)		0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
Recordkeeping/ reporting writing (non-billable)		5.0%	3.7%	4.1%	6.9%	7.6%	7.3%
Employer time (e.g., staff meetings, receiving supervision)		1.6%	1.5%	0.0%	0.0%	0.0%	0.0%
Time 'lost' due to missed appointments		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Receiving training (non-billable)		2.3%	1.4%	0.0%	0.0%	0.0%	0.0%
Paid break		0.3%	0.0%	0.0%	0.0%	0.0%	0.0%
Time off (paid)		1.1%	0.2%	0.0%	0.0%	0.0%	0.0%
Time off (unpaid)		0.3%	0.0%	0.0%	0.0%	0.0%	0.0%
Performing other non-billable activities		3.5%	1.9%	0.0%	0.0%	0.0%	0.0%
Total		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
 prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division

	Average w/ Outliers	Average w/o Outliers	Median		Average w/ Outliers	Average w/o Outliers	Median
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Customized Community Support, Individual | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor		
Count of time studies	227			146		
Providing direct services	77.4%	86.8%	100.0%	91.7%	93.5%	92.8%
Providing other billable services	11.4%	9.0%	0.0%	0.8%	0.0%	0.0%
Paid travel time (not transporting clients); (non-billable)	0.9%	0.3%	0.0%	0.1%	0.0%	0.0%
Participating in individual planning meetings (non-billable)	0.1%	0.0%	0.0%	0.1%	0.0%	0.0%
Participating in individual assessments (non-billable)	0.3%	0.0%	0.0%	0.0%	0.0%	0.0%
Developing a support plan on behalf of individuals (non-billable)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Program preparation (set-up or clean-up; non-billable)	0.6%	0.2%	0.0%	0.0%	0.0%	0.0%
Performing collateral contacts (non-billable)	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
Recordkeeping/ reporting writing (non-billable)	2.9%	2.2%	0.0%	7.2%	6.5%	7.2%
Employer time (e.g., staff meetings, receiving supervision)	0.4%	0.1%	0.0%	0.0%	0.0%	0.0%
Time 'lost' due to missed appointments	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Receiving training (non-billable)	0.7%	0.3%	0.0%	0.0%	0.0%	0.0%
Paid break	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Time off (paid)	0.5%	0.1%	0.0%	0.0%	0.0%	0.0%
Time off (unpaid)	1.4%	0.2%	0.0%	0.0%	0.0%	0.0%
Performing other non-billable activities	3.3%	0.6%	0.0%	0.0%	0.0%	0.0%
Total		100.0%	100.0%		100.0%	100.0%

Comm. Int. Employment - Group | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor		
Count of time studies	30			0		
Providing direct services	83.7%	86.8%	90.3%			
Providing other billable services	0.0%	0.0%	0.0%			
Paid travel time (not transporting clients); (non-billable)	0.0%	0.0%	0.0%			
Participating in individual planning meetings (non-billable)	0.0%	0.0%	0.0%			
Participating in individual assessments (non-billable)	0.0%	0.0%	0.0%			
Developing a support plan on behalf of individuals (non-billable)	0.0%	0.0%	0.0%			
Program preparation (set-up or clean-up; non-billable)	7.6%	7.9%	9.7%			
Performing collateral contacts (non-billable)	0.0%	0.0%	0.0%			
Recordkeeping/ reporting writing (non-billable)	2.8%	2.6%	0.0%			
Employer time (e.g., staff meetings, receiving supervision)	0.0%	0.0%	0.0%			
Time 'lost' due to missed appointments	0.0%	0.0%	0.0%			
Receiving training (non-billable)	0.0%	0.0%	0.0%			
Paid break	0.0%	0.0%	0.0%			
Time off (paid)	0.0%	0.0%	0.0%			
Time off (unpaid)	2.6%	2.6%	0.0%			
Performing other non-billable activities	3.3%	0.0%	0.0%			
Total		100.0%	100.0%		0.0%	0.0%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division

	Average w/ Outliers	Average w/o Outliers	Median		Average w/ Outliers	Average w/o Outliers	Median
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Comm. Int. Employment - Coaching/ Maintenance/ Intensive | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor		
Count of time studies	45			0		
Providing direct services	71.4%	82.0%	96.3%			
Providing other billable services	5.9%	4.5%	0.0%			
Paid travel time (not transporting clients); (non-billable)	2.6%	2.4%	0.0%			
Participating in individual planning meetings (non-billable)	0.4%	0.1%	0.0%			
Participating in individual assessments (non-billable)	0.4%	0.1%	0.0%			
Developing a support plan on behalf of individuals (non-billable)	0.5%	0.1%	0.0%			
Program preparation (set-up or clean-up; non-billable)	0.8%	0.3%	0.0%			
Performing collateral contacts (non-billable)	0.2%	0.1%	0.0%			
Recordkeeping/ reporting writing (non-billable)	4.3%	4.4%	3.7%			
Employer time (e.g., staff meetings, receiving supervision)	1.4%	0.8%	0.0%			
Time 'lost' due to missed appointments	0.0%	0.0%	0.0%			
Receiving training (non-billable)	7.0%	3.8%	0.0%			
Paid break	0.4%	0.3%	0.0%			
Time off (paid)	0.5%	0.0%	0.0%			
Time off (unpaid)	0.7%	0.3%	0.0%			
Performing other non-billable activities	3.4%	1.0%	0.0%			
Total	100.0%	100.0%	100.0%	0.0%	0.0%	0.0%

Comm. Int. Employment - Job Development | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor		
Count of time studies	0			0		
Providing direct services						
Providing other billable services						
Paid travel time (not transporting clients); (non-billable)						
Participating in individual planning meetings (non-billable)						
Participating in individual assessments (non-billable)						
Developing a support plan on behalf of individuals (non-billable)						
Program preparation (set-up or clean-up; non-billable)						
Performing collateral contacts (non-billable)						
Recordkeeping/ reporting writing (non-billable)						
Employer time (e.g., staff meetings, receiving supervision)						
Time 'lost' due to missed appointments						
Receiving training (non-billable)						
Paid break						
Time off (paid)						
Time off (unpaid)						
Performing other non-billable activities						
Total	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division

	Average w/ Outliers	Average w/o Outliers	Median		Average w/ Outliers	Average w/o Outliers	Median
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Comm. Int. Employment - Self Employment | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor			
Count of time studies	2			0			
Providing direct services		29.0%	29.0%	29.0%			
Providing other billable services		34.3%	34.3%	34.3%			
Paid travel time (not transporting clients); (non-billable)		1.9%	1.9%	1.9%			
Participating in individual planning meetings (non-billable)		0.0%	0.0%	0.0%			
Participating in individual assessments (non-billable)		0.0%	0.0%	0.0%			
Developing a support plan on behalf of individuals (non-billable)		0.0%	0.0%	0.0%			
Program preparation (set-up or clean-up; non-billable)		0.0%	0.0%	0.0%			
Performing collateral contacts (non-billable)		0.3%	0.3%	0.3%			
Recordkeeping/ reporting writing (non-billable)		0.0%	0.0%	0.0%			
Employer time (e.g., staff meetings, receiving supervision)		2.2%	2.2%	2.2%			
Time 'lost' due to missed appointments		0.0%	0.0%	0.0%			
Receiving training (non-billable)		0.3%	0.3%	0.3%			
Paid break		0.3%	0.3%	0.3%			
Time off (paid)		1.3%	1.3%	1.3%			
Time off (unpaid)		9.1%	9.1%	9.1%			
Performing other non-billable activities		21.3%	21.3%	21.3%			
Total		100.0%	100.0%	100.0%	0.0%	0.0%	0.0%

Employment Supports (includes Job Coach) - (Mi Via Waiver) | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor			
Count of time studies	3			0			
Providing direct services		61.0%	61.0%	64.0%			
Providing other billable services		11.1%	11.1%	13.4%			
Paid travel time (not transporting clients); (non-billable)		0.0%	0.0%	0.0%			
Participating in individual planning meetings (non-billable)		0.0%	0.0%	0.0%			
Participating in individual assessments (non-billable)		0.0%	0.0%	0.0%			
Developing a support plan on behalf of individuals (non-billable)		0.0%	0.0%	0.0%			
Program preparation (set-up or clean-up; non-billable)		0.4%	0.4%	0.0%			
Performing collateral contacts (non-billable)		0.0%	0.0%	0.0%			
Recordkeeping/ reporting writing (non-billable)		2.4%	2.4%	3.0%			
Employer time (e.g., staff meetings, receiving supervision)		0.4%	0.4%	0.0%			
Time 'lost' due to missed appointments		0.0%	0.0%	0.0%			
Receiving training (non-billable)		24.7%	24.7%	19.6%			
Paid break		0.0%	0.0%	0.0%			
Time off (paid)		0.0%	0.0%	0.0%			
Time off (unpaid)		0.0%	0.0%	0.0%			
Performing other non-billable activities		0.0%	0.0%	0.0%			
Total		100.0%	100.0%	100.0%	0.0%	0.0%	0.0%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
 prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division

	Average w/ Outliers	Average w/o Outliers	Median		Average w/ Outliers	Average w/o Outliers	Median
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Job Developer (Mi Via Waiver) | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor			
Count of time studies	0			0			
Providing direct services							
Providing other billable services							
Paid travel time (not transporting clients); (non-billable)							
Participating in individual planning meetings (non-billable)							
Participating in individual assessments (non-billable)							
Developing a support plan on behalf of individuals (non-billable)							
Program preparation (set-up or clean-up; non-billable)							
Performing collateral contacts (non-billable)							
Recordkeeping/ reporting writing (non-billable)							
Employer time (e.g., staff meetings, receiving supervision)							
Time 'lost' due to missed appointments							
Receiving training (non-billable)							
Paid break							
Time off (paid)							
Time off (unpaid)							
Performing other non-billable activities							
Total		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

Physical Therapy | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor			
Count of time studies	14			35			
Providing direct services		69.8%	76.3%	83.9%	53.4%	58.8%	65.9%
Providing other billable services		1.4%	0.6%	0.0%	2.0%	1.3%	0.0%
Paid travel time (not transporting clients); (non-billable)		10.7%	11.7%	15.8%	15.7%	16.0%	19.8%
Participating in individual planning meetings (non-billable)		0.2%	0.1%	0.0%	0.2%	0.0%	0.0%
Participating in individual assessments (non-billable)		0.1%	0.0%	0.0%	0.3%	0.1%	0.0%
Developing a support plan on behalf of individuals (non-billable)		0.2%	0.1%	0.0%	0.9%	0.8%	0.0%
Program preparation (set-up or clean-up; non-billable)		1.2%	0.8%	0.0%	0.6%	0.2%	0.0%
Performing collateral contacts (non-billable)		2.4%	2.0%	0.0%	1.8%	1.2%	0.0%
Recordkeeping/ reporting writing (non-billable)		4.6%	2.4%	0.0%	8.6%	9.1%	10.1%
Employer time (e.g., staff meetings, receiving supervision)		0.4%	0.1%	0.0%	0.6%	0.2%	0.0%
Time 'lost' due to missed appointments		0.5%	0.2%	0.0%	2.2%	1.3%	0.0%
Receiving training (non-billable)		0.0%	0.0%	0.0%	2.1%	0.8%	0.0%
Paid break		0.0%	0.0%	0.0%	0.1%	0.0%	0.0%
Time off (paid)		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Time off (unpaid)		3.3%	1.7%	0.0%	3.1%	1.6%	0.0%
Performing other non-billable activities		5.2%	4.0%	0.3%	8.4%	8.6%	4.1%
Total		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division

	Average w/ Outliers	Average w/o Outliers	Median		Average w/ Outliers	Average w/o Outliers	Median
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Physical Therapy Assistant | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor				
Count of time studies	3			18				
Providing direct services		42.0%	42.0%	51.9%		52.3%	56.7%	61.1%
Providing other billable services		0.4%	0.4%	0.0%		0.2%	0.1%	0.0%
Paid travel time (not transporting clients); (non-billable)		17.3%	17.3%	17.3%		18.4%	19.2%	22.9%
Participating in individual planning meetings (non-billable)		0.1%	0.1%	0.0%		0.3%	0.1%	0.0%
Participating in individual assessments (non-billable)		0.0%	0.0%	0.0%		0.1%	0.0%	0.0%
Developing a support plan on behalf of individuals (non-billable)		0.1%	0.1%	0.0%		0.6%	0.3%	0.0%
Program preparation (set-up or clean-up; non-billable)		2.5%	2.5%	4.3%		0.9%	0.5%	0.0%
Performing collateral contacts (non-billable)		6.9%	6.9%	5.4%		2.4%	1.6%	0.5%
Recordkeeping/ reporting writing (non-billable)		10.5%	10.5%	14.8%		9.0%	10.4%	9.9%
Employer time (e.g., staff meetings, receiving supervision)		0.1%	0.1%	0.0%		0.6%	0.4%	0.0%
Time 'lost' due to missed appointments		0.9%	0.9%	0.3%		4.1%	3.1%	3.2%
Receiving training (non-billable)		0.0%	0.0%	0.0%		0.0%	0.0%	0.0%
Paid break		0.0%	0.0%	0.0%		1.1%	0.0%	0.0%
Time off (paid)		0.0%	0.0%	0.0%		0.1%	0.1%	0.0%
Time off (unpaid)		3.7%	3.7%	0.3%		2.0%	0.3%	0.0%
Performing other non-billable activities		15.4%	15.4%	5.8%		7.7%	7.3%	2.4%
Total		100.0%	100.0%	100.0%		100.0%	100.0%	100.0%

Occupational Therapy | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor				
Count of time studies	20			36				
Providing direct services		52.8%	61.9%	62.3%		52.1%	57.6%	60.8%
Providing other billable services		2.5%	0.6%	0.0%		1.9%	1.1%	0.0%
Paid travel time (not transporting clients); (non-billable)		11.3%	13.2%	15.9%		12.5%	13.9%	16.9%
Participating in individual planning meetings (non-billable)		0.6%	0.2%	0.0%		0.5%	0.3%	0.0%
Participating in individual assessments (non-billable)		0.0%	0.0%	0.0%		0.1%	0.0%	0.0%
Developing a support plan on behalf of individuals (non-billable)		1.3%	0.8%	0.0%		0.9%	0.5%	0.0%
Program preparation (set-up or clean-up; non-billable)		4.1%	3.9%	4.1%		1.9%	1.3%	0.3%
Performing collateral contacts (non-billable)		1.8%	1.6%	0.0%		5.2%	4.3%	4.7%
Recordkeeping/ reporting writing (non-billable)		9.2%	9.8%	13.5%		11.5%	11.8%	14.3%
Employer time (e.g., staff meetings, receiving supervision)		0.1%	0.0%	0.0%		0.5%	0.2%	0.0%
Time 'lost' due to missed appointments		2.0%	1.1%	0.7%		1.0%	0.9%	0.0%
Receiving training (non-billable)		3.6%	0.0%	0.0%		1.8%	1.0%	0.0%
Paid break		0.0%	0.0%	0.0%		0.1%	0.0%	0.0%
Time off (paid)		0.5%	0.2%	0.0%		0.7%	0.1%	0.0%
Time off (unpaid)		4.2%	1.3%	0.0%		3.8%	1.8%	0.0%
Performing other non-billable activities		5.9%	5.3%	3.4%		5.6%	5.1%	2.9%
Total		100.0%	100.0%	100.0%		100.0%	100.0%	100.0%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division

	Average w/ Outliers	Average w/o Outliers	Median		Average w/ Outliers	Average w/o Outliers	Median
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Occupational Therapy Assistant | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor			
	1			15			
Count of time studies							
Providing direct services		54.7%	54.7%	54.7%	59.7%	68.3%	74.6%
Providing other billable services		0.0%	0.0%	0.0%	0.7%	0.3%	0.0%
Paid travel time (not transporting clients); (non-billable)		14.4%	14.4%	14.4%	11.8%	12.8%	6.6%
Participating in individual planning meetings (non-billable)		0.0%	0.0%	0.0%	0.4%	0.2%	0.0%
Participating in individual assessments (non-billable)		0.0%	0.0%	0.0%	0.4%	0.0%	0.0%
Developing a support plan on behalf of individuals (non-billable)		1.1%	1.1%	1.1%	0.7%	0.4%	0.0%
Program preparation (set-up or clean-up; non-billable)		4.9%	4.9%	4.9%	1.3%	0.9%	0.0%
Performing collateral contacts (non-billable)		3.5%	3.5%	3.5%	0.9%	0.6%	0.0%
Recordkeeping/ reporting writing (non-billable)		16.1%	16.1%	16.1%	9.1%	8.7%	12.9%
Employer time (e.g., staff meetings, receiving supervision)		0.7%	0.7%	0.7%	0.5%	0.3%	0.0%
Time 'lost' due to missed appointments		0.0%	0.0%	0.0%	1.5%	0.5%	0.0%
Receiving training (non-billable)		0.0%	0.0%	0.0%	0.8%	0.4%	0.0%
Paid break		0.0%	0.0%	0.0%	0.2%	0.0%	0.0%
Time off (paid)		0.0%	0.0%	0.0%	0.6%	0.2%	0.0%
Time off (unpaid)		0.0%	0.0%	0.0%	5.1%	1.2%	0.0%
Performing other non-billable activities		4.6%	4.6%	4.6%	6.2%	5.0%	5.9%
Total		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Speech Language Pathology | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor			
	51			46			
Count of time studies							
Providing direct services		55.7%	58.8%	64.1%	53.3%	57.7%	59.5%
Providing other billable services		0.9%	0.2%	0.0%	0.8%	0.2%	0.0%
Paid travel time (not transporting clients); (non-billable)		14.8%	15.5%	15.9%	14.7%	14.0%	16.5%
Participating in individual planning meetings (non-billable)		0.2%	0.1%	0.0%	0.2%	0.1%	0.0%
Participating in individual assessments (non-billable)		0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Developing a support plan on behalf of individuals (non-billable)		0.6%	0.3%	0.0%	0.9%	0.4%	0.0%
Program preparation (set-up or clean-up; non-billable)		2.8%	3.0%	2.5%	3.2%	2.8%	1.9%
Performing collateral contacts (non-billable)		3.4%	3.0%	3.1%	2.9%	2.0%	0.4%
Recordkeeping/ reporting writing (non-billable)		12.4%	12.8%	13.1%	9.4%	10.0%	10.7%
Employer time (e.g., staff meetings, receiving supervision)		0.5%	0.2%	0.0%	0.3%	0.1%	0.0%
Time 'lost' due to missed appointments		1.9%	1.6%	0.9%	2.1%	1.2%	0.0%
Receiving training (non-billable)		0.2%	0.0%	0.0%	1.2%	0.8%	0.0%
Paid break		0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
Time off (paid)		0.4%	0.0%	0.0%	0.0%	0.0%	0.0%
Time off (unpaid)		0.5%	0.2%	0.0%	0.8%	0.2%	0.0%
Performing other non-billable activities		5.5%	4.2%	0.3%	10.2%	10.5%	11.0%
Total		100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
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	Average w/ Outliers	Average w/o Outliers	Median		Average w/ Outliers	Average w/o Outliers	Median
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Adult/ Private Duty Nursing Services | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor		
Count of time studies	47			3		
Providing direct services	76.4%	90.6%	100.0%	100.0%	100.0%	100.0%
Providing other billable services	0.9%	0.1%	0.0%	0.0%	0.0%	0.0%
Paid travel time (not transporting clients); (non-billable)	2.4%	1.4%	0.0%	0.0%	0.0%	0.0%
Participating in individual planning meetings (non-billable)	0.4%	0.2%	0.0%	0.0%	0.0%	0.0%
Participating in individual assessments (non-billable)	0.5%	0.2%	0.0%	0.0%	0.0%	0.0%
Developing a support plan on behalf of individuals (non-billable)	0.3%	0.1%	0.0%	0.0%	0.0%	0.0%
Program preparation (set-up or clean-up; non-billable)	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
Performing collateral contacts (non-billable)	1.6%	0.3%	0.0%	0.0%	0.0%	0.0%
Recordkeeping/ reporting writing (non-billable)	5.0%	2.5%	0.0%	0.0%	0.0%	0.0%
Employer time (e.g., staff meetings, receiving supervision)	1.2%	0.3%	0.0%	0.0%	0.0%	0.0%
Time 'lost' due to missed appointments	0.1%	0.0%	0.0%	0.0%	0.0%	0.0%
Receiving training (non-billable)	0.4%	0.1%	0.0%	0.0%	0.0%	0.0%
Paid break	0.3%	0.1%	0.0%	0.0%	0.0%	0.0%
Time off (paid)	0.3%	0.0%	0.0%	0.0%	0.0%	0.0%
Time off (unpaid)	1.0%	0.4%	0.0%	0.0%	0.0%	0.0%
Performing other non-billable activities	9.1%	3.7%	0.0%	0.0%	0.0%	0.0%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Behavior Support Consultation | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor		
Count of time studies	14			67		
Providing direct services	48.1%	57.5%	66.2%	53.7%	60.8%	69.8%
Providing other billable services	4.9%	4.3%	0.0%	1.1%	0.2%	0.0%
Paid travel time (not transporting clients); (non-billable)	8.4%	9.0%	13.5%	11.7%	12.8%	15.8%
Participating in individual planning meetings (non-billable)	0.3%	0.1%	0.0%	0.6%	0.3%	0.0%
Participating in individual assessments (non-billable)	0.1%	0.0%	0.0%	1.0%	0.4%	0.0%
Developing a support plan on behalf of individuals (non-billable)	0.7%	0.3%	0.0%	1.8%	0.6%	0.0%
Program preparation (set-up or clean-up; non-billable)	1.2%	1.0%	0.0%	1.1%	0.7%	0.0%
Performing collateral contacts (non-billable)	4.5%	3.1%	3.3%	2.9%	2.7%	0.9%
Recordkeeping/ reporting writing (non-billable)	9.1%	8.8%	7.3%	10.9%	11.9%	13.1%
Employer time (e.g., staff meetings, receiving supervision)	4.6%	3.9%	2.6%	1.9%	1.6%	0.0%
Time 'lost' due to missed appointments	0.7%	0.3%	0.0%	1.5%	0.9%	0.0%
Receiving training (non-billable)	1.9%	1.7%	0.0%	1.9%	0.9%	0.0%
Paid break	0.5%	0.4%	0.0%	0.1%	0.0%	0.0%
Time off (paid)	0.9%	0.0%	0.0%	0.0%	0.0%	0.0%
Time off (unpaid)	4.9%	0.7%	0.0%	3.1%	1.3%	0.0%
Performing other non-billable activities	9.3%	9.0%	7.0%	6.8%	4.9%	0.5%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
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	Average w/ Outliers	Average w/o Outliers	Median		Average w/ Outliers	Average w/o Outliers	Median
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Nutritional Counseling | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor		
Count of time studies	3			0		
Providing direct services	3.0%	3.0%	1.6%			
Providing other billable services	0.0%	0.0%	0.0%			
Paid travel time (not transporting clients); (non-billable)	3.6%	3.6%	4.5%			
Participating in individual planning meetings (non-billable)	5.7%	5.7%	8.6%			
Participating in individual assessments (non-billable)	28.6%	28.6%	10.2%			
Developing a support plan on behalf of individuals (non-billable)	21.4%	21.4%	33.3%			
Program preparation (set-up or clean-up; non-billable)	0.3%	0.3%	0.0%			
Performing collateral contacts (non-billable)	0.0%	0.0%	0.0%			
Recordkeeping/ reporting writing (non-billable)	25.0%	25.0%	31.3%			
Employer time (e.g., staff meetings, receiving supervision)	1.4%	1.4%	1.6%			
Time 'lost' due to missed appointments	0.0%	0.0%	0.0%			
Receiving training (non-billable)	0.5%	0.5%	0.0%			
Paid break	3.8%	3.8%	6.5%			
Time off (paid)	0.9%	0.9%	0.0%			
Time off (unpaid)	0.0%	0.0%	0.0%			
Performing other non-billable activities	5.7%	5.7%	2.3%			
Total	100.0%	100.0%	100.0%	0.0%	0.0%	0.0%

All Other Billable Services (not listed above) | All Regions | All Hours

<i>Staffing Pattern (as a percentage of total hours)</i>	Employee			Contractor		
Count of time studies	20			35		
Providing direct services	56.6%	70.3%	90.2%	86.6%	95.7%	100.0%
Providing other billable services	6.3%	4.2%	0.0%	2.4%	0.5%	0.0%
Paid travel time (not transporting clients); (non-billable)	2.8%	2.6%	0.0%	1.1%	0.3%	0.0%
Participating in individual planning meetings (non-billable)	1.2%	1.0%	0.0%	0.0%	0.0%	0.0%
Participating in individual assessments (non-billable)	1.0%	0.3%	0.0%	0.0%	0.0%	0.0%
Developing a support plan on behalf of individuals (non-billable)	0.6%	0.1%	0.0%	0.5%	0.0%	0.0%
Program preparation (set-up or clean-up; non-billable)	2.1%	0.9%	0.0%	0.2%	0.0%	0.0%
Performing collateral contacts (non-billable)	1.0%	0.6%	0.0%	1.6%	0.3%	0.0%
Recordkeeping/ reporting writing (non-billable)	3.8%	2.6%	0.0%	2.1%	1.2%	0.0%
Employer time (e.g., staff meetings, receiving supervision)	2.1%	1.7%	0.4%	0.1%	0.0%	0.0%
Time 'lost' due to missed appointments	2.0%	0.7%	0.0%	0.0%	0.0%	0.0%
Receiving training (non-billable)	2.2%	1.7%	0.0%	0.2%	0.0%	0.0%
Paid break	0.9%	0.5%	0.0%	0.6%	0.1%	0.0%
Time off (paid)	0.4%	0.2%	0.0%	0.1%	0.0%	0.0%
Time off (unpaid)	4.6%	1.6%	0.0%	0.0%	0.0%	0.0%
Performing other non-billable activities	12.4%	11.0%	9.4%	4.5%	2.0%	0.0%
Total	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
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Time Study Count	Average w/ Outliers	Average w/o Outliers	Median	Time Study Count	Average w/ Outliers	Average w/o Outliers	Median
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Average Daily Miles Driven by Service | All Regions

	Employee				Contractor			
Supported Living/ Intensive Medical Living Services	221	20	16	14	7	39	39	12
Customized In-Home Supports	32	37	30	26	6	27	16	20
Home Health Aide	0				0			
Homemaker/ Direct Support (Mi Via Waiver)	0				0			
In-Home Living Supports (Mi Via Waiver)	2	17	17	17	1	89	89	89
Respite - Individual or Group (DD Waiver)	5	33	33	12	13	31	27	27
Respite Standard (Mi Via Waiver)	0				0			
Respite - Home Health Aide (Medically Fragile Waiver)	0				0			
Respite - LPN (Medically Fragile Waiver or Mi Via Waiver)	0				0			
Respite - RN (Medically Fragile Waiver or Mi Via Waiver)	0				0			
Crisis Support	0				0			
Community Direct Support (Mi Via Waiver)	21	53	48	51	30	34	20	14
Customized Community Group Supports (Mi Via Waiver)	4	31	31	26	0			
Customized Community Support, Group	48	49	39	32	1	27	27	27
Customized Community Support, Individual	172	37	32	28	32	32	28	27
Comm. Int. Employment - Group	0				0			
Comm. Int. Employment - Coaching/ Maintenance/ Intensive	18	39	35	27	0			
Comm. Int. Employment - Job Development	0				0			
Comm. Int. Employment - Self Employment	2	25	25	25	0			
Employment Supports (includes Job Coach) - (Mi Via Waiver)	0				0			
Job Developer (Mi Via Waiver)	0				0			
Physical Therapy	11	41	34	28	34	57	37	33
Physical Therapy Assistant	3	58	58	43	18	42	39	40
Occupational Therapy	17	45	40	30	33	36	32	30
Occupational Therapy Assistant	1	18	18	18	14	67	50	38
Speech Language Pathology	46	45	33	30	42	50	33	33
Adult/ Private Duty Nursing Services	14	31	22	26	0			
Behavior Support Consultation	12	54	54	48	63	47	40	33
Nutritional Counseling	2	5	5	5	0			
All Other Billable Services (not listed above)	17	48	48	42	14	37	24	23

**Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
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Average Mileage per Trip by Service

Ct. Trips	Average w/ Outliers	Average w/o Outliers	Median
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All Regions				
Supported Living/ Intensive Medical Living Services	3,583	8	6	4
Customized In-Home Supports	589	8	6	4
Home Health Aide	0	-	-	-
Homemaker/ Direct Support (Mi Via Waiver)	58	4	3	2
In-Home Living Supports (Mi Via Waiver)	127	5	4	3
Respite - Individual or Group (DD Waiver)	75	6	4	3
Community Direct Support (Mi Via Waiver)	466	8	6	4
Customized Community Group Supports (Mi Via Waiver)	115	11	8	4
Customized Community Support, Individual	4,874	8	6	4
Customized Community Support, Group	1,893	9	5	4
Employment Supports (includes Job Coach) - (Mi Via Waiver)	44	9	7	7
Comm. Int. Employment - Coaching/ Maintenance/ Intensive	704	10	6	4
Comm. Int. Employment - Self Employment	41	8	6	6
Physical Therapy	1,173	8	6	4
Physical Therapy Assistant	572	10	6	4
Occupational Therapy	1,058	8	5	4
Occupational Therapy Assistant	305	7	5	3
Speech Language Pathology	2,005	9	5	4
Adult/ Private Duty Nursing Services	109	8	6	5
Behavior Support Consultation	1,448	8	5	3
Nutritional Counseling	26	12	7	6
All Other Billable Services (not listed above)	514	7	5	3

**Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
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Average Contractor Expenses

	Ct. Reporting	Average w/ Outliers	Average w/o Outliers	Median
Behavioral Support Consultant				
Professional liability insurance	64	\$284	\$263	\$236
Licensing, credentialing, continuing education/ training expenses	65	\$862	\$577	\$385
Information technology/ equipment	59	\$1,262	\$1,172	\$900
Service/ office supplies	51	\$1,045	\$733	\$427
Travel and transportation expenses	56	\$4,044	\$3,097	\$1,968
Bookkeeping and administrative support (including tax preparation, legal co	49	\$1,232	\$890	\$700
Other administrative expense	28	\$4,538	\$3,150	\$1,243
Utility expense	0	-	-	-
Meals	17	\$5,057	\$2,668	\$1,500
Subscriptions and memberships	0	-	-	-
Office (rent/ furniture)	12	\$1,552	\$1,552	\$1,622
Gifts	0	-	-	-
Health insurance	9	\$1,950	\$1,514	\$1,570
Other insurance	0	-	-	-
Miscellaneous	2	\$72,933	\$72,933	\$72,933
Other benefits (dental, retirement, etc.)	0	-	-	-
Taxes	0	-	-	-
Work Uniforms/ Clothing	0	-	-	-
Activity fees/ Client reinforcers	0	-	-	-
Total Expenses	66	\$13,392	\$10,801	\$5,647

**Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
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Average Contractor Expenses

Ct. Reporting	Average w/ Outliers	Average w/o Outliers	Median
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Physical Therapist

Professional liability insurance	31	\$761	\$714	\$700
Licensing, credentialing, continuing education/ training expenses	32	\$972	\$766	\$550
Information technology/ equipment	30	\$1,850	\$1,586	\$1,350
Service/ office supplies	27	\$1,440	\$921	\$729
Travel and transportation expenses	29	\$7,262	\$6,186	\$3,884
Bookkeeping and administrative support (including tax preparation, legal co	29	\$1,896	\$1,471	\$1,112
Other administrative expense	16	\$20,535	\$6,887	\$3,600
Utility expense	0	-	-	-
Meals	13	\$2,800	\$2,800	\$2,500
Subscriptions and memberships	0	-	-	-
Office (rent/ furniture)	13	\$7,344	\$2,502	\$780
Gifts	0	-	-	-
Health insurance	6	\$7,507	\$1,011	\$888
Other insurance	0	-	-	-
Miscellaneous	3	\$787	\$787	\$687
Other benefits (dental, retirement, etc.)	0	-	-	-
Taxes	0	-	-	-
Work Uniforms/ Clothing	0	-	-	-
Activity fees/ Client reinforcers	0	-	-	-
Total Expenses	33	\$27,954	\$19,616	\$14,878

**Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
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Average Contractor Expenses

Ct. Reporting	Average w/ Outliers	Average w/o Outliers	Median
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Speech Language Pathologist

Professional liability insurance	43	\$235	\$189	\$129
Licensing, credentialing, continuing education/ training expenses	44	\$706	\$573	\$600
Information technology/ equipment	37	\$2,506	\$1,954	\$1,500
Service/ office supplies	44	\$1,582	\$1,460	\$500
Travel and transportation expenses	39	\$5,460	\$4,478	\$3,500
Bookkeeping and administrative support (including tax preparation, legal co	42	\$1,254	\$1,120	\$600
Other administrative expense	21	\$4,934	\$3,410	\$2,158
Utility expense	0	-	-	-
Meals	14	\$6,243	\$4,878	\$3,414
Subscriptions and memberships	0	-	-	-
Office (rent/ furniture)	10	\$7,087	\$3,654	\$3,536
Gifts	0	-	-	-
Health insurance	3	\$6,598	\$6,598	\$6,500
Other insurance	0	-	-	-
Miscellaneous	3	\$38,567	\$38,567	\$17,884
Other benefits (dental, retirement, etc.)	0	-	-	-
Taxes	0	-	-	-
Work Uniforms/ Clothing	0	-	-	-
Activity fees/ Client reinforcers	0	-	-	-
Total Expenses	46	\$18,837	\$11,809	\$9,715

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
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Average Contractor Expenses

Ct. Reporting	Average w/ Outliers	Average w/o Outliers	Median
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Occupational Therapist

Professional liability insurance	36	\$363	\$282	\$219
Licensing, credentialing, continuing education/ training expenses	39	\$1,193	\$817	\$508
Information technology/ equipment	37	\$1,307	\$1,157	\$900
Service/ office supplies	38	\$2,308	\$1,871	\$1,150
Travel and transportation expenses	38	\$3,758	\$3,514	\$3,179
Bookkeeping and administrative support (including tax preparation, legal co	32	\$1,283	\$1,024	\$750
Other administrative expense	13	\$4,248	\$4,248	\$1,200
Utility expense	0	-	-	-
Meals	12	\$8,580	\$4,227	\$2,141
Subscriptions and memberships	0	-	-	-
Office (rent/ furniture)	10	\$13,023	\$4,831	\$2,642
Gifts	0	-	-	-
Health insurance	8	\$4,826	\$4,826	\$4,057
Other insurance	0	-	-	-
Miscellaneous	4	\$601	\$601	\$549
Other benefits (dental, retirement, etc.)	0	-	-	-
Taxes	0	-	-	-
Work Uniforms/ Clothing	0	-	-	-
Activity fees/ Client reinforcers	0	-	-	-
Total Expenses	39	\$18,178	\$12,602	\$8,887

Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
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Average Contractor Expenses

Ct. Reporting	Average w/ Outliers	Average w/o Outliers	Median
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Physical Therapy Assistant

	Ct. Reporting	Average w/ Outliers	Average w/o Outliers	Median
Professional liability insurance	28	\$372	\$334	\$315
Licensing, credentialing, continuing education/ training expenses	28	\$692	\$458	\$450
Information technology/ equipment	26	\$1,782	\$1,782	\$1,888
Service/ office supplies	27	\$995	\$910	\$500
Travel and transportation expenses	27	\$7,032	\$5,617	\$5,000
Bookkeeping and administrative support (including tax preparation, legal co	24	\$861	\$712	\$595
Other administrative expense	12	\$1,701	\$1,701	\$1,600
Utility expense	0	-	-	-
Meals	7	\$1,926	\$1,926	\$1,200
Subscriptions and memberships	0	-	-	-
Office (rent/ furniture)	4	\$2,900	\$2,900	\$760
Gifts	0	-	-	-
Health insurance	2	\$1,606	\$1,606	\$1,606
Other insurance	0	-	-	-
Miscellaneous	1	\$131	\$131	\$131
Other benefits (dental, retirement, etc.)	0	-	-	-
Taxes	0	-	-	-
Work Uniforms/ Clothing	0	-	-	-
Activity fees/ Client reinforcers	0	-	-	-
Total Expenses	28	\$12,942	\$12,154	\$12,400

**Home and Community Based Services (HCBS) Rate Study: Time Study Analysis
prepared for New Mexico Health Care Authority - Developmental Disabilities Supports Division**

Average Contractor Expenses

Ct. Reporting	Average w/ Outliers	Average w/o Outliers	Median
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Occupational Therapy Assistant

	Ct. Reporting	Average w/ Outliers	Average w/o Outliers	Median
Professional liability insurance	13	\$279	\$207	\$217
Licensing, credentialing, continuing education/ training expenses	16	\$290	\$243	\$237
Information technology/ equipment	13	\$967	\$967	\$500
Service/ office supplies	14	\$1,282	\$1,282	\$1,240
Travel and transportation expenses	14	\$4,774	\$3,137	\$2,730
Bookkeeping and administrative support (including tax preparation, legal co	13	\$587	\$587	\$506
Other administrative expense	5	\$5,508	\$5,508	\$960
Utility expense	0	-	-	-
Meals	2	\$1,850	\$1,850	\$1,850
Subscriptions and memberships	0	-	-	-
Office (rent/ furniture)	2	\$330	\$330	\$330
Gifts	0	-	-	-
Health insurance	1	\$960	\$960	\$960
Other insurance	0	-	-	-
Miscellaneous	0	-	-	-
Other benefits (dental, retirement, etc.)	0	-	-	-
Taxes	0	-	-	-
Work Uniforms/ Clothing	0	-	-	-
Activity fees/ Client reinforcers	0	-	-	-
Total Expenses	16	\$9,132	\$7,358	\$5,981

Attachment 11 – Estimated Fiscal Impact of Final Proposed Rates

**Home and Community Based Services Rate Study
Fiscal Impact of Proposed Rates - Developmental Disabilities Waiver
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division**

Cost at Current Published Rates		
Paid Units	Current Published Rate	Total Cost

Total - All Services		\$487,180,323
<i>Case Management and Related</i>		
Case Management On-going	50,321	\$18,659,027
<i>Residential Services</i>		
Supported Living, Category 1 Basic Support	13,601	\$3,013,166
Supported Living, Category 2 Moderate Support	66,279	\$18,057,714
Supported Living, Category 3 Extensive Support	121,342	\$43,334,868
Supported Living Category 4 Extraordinary Medical/ Behavioral Support	229,297	\$106,299,796
Supported Living, Non-Ambulatory Stipend	569	\$280,460
Supported Living, Unknown Type	8,387	\$4,295,354
Family Living	574,441	\$110,126,084
Family Living, Jackson Class Only	4,897	\$845,810
Crisis Support (Alternative Residential Setting)	392	\$192,178
Intensive Medical Living Services	8,534	\$556,587
<i>In-Home Supports</i>		
Customized In-Home Supports, Living Independently	623,658	\$5,251,200
Customized In-Home Supports, Living with Family or Natural Supports	928,163	\$7,815,132
<i>Respite Total</i>		
Respite	859,303	\$6,410,400
Respite - Group	12,834	\$44,277

**Home and Community Based Services Rate Study
Fiscal Impact of Proposed Rates - Developmental Disabilities Waiver
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division**

Cost at Final Proposed Rates					
Paid Units	Projected Rates	Total Cost	Increase/ (Decrease) Compared to <u>Published</u> Rates	Pct. Increase/ (Decrease) Compared to Published Rates	

Total - All Services			\$593,857,131	\$106,676,807	21.9%
<i>Case Management and Related</i>			\$19,212,558	\$553,531	3.0%
Case Management On-going	50,321	\$381.80	\$19,212,558	\$553,531	3.0%
<i>Residential Services</i>			\$331,212,365	\$44,210,348	15.4%
Supported Living, Category 1 Basic Support	13,601	\$312.16	\$4,245,688	\$1,232,523	40.9%
Supported Living, Category 2 Moderate Support	66,279	\$357.54	\$23,697,394	\$5,639,680	31.2%
Supported Living, Category 3 Extensive Support	121,342	\$443.54	\$53,820,031	\$10,485,162	24.2%
Supported Living Category 4 Extraordinary Medical/ Behavioral Support	229,297	\$529.55	\$121,424,226	\$15,124,430	14.2%
Supported Living, Non-Ambulatory Stipend	569	\$124.61	\$70,903	(\$209,557)	(74.7%)
Supported Living, Unknown Type	8,387	\$512.14	\$4,295,354	\$0	0.0%
Family Living	574,441	\$203.23	\$116,743,644	\$6,617,560	6.0%
Family Living, Jackson Class Only	4,897	\$172.72	\$845,810	\$0	0.0%
Crisis Support (Alternative Residential Setting)	392	\$936.83	\$367,237	\$175,059	91.1%
Intensive Medical Living Services	8,534	\$668.16	\$5,702,077	\$5,145,490	924.5%
<i>In-Home Supports</i>			\$18,544,261	\$5,477,928	41.9%
Customized In-Home Supports, Living Independently	623,658	\$11.95	\$7,452,713	\$2,201,513	41.9%
Customized In-Home Supports, Living with Family or Natural Supports	928,163	\$11.95	\$11,091,548	\$3,276,415	41.9%
<i>Respite Total</i>			\$62,002,115	\$55,547,437	860.6%
Respite	5,355,067	\$10.96	\$58,691,539	\$52,281,139	815.6%
Respite - Group	613,070	\$5.40	\$3,310,576	\$3,266,298	7376.9%

**Home and Community Based Services Rate Study
Fiscal Impact of Proposed Rates - Developmental Disabilities Waiver
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division**

	Cost at Final Proposed Rates (Held Harmless to Losses)		
	Total Cost	Increase/ (Decrease) Compared to <u>Published</u> Rates	Pct. Increase/ (Decrease) Compared to Published Rates
Total - All Services	\$598,301,086	\$111,120,762	22.8%
<i>Case Management and Related</i>	\$19,212,558	\$553,531	3.0%
Case Management On-going	\$19,212,558	\$553,531	3.0%
<i>Residential Services</i>	\$331,421,922	\$44,419,905	15.5%
Supported Living, Category 1 Basic Support	\$4,245,688	\$1,232,523	40.9%
Supported Living, Category 2 Moderate Support	\$23,697,394	\$5,639,680	31.2%
Supported Living, Category 3 Extensive Support	\$53,820,031	\$10,485,162	24.2%
Supported Living Category 4 Extraordinary Medical/ Behavioral Support	\$121,424,226	\$15,124,430	14.2%
Supported Living, Non-Ambulatory Stipend	\$280,460	\$0	0.0%
Supported Living, Unknown Type	\$4,295,354	\$0	0.0%
Family Living	\$116,743,644	\$6,617,560	6.0%
Family Living, Jackson Class Only	\$845,810	\$0	0.0%
Crisis Support (Alternative Residential Setting)	\$367,237	\$175,059	91.1%
Intensive Medical Living Services	\$5,702,077	\$5,145,490	924.5%
<i>In-Home Supports</i>	\$18,544,261	\$5,477,928	41.9%
Customized In-Home Supports, Living Independently	\$7,452,713	\$2,201,513	41.9%
Customized In-Home Supports, Living with Family or Natural Supports	\$11,091,548	\$3,276,415	41.9%
<i>Respite Total</i>	\$62,002,115	\$55,547,437	860.6%
Respite	\$58,691,539	\$52,281,139	815.6%
Respite - Group	\$3,310,576	\$3,266,298	7376.9%

**Home and Community Based Services Rate Study
Fiscal Impact of Proposed Rates - Developmental Disabilities Waiver
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division**

Cost at Current Published Rates		
Paid Units	Current Published Rate	Total Cost

<i>Day Programs / Community Access Services</i>	\$98,340,712		
Customized Community Support, Individual	6,597,493	\$12.22	\$80,621,364
Customized Community Support, Small Group	845,989	\$6.03	\$5,101,314
Customized Community Support, Group, Category 1	1,004,479	\$2.96	\$2,973,258
Customized Community Support, Group, Category 2 Extensive Support	1,148,593	\$6.75	\$7,753,003
Customized Community Supports, Group, Jackson Class Only	280,691	\$6.29	\$1,765,546
Community Inclusion Aide	6,647	\$18.99	\$126,227

<i>Employment Supports</i>	\$5,954,138		
Community Integrated Employment, Group, Category 1	137,467	\$2.34	\$321,673
Community Integrated Employment, Group, Category 2 Extensive Support	10,102	\$3.89	\$39,297
Community Integrated Employment, Intensive	9,502	\$59.42	\$564,609
Community Integrated Employment, Job Aide	2,726	\$36.27	\$98,872
Community Integrated Employment, Job Maintenance	3,419	\$1,363.11	\$4,660,473
Community Integrated Employment, Self-Employment	16,711	\$16.11	\$269,214

<i>Professional Services - Therapies (OT/PT/SLP)</i>	\$42,170,883		
Occupational Therapy Assistant, Incentive	38,941	\$35.49	\$1,382,016
Occupational Therapy Assistant, Standard	61,869	\$27.05	\$1,673,556
Occupational Therapy, Incentive	56,422	\$52.07	\$2,937,894
Occupational Therapy, Standard	107,048	\$40.83	\$4,370,770
Physical Therapy Assistant (PTA), Incentive	39,031	\$36.47	\$1,423,461
Physical Therapy Assistant (PTA), Standard	71,755	\$27.80	\$1,994,789
Physical Therapy, Incentive	66,741	\$63.33	\$4,226,708
Physical Therapy, Standard	116,126	\$49.66	\$5,766,817
Speech, Language Pathology, Incentive	171,330	\$62.39	\$10,689,279
Speech, Language Pathology, Standard	157,482	\$48.93	\$7,705,594

Home and Community Based Services Rate Study
Fiscal Impact of Proposed Rates - Developmental Disabilities Waiver
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division

Cost at Final Proposed Rates					
Paid Units	Projected Rates	Total Cost	Increase/ (Decrease) Compared to <u>Published</u> Rates	Pct. Increase/ (Decrease) Compared to <u>Published</u> Rates	

<i>Day Programs / Community Access Services</i>			\$102,261,233	\$3,920,521	4.0%
Customized Community Support, Individual	6,597,493	\$12.30	\$81,149,164	\$527,799	0.7%
Customized Community Support, Small Group	845,989	\$7.73	\$6,539,495	\$1,438,181	28.2%
Customized Community Support, Group, Category 1	1,004,479	\$4.70	\$4,721,051	\$1,747,793	58.8%
Customized Community Support, Group, Category 2 Extensive Support	1,148,593	\$6.93	\$7,959,749	\$206,747	2.7%
Customized Community Supports, Group, Jackson Class Only	280,691	\$6.29	\$1,765,546	\$0	0.0%
Community Inclusion Aide	6,647	\$18.99	\$126,227	\$0	0.0%

<i>Employment Supports</i>			\$6,059,038	\$104,900	1.8%
Community Integrated Employment, Group, Category 1	137,467	\$4.50	\$618,602	\$296,929	92.3%
Community Integrated Employment, Group, Category 2 Extensive Support	10,102	\$6.83	\$68,997	\$29,700	75.6%
Community Integrated Employment, Intensive	9,502	\$59.31	\$563,564	(\$1,045)	(0.2%)
Community Integrated Employment, Job Aide	2,726	\$36.27	\$98,872	\$0	0.0%
Community Integrated Employment, Job Maintenance	3,419	\$1,304.82	\$4,461,180	(\$199,294)	(4.3%)
Community Integrated Employment, Self-Employment	16,711	\$14.83	\$247,824	(\$21,390)	(7.9%)

<i>Professional Services - Therapies (OT/PT/SLP)</i>			\$38,910,336	(\$3,260,547)	(7.7%)
Occupational Therapy Assistant, Incentive	38,941	\$37.07	\$1,443,543	\$61,527	4.5%
Occupational Therapy Assistant, Standard	61,869	\$27.34	\$1,691,498	\$17,942	1.1%
Occupational Therapy, Incentive	56,422	\$56.82	\$3,205,898	\$268,005	9.1%
Occupational Therapy, Standard	107,048	\$41.07	\$4,396,461	\$25,692	0.6%
Physical Therapy Assistant (PTA), Incentive	39,031	\$37.07	\$1,446,879	\$23,419	1.6%
Physical Therapy Assistant (PTA), Standard	71,755	\$27.34	\$1,961,782	(\$33,007)	(1.7%)
Physical Therapy, Incentive	66,741	\$56.82	\$3,792,224	(\$434,484)	(10.3%)
Physical Therapy, Standard	116,126	\$41.07	\$4,769,295	(\$997,522)	(17.3%)
Speech, Language Pathology, Incentive	171,330	\$56.82	\$9,734,971	(\$954,308)	(8.9%)
Speech, Language Pathology, Standard	157,482	\$41.07	\$6,467,786	(\$1,237,809)	(16.1%)

Home and Community Based Services Rate Study
Fiscal Impact of Proposed Rates - Developmental Disabilities Waiver
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division

Cost at Final Proposed Rates (Held Harmless to Losses)		
Total Cost	Increase/ (Decrease) Compared to <u>Published</u> Rates	Pct. Increase/ (Decrease) Compared to Published Rates

<i>Day Programs / Community Access Services</i>	\$102,261,233	\$3,920,521	4.0%
Customized Community Support, Individual	\$81,149,164	\$527,799	0.7%
Customized Community Support, Small Group	\$6,539,495	\$1,438,181	28.2%
Customized Community Support, Group, Category 1	\$4,721,051	\$1,747,793	58.8%
Customized Community Support, Group, Category 2 Extensive Support	\$7,959,749	\$206,747	2.7%
Customized Community Supports, Group, Jackson Class Only	\$1,765,546	\$0	0.0%
Community Inclusion Aide	\$126,227	\$0	0.0%

<i>Employment Supports</i>	\$6,280,766	\$326,629	5.5%
Community Integrated Employment, Group, Category 1	\$618,602	\$296,929	92.3%
Community Integrated Employment, Group, Category 2 Extensive Support	\$68,997	\$29,700	75.6%
Community Integrated Employment, Intensive	\$564,609	\$0	0.0%
Community Integrated Employment, Job Aide	\$98,872	\$0	0.0%
Community Integrated Employment, Job Maintenance	\$4,660,473	\$0	0.0%
Community Integrated Employment, Self-Employment	\$269,214	\$0	0.0%

<i>Professional Services - Therapies (OT/PT/SLP)</i>	\$42,567,467	\$396,583	0.9%
Occupational Therapy Assistant, Incentive	\$1,443,543	\$61,527	4.5%
Occupational Therapy Assistant, Standard	\$1,691,498	\$17,942	1.1%
Occupational Therapy, Incentive	\$3,205,898	\$268,005	9.1%
Occupational Therapy, Standard	\$4,396,461	\$25,692	0.6%
Physical Therapy Assistant (PTA), Incentive	\$1,446,879	\$23,419	1.6%
Physical Therapy Assistant (PTA), Standard	\$1,994,789	\$0	0.0%
Physical Therapy, Incentive	\$4,226,708	\$0	0.0%
Physical Therapy, Standard	\$5,766,817	\$0	0.0%
Speech, Language Pathology, Incentive	\$10,689,279	\$0	0.0%
Speech, Language Pathology, Standard	\$7,705,594	\$0	0.0%

**Home and Community Based Services Rate Study
Fiscal Impact of Proposed Rates - Developmental Disabilities Waiver
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division**

Cost at Current Published Rates		
Paid Units	Current Published Rate	Total Cost

<i>Professional Services - Nursing</i>		\$2,955,680
Adult Nursing Services, LPN	11,852	\$19.92
Adult Nursing Services, RN	91,384	\$29.76
<i>Professional Services - All Other</i>		\$11,109,370
Behavioral Support Consultation, Incentive	55,947	\$40.09
Behavioral Support Consultation, Standard	273,205	\$31.08
Nutritional Counseling	3,297	\$22.22
Preliminary Risk Screening, Incentive	4,409	\$36.35
Preliminary Risk Screening, Standard	75	\$28.37
Socialization and Sexuality Education, Incentive	129	\$1,073.76
Socialization and Sexuality Education, Standard	2	\$536.88
<i>Cost-Based Services</i>		\$1,394,611
Assistive Technology Purchasing Agent	654,126	\$1.00
Environmental Modifications	55,116	\$10.22
Fiscal Management of Adult Education Opportunities	23,921	\$1.00
Independent Living Transition	1,500	\$1.00
Remote Personal Support Technology, Installation	41,942	\$1.00
Remote Personal Support Technology, Monthly Maintenance	20,004	\$5.48
<i>Transportation</i>		\$72,876
Non-Medical Transportation Pass/Ticket	49,356	\$1.00
Non-Medical Transportation Per Mile	35,636	\$0.66

**Home and Community Based Services Rate Study
Fiscal Impact of Proposed Rates - Developmental Disabilities Waiver
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division**

Cost at Final Proposed Rates					
	Paid Units	Projected Rates	Total Cost	Increase/ (Decrease) Compared to <u>Published</u> Rates	Pct. Increase/ (Decrease) Compared to <u>Published</u> Rates
<i>Professional Services - Nursing</i>			\$2,655,672	(\$300,008)	(10.2%)
Adult Nursing Services, LPN	11,852	\$20.36	\$241,307	\$5,215	2.2%
Adult Nursing Services, RN	91,384	\$26.42	\$2,414,365	(\$305,223)	(11.2%)
<i>Professional Services - All Other</i>			\$11,529,751	\$420,381	3.8%
Behavioral Support Consultation, Incentive	55,947	\$44.69	\$2,500,271	\$257,356	11.5%
Behavioral Support Consultation, Standard	273,205	\$31.72	\$8,666,063	\$174,851	2.1%
Nutritional Counseling	3,297	\$20.95	\$69,072	(\$4,187)	(5.7%)
Preliminary Risk Screening, Incentive	4,409	\$45.02	\$198,493	\$38,226	23.9%
Preliminary Risk Screening, Standard	75	\$31.89	\$2,392	\$264	12.4%
Socialization and Sexuality Education, Incentive	129	\$716.28	\$92,400	(\$46,115)	(33.3%)
Socialization and Sexuality Education, Standard	2	\$529.68	\$1,059	(\$14)	(1.3%)
<i>Cost-Based Services</i>			\$1,394,611	\$0	0.0%
Assistive Technology Purchasing Agent	654,126	\$1.00	\$654,126	\$0	0.0%
Environmental Modifications	55,116	\$10.22	\$563,500	\$0	0.0%
Fiscal Management of Adult Education Opportunities	23,921	\$1.00	\$23,921	\$0	0.0%
Independent Living Transition	1,500	\$1.00	\$1,500	\$0	0.0%
Remote Personal Support Technology, Installation	41,942	\$1.00	\$41,942	\$0	0.0%
Remote Personal Support Technology, Monthly Maintenance	20,004	\$5.48	\$109,622	\$0	0.0%
<i>Transportation</i>			\$75,192	\$2,316	3.2%
Non-Medical Transportation Pass/Ticket	49,356	\$1.00	\$49,356	\$0	0.0%
Non-Medical Transportation Per Mile	35,636	\$0.73	\$25,836	\$2,316	9.8%

**Home and Community Based Services Rate Study
Fiscal Impact of Proposed Rates - Developmental Disabilities Waiver
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division**

Cost at Final Proposed Rates (Held Harmless to Losses)		
Total Cost	Increase/ (Decrease) Compared to <u>Published</u> Rates	Pct. Increase/ (Decrease) Compared to Published Rates

<i>Professional Services - Nursing</i>	\$2,960,895	\$5,215	0.2%
Adult Nursing Services, LPN	\$241,307	\$5,215	2.2%
Adult Nursing Services, RN	\$2,719,588	\$0	0.0%

<i>Professional Services - All Other</i>	\$11,580,067	\$470,697	4.2%
Behavioral Support Consultation, Incentive	\$2,500,271	\$257,356	11.5%
Behavioral Support Consultation, Standard	\$8,666,063	\$174,851	2.1%
Nutritional Counseling	\$73,259	\$0	0.0%
Preliminary Risk Screening, Incentive	\$198,493	\$38,226	23.9%
Preliminary Risk Screening, Standard	\$2,392	\$264	12.4%
Socialization and Sexuality Education, Incentive	\$138,515	\$0	0.0%
Socialization and Sexuality Education, Standard	\$1,074	\$0	0.0%

<i>Cost-Based Services</i>	\$1,394,611	\$0	0.0%
Assistive Technology Purchasing Agent	\$654,126	\$0	0.0%
Environmental Modifications	\$563,500	\$0	0.0%
Fiscal Management of Adult Education Opportunities	\$23,921	\$0	0.0%
Independent Living Transition	\$1,500	\$0	0.0%
Remote Personal Support Technology, Installation	\$41,942	\$0	0.0%
Remote Personal Support Technology, Monthly Maintenance	\$109,622	\$0	0.0%

<i>Transportation</i>	\$75,192	\$2,316	3.2%
Non-Medical Transportation Pass/Ticket	\$49,356	\$0	0.0%
Non-Medical Transportation Per Mile	\$25,836	\$2,316	9.8%

**Home and Community Based Services Rate Study
Fiscal Impact of Proposed Rates - Mi Via Waiver
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division**

Cost at Current Published Rates		
Paid Units	Current Published Rate	Total Cost

Total - All Services		\$254,332,459
<i>Case Management and Related</i>		
Consultant Services	37,032	\$15,060,174
<i>In-Home Supports</i>		
Home Health Aide	5,558	\$95,542
Homemaker/Direct Support	915,515	\$15,266,257
In-Home Living Supports	820,437	\$157,097,277
<i>Respite Total</i>		
Respite (Unknown Type)	31,503	\$250,134
<i>Day Programs / Community Access Services</i>		
Community Direct Support	7,995,222	\$60,591,104
Customized Community Group Supports	221,885	\$1,658,346
<i>Employment Supports</i>		
Employment Supports (includes Job Coach)	51,162	\$335,642
<i>Professional Services - Therapies (OT/PT/SLP)</i>		
Occupational Therapy	5,150	\$330,307
Physical Therapy	6,673	\$332,353
Speech/Language Pathology	6,627	\$411,676

**Home and Community Based Services Rate Study
Fiscal Impact of Proposed Rates - Mi Via Waiver
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division**

Cost at Final Proposed Rates				
Paid Units	Projected Rates	Total Cost	Increase/ (Decrease) Compared to <u>Published</u> Rates	Pct. Increase/ (Decrease) Compared to Published Rates

Total - All Services		\$257,510,551	\$3,178,092	1.2%
<i>Case Management and Related</i>		\$11,311,054	(\$3,749,120)	(24.9%)
Consultant Services	37,032	\$305.44	\$11,311,054	(\$3,749,120) (24.9%)
<i>In-Home Supports</i>		\$177,265,180	\$4,806,104	2.8%
Home Health Aide	5,558	\$50.02	\$278,011	\$182,469 191.0%
Homemaker/Direct Support	915,515	\$23.67	\$21,670,240	\$6,403,983 41.9%
In-Home Living Supports	820,437	\$189.31	\$155,316,928	(\$1,780,348) (1.1%)
<i>Respite Total</i>		\$345,273	\$95,139	38.0%
Respite (Unknown Type)	31,503	\$10.96	\$345,273	\$95,139 38.0%
<i>Day Programs / Community Access Services</i>		\$63,129,202	\$879,752	1.4%
Community Direct Support	7,995,222	\$7.63	\$61,003,544	\$412,440 0.7%
Customized Community Group Supports	221,885	\$9.58	\$2,125,658	\$467,312 28.2%
<i>Employment Supports</i>		\$645,664	\$310,022	92.4%
Employment Supports (includes Job Coach)	51,162	\$12.62	\$645,664	\$310,022 92.4%
<i>Professional Services - Therapies (OT/PT/SLP)</i>		\$1,082,973	\$8,637	0.8%
Occupational Therapy	5,150	\$65.81	\$338,922	\$8,615 2.6%
Physical Therapy	6,673	\$49.81	\$332,382	\$29 0.0%
Speech/Language Pathology	6,627	\$62.12	\$411,669	(\$7) (0.0%)

**Home and Community Based Services Rate Study
Fiscal Impact of Proposed Rates - Mi Via Waiver
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division**

	Cost at Final Proposed Rates (Held Harmless to Losses)		
	Total Cost	Increase/ (Decrease) Compared to <u>Published</u> Rates	Pct. Increase/ (Decrease) Compared to Published Rates
Total - All Services	\$263,042,758	\$8,710,300	3.4%
<i>Case Management and Related</i>	\$15,060,174	\$0	0.0%
Consultant Services	\$15,060,174	\$0	0.0%
<i>In-Home Supports</i>	\$179,045,528	\$6,586,452	3.8%
Home Health Aide	\$278,011	\$182,469	191.0%
Homemaker/Direct Support	\$21,670,240	\$6,403,983	41.9%
In-Home Living Supports	\$157,097,277	\$0	0.0%
<i>Respite Total</i>	\$345,273	\$95,139	38.0%
Respite (Unknown Type)	\$345,273	\$95,139	38.0%
<i>Day Programs / Community Access Services</i>	\$63,129,202	\$879,752	1.4%
Community Direct Support	\$61,003,544	\$412,440	0.7%
Customized Community Group Supports	\$2,125,658	\$467,312	28.2%
<i>Employment Supports</i>	\$645,664	\$310,022	92.4%
Employment Supports (includes Job Coach)	\$645,664	\$310,022	92.4%
<i>Professional Services - Therapies (OT/PT/SLP)</i>	\$1,082,980	\$8,644	0.8%
Occupational Therapy	\$338,922	\$8,615	2.6%
Physical Therapy	\$332,382	\$29	0.0%
Speech/Language Pathology	\$411,676	\$0	0.0%

**Home and Community Based Services Rate Study
Fiscal Impact of Proposed Rates - Mi Via Waiver
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division**

Cost at Current Published Rates		
Paid Units	Current Published Rate	Total Cost

<i>Professional Services - Nursing</i>			\$553,068
Private Duty Nursing – Adults- LPN	8,697	\$7.15	\$62,184
Private Duty Nursing – Adults- RN	42,760	\$11.48	\$490,885
<i>Professional Services - Specialized Therapies</i>			\$300,213
Acupuncture	966	\$24.54	\$23,701
Biofeedback	51	\$75.00	\$3,825
Chiropractic	205	\$47.04	\$9,644
Cognitive Rehab Therapy	34	\$125.00	\$4,250
Hippotherapy	4	\$85.00	\$340
Massage Therapy	7,594	\$33.71	\$255,973
Play Therapy	109	\$22.75	\$2,480
<i>Professional Services - All Other</i>			\$148,279
Behavior Support Consultation	2,608	\$56.82	\$148,175
Nutritional Counseling –Adults	4	\$26.00	\$104
<i>Cost-Based Services</i>			\$1,113,910
Environmental Modifications	100	\$3,227.95	\$322,795
Individual Directed Goods and Services	6,179	\$128.03	\$791,115
<i>Transportation</i>			\$787,286
Non-Medical Transportation Pass/Ticket	9	\$1,020.00	\$9,180
Transportation Mile	1,177,974	\$0.66	\$777,463
Transportation Trip	69	\$9.32	\$643
<i>All Other</i>			\$891
Unknown Service	12	\$74.25	\$891

**Home and Community Based Services Rate Study
Fiscal Impact of Proposed Rates - Mi Via Waiver
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division**

Cost at Final Proposed Rates				
Paid Units	Projected Rates	Total Cost	Increase/ (Decrease) Compared to <u>Published</u> Rates	Pct. Increase/ (Decrease) Compared to Published Rates

<i>Professional Services - Nursing</i>			\$1,306,790	\$753,722	136.3%
Private Duty Nursing – Adults- LPN	8,697	\$20.36	\$177,071	\$114,887	184.8%
Private Duty Nursing – Adults- RN	42,760	\$26.42	\$1,129,719	\$638,834	130.1%

<i>Professional Services - Specialized Therapies</i>			\$300,213	\$0	0.0%
Acupuncture	966	\$24.54	\$23,701	\$0	0.0%
Biofeedback	51	\$75.00	\$3,825	\$0	0.0%
Chiropractic	205	\$47.04	\$9,644	\$0	0.0%
Cognitive Rehab Therapy	34	\$125.00	\$4,250	\$0	0.0%
Hippotherapy	4	\$85.00	\$340	\$0	0.0%
Massage Therapy	7,594	\$33.71	\$255,973	\$0	0.0%
Play Therapy	109	\$22.75	\$2,480	\$0	0.0%

<i>Professional Services - All Other</i>			\$145,546	(\$2,733)	(1.8%)
Behavior Support Consultation	2,608	\$55.77	\$145,448	(\$2,727)	(1.8%)
Nutritional Counseling –Adults	4	\$24.51	\$98	(\$6)	(5.7%)

<i>Cost-Based Services</i>			\$1,113,910	\$0	0.0%
Environmental Modifications	100	\$3,227.95	\$322,795	\$0	0.0%
Individual Directed Goods and Services	6,179	\$128.03	\$791,115	\$0	0.0%

<i>Transportation</i>			\$863,854	\$76,568	9.7%
Non-Medical Transportation Pass/Ticket	9	\$1,020.00	\$9,180	\$0	0.0%
Transportation Mile	1,177,974	\$0.73	\$854,031	\$76,568	9.8%
Transportation Trip	69	\$9.32	\$643	\$0	0.0%

<i>All Other</i>			\$891	\$0	0.0%
Unknown Service	12	\$74.25	\$891	\$0	0.0%

**Home and Community Based Services Rate Study
Fiscal Impact of Proposed Rates - Mi Via Waiver
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Developmental Disabilities Supports Division**

Cost at Final Proposed Rates (Held Harmless to Losses)		
Total Cost	Increase/ (Decrease) Compared to <u>Published</u> Rates	Pct. Increase/ (Decrease) Compared to Published Rates

<i>Professional Services - Nursing</i>	\$1,306,790	\$753,722	136.3%
Private Duty Nursing – Adults- LPN	\$177,071	\$114,887	184.8%
Private Duty Nursing – Adults- RN	\$1,129,719	\$638,834	130.1%

<i>Professional Services - Specialized Therapies</i>	\$300,213	\$0	0.0%
Acupuncture	\$23,701	\$0	0.0%
Biofeedback	\$3,825	\$0	0.0%
Chiropractic	\$9,644	\$0	0.0%
Cognitive Rehab Therapy	\$4,250	\$0	0.0%
Hippotherapy	\$340	\$0	0.0%
Massage Therapy	\$255,973	\$0	0.0%
Play Therapy	\$2,480	\$0	0.0%

<i>Professional Services - All Other</i>	\$148,279	\$0	0.0%
Behavior Support Consultation	\$148,175	\$0	0.0%
Nutritional Counseling –Adults	\$104	\$0	0.0%

<i>Cost-Based Services</i>	\$1,113,910	\$0	0.0%
Environmental Modifications	\$322,795	\$0	0.0%
Individual Directed Goods and Services	\$791,115	\$0	0.0%

<i>Transportation</i>	\$863,854	\$76,568	9.7%
Non-Medical Transportation Pass/Ticket	\$9,180	\$0	0.0%
Transportation Mile	\$854,031	\$76,568	9.8%
Transportation Trip	\$643	\$0	0.0%

<i>All Other</i>	\$891	\$0	0.0%
Unknown Service	\$891	\$0	0.0%

**Home and Community Based Services Rate Study
Fiscal Impact of Proposed Rates - Medically Fragile Waiver
prepared for New Mexico Health Care Authority
Developmental Disabilities Supports Division**

Cost at Current Published Rates		
Paid Units	Current Published Rate	Total Cost

Total - All Services		\$3,361,683
<i>Case Management and Related</i>		
Case Management On-going	1,892	\$668.03
		\$1,263,913
<i>In-Home Supports</i>		
Home Health Aide	11,504	\$45.23
		\$520,326
<i>Respite Total</i>		
Respite – Home Health Aide	7,522	\$45.23
Respite – LPN	7,703	\$19.92
Respite – RN	19,355	\$29.76
		\$1,069,669
<i>Day Programs / Community Access Services</i>		
Customized Community Support (Group) - MFW	321	\$5.93
		\$1,904
<i>Professional Services - Therapies (OT/PT/SLP)</i>		
Occupational Therapy	72	\$40.83
		\$2,940
<i>Professional Services - Nursing</i>		
Private Duty Nursing – Adults- LPN	2,052	\$19.92
Private Duty Nursing – Adults- RN	7,225	\$29.76
		\$255,892
<i>Professional Services - All Other</i>		
Behavior Support Consultation	1,166	\$25.66
Behavior Support Consultation – Clinic Based	63	\$25.69
Nutritional Counseling –Adults	59	\$88.89
		\$36,783

**Home and Community Based Services Rate Study
Fiscal Impact of Proposed Rates - Medically Fragile Waiver
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Developmental Disabilities Supports Division**

Cost at Final Proposed Rates				
Paid Units	Projected Rates	Total Cost	Increase/ (Decrease) Compared to <u>Published</u> Rates	Pct. Increase/ (Decrease) Compared to Published Rates

Total - All Services		\$3,424,433	\$62,750	1.9%
<i>Case Management and Related</i>		\$1,312,272	\$48,360	3.8%
Case Management On-going	1,892	\$693.59	\$1,312,272	\$48,360 3.8%
<i>In-Home Supports</i>		\$575,430	\$55,104	10.6%
Home Health Aide	11,504	\$50.02	\$575,430	\$55,104 10.6%
<i>Respite Total</i>		\$1,044,443	(\$25,226)	(2.4%)
Respite – Home Health Aide	7,522	\$50.02	\$376,250	\$36,030 10.6%
Respite – LPN	7,703	\$20.36	\$156,833	\$3,389 2.2%
Respite – RN	19,355	\$26.42	\$511,359	(\$64,646) (11.2%)
<i>Day Programs / Community Access Services</i>		\$2,481	\$578	30.4%
Customized Community Support (Group) - MFW	321	\$7.73	\$2,481	\$578 30.4%
<i>Professional Services - Therapies (OT/PT/SLP)</i>		\$2,957	\$17	0.6%
Occupational Therapy	72	\$41.07	\$2,957	\$17 0.6%
<i>Professional Services - Nursing</i>		\$232,663	(\$23,229)	(9.1%)
Private Duty Nursing – Adults- LPN	2,052	\$20.36	\$41,779	\$903 2.2%
Private Duty Nursing – Adults- RN	7,225	\$26.42	\$190,885	(\$24,132) (11.2%)
<i>Professional Services - All Other</i>		\$43,928	\$7,146	19.4%
Behavior Support Consultation	1,166	\$31.72	\$36,986	\$7,066 23.6%
Behavior Support Consultation – Clinic Based	63	\$31.72	\$1,998	\$380 23.5%
Nutritional Counseling –Adults	59	\$83.80	\$4,944	(\$300) (5.7%)

**Home and Community Based Services Rate Study
Fiscal Impact of Proposed Rates - Medically Fragile Waiver
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Developmental Disabilities Supports Division**

	Cost at Final Proposed Rates (Held Harmless to Losses)		
	Total Cost	Increase/ (Decrease) Compared to <u>Published</u> Rates	Pct. Increase/ (Decrease) Compared to Published Rates
Total - All Services	\$3,513,510	\$151,827	4.5%
<i>Case Management and Related</i>	\$1,312,272	\$48,360	3.8%
Case Management On-going	\$1,312,272	\$48,360	3.8%
<i>In-Home Supports</i>	\$575,430	\$55,104	10.6%
Home Health Aide	\$575,430	\$55,104	10.6%
<i>Respite Total</i>	\$1,109,088	\$39,420	3.7%
Respite – Home Health Aide	\$376,250	\$36,030	10.6%
Respite – LPN	\$156,833	\$3,389	2.2%
Respite – RN	\$576,005	\$0	0.0%
<i>Day Programs / Community Access Services</i>	\$2,481	\$578	30.4%
Customized Community Support (Group) - MFW	\$2,481	\$578	30.4%
<i>Professional Services - Therapies (OT/PT/SLP)</i>	\$2,957	\$17	0.6%
Occupational Therapy	\$2,957	\$17	0.6%
<i>Professional Services - Nursing</i>	\$256,795	\$903	0.4%
Private Duty Nursing – Adults- LPN	\$41,779	\$903	2.2%
Private Duty Nursing – Adults- RN	\$215,016	\$0	0.0%
<i>Professional Services - All Other</i>	\$44,228	\$7,446	20.2%
Behavior Support Consultation	\$36,986	\$7,066	23.6%
Behavior Support Consultation – Clinic Based	\$1,998	\$380	23.5%
Nutritional Counseling –Adults	\$5,245	\$0	0.0%

**Home and Community Based Services Rate Study
 Fiscal Impact of Proposed Rates - Medically Fragile Waiver
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 Developmental Disabilities Supports Division**

Cost at Current Published Rates		
Paid Units	Current Published Rate	Total Cost

<i>Cost-Based Services</i>			\$210,258
Environmental Modifications	4,389	\$10.22	\$44,853
Specialized Medical Equipment	165,405	\$1.00	\$165,405

**Home and Community Based Services Rate Study
 Fiscal Impact of Proposed Rates - Medically Fragile Waiver
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 Developmental Disabilities Supports Division**

Cost at Final Proposed Rates				
Paid Units	Projected Rates	Total Cost	Increase/ (Decrease) Compared to <u>Published</u> Rates	Pct. Increase/ (Decrease) Compared to Published Rates

<i>Cost-Based Services</i>			\$210,258	\$0	0.0%
Environmental Modifications	4,389	\$10.22	\$44,853	\$0	0.0%
Specialized Medical Equipment	165,405	\$1.00	\$165,405	\$0	0.0%

**Home and Community Based Services Rate Study
 Fiscal Impact of Proposed Rates - Medically Fragile Waiver
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 Developmental Disabilities Supports Division**

Cost at Final Proposed Rates (Held Harmless to Losses)		
Total Cost	Increase/ (Decrease) Compared to <u>Published</u> Rates	Pct. Increase/ (Decrease) Compared to Published Rates

<i>Cost-Based Services</i>	\$210,258	\$0	0.0%
Environmental Modifications	\$44,853	\$0	0.0%
Specialized Medical Equipment	\$165,405	\$0	0.0%