

## Public Comments: Proposed Medically Fragile 1915 (c) Waiver Renewal Application

The State secured public input during the 2016 renewal application process for the Medically Fragile 1915(c) Waiver. HSD and DOH solicited public input via multiple avenues including: mailings, emails, newspaper announcements, web postings, and statewide public forums.

Public Comments	State Response
<p>Will the state be applying for the same funding levels or could the funding levels be changed so that Medically Fragile Participants could access a higher budget like participants on the DD waiver.</p>	<p>This comment has been noted by the state. At this time the state will not be revising budget allocation amounts under the Medically Fragile Waiver (MFW).</p>
<p>What are the ramifications in an emergency situation in which a Medically Fragile child has to be institutionalized? Could the waiver be restructured to allow this?</p>	<p>If a medical condition indicates that a hospitalization should occur, the Centennial Care benefit would be utilized. Placement in an institutional facility is outside covered waiver benefits.</p>
<p>The waiver was designed for children to live at home but as families age and children live longer, this may not be possible. How do we support families to transition as parents are getting older?</p>	<p>MFW encourages families to anticipate changes or transitions during the development of the annual Individual Service Plan (ISP). Transitioning to the Developmental Disabilities Waiver (DDW), or guardianship are among topics strongly recommended for discussion.</p>
<p>Concerned that family members may not be able to continue to be paid caregivers.</p>	<p>The MFW does not allow parents or guardians to receive payment for services for minor children under age 18. Most other situations are allowed.</p>
<p>Are you going to keep the verbiage the same? Will it still be “Medically Fragile” and category “095”? Consistency is important.</p>	<p>Yes, the name of the waiver will remain the Medically Fragile Waiver and the category of eligibility will remain “095.”</p>

<p>Request to increase respite from two weeks per year to 4 weeks per year. Part of the problem with respite is the need to have respite providers available. Need for more providers.</p> <p>Concern over duplications between the Medically Fragile Case Managers, Centennial Care Coordination and Consultants (if on Mi Via). Is it possible to consolidate the appointments and information sharing among these groups? Families of Medically Fragile children are concerned having multiple people coming into their home who may bring with them germs that pose health risks.</p> <p>Presentation was thorough &amp; easily understandable. Good forum. Thank you for the handouts.</p> <p>Some families who have medically fragile children may be on the Mi Via waiver. Will you please explain the difference?</p> <p>What changes had the Department considered or is pursuing in the Waiver renewal?</p> <p>What is Centennial Care?</p>	<p>The state acknowledges the need for increased respite and providers and will work to develop a process and funding for this service in an upcoming amendment.</p> <p>The state is working to minimize duplication while continuing to meet the requirements of both the MFW and Centennial Care Program.</p> <p>This comment is noted by the state.</p> <p>The Mi Via waiver is New Mexico's home and community based self-directed waiver and is a separate and different waiver from the MFW. Mi Via waiver participants access their home and community-based services through a self-directed model that allows participants or their employer of record (EOR) to hire, train, and if necessary, fire the participant's caregivers.</p> <p>The state has reviewed changes to the waiver that were proposed during the public outreach and public comment processes. Suggestions include the inclusion of environmental modifications as a covered service, an increase to respite hours, and an increase to the nursing rate.</p> <p>Centennial Care is New Mexico's comprehensive Medicaid managed care</p>
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<p>Can brochures for the various waivers be placed on the website so that families may review and understand the differences?</p> <p>We would like to confirm that the Medically Fragile Waiver is not transitioning to Centennial Care until 2019.</p> <p>What is the source of information for parents to that we may make the best choices for our families? It is difficult to make well informed choices because we don't have all the resources available. What are all the programs, collectively, so that I can do a comparison and make an informed decision?</p> <p>We would like to create/have opportunities for families to talk with one another so that they can help each other.</p>	<p>delivery system that offers the full array of current Medicaid services, including acute, behavioral health, and home and community based services/long term care for those who meet a nursing facility level of care. Centennial Care includes a person-centered care coordination system. MFW participants receive their acute and behavioral health services through Centennial Care. MFW participants receive their home and community-based services through the MFW.</p> <p>Each program has information available for families on their websites.  DDW: <a href="http://www.ACTNM.org">www.ACTNM.org</a>  Mi Via: <a href="http://archive.mivianm.org">archive.mivianm.org</a>  MFW: <a href="http://nmhealth.org/about/ddsd/csb/mfw/">nmhealth.org/about/ddsd/csb/mfw/</a></p> <p>The state is proposing to transition the MFW into the Centennial Care in 2019. The proposed submission of the Centennial Care 1115 waiver is the Fall of 2017.</p> <p>Each program has information available for families on their websites.  DDW: <a href="http://www.ACTNM.org">www.ACTNM.org</a>  MI Via: <a href="http://archive.mivianm.org">archive.mivianm.org</a>  MFW: <a href="http://nmhealth.org/about/ddsd/csb/mfw/">nmhealth.org/about/ddsd/csb/mfw/</a></p> <p>The UNM Medically Fragile Case Management Program (UNM MFCMP) and the Family Advisory Board (FAB) is able to provide assistance in this area. Information on the FAB, and a copy of their newsletter is located on</p>
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<p>Three commenters asked the following set of questions: What is going to change when we move to Centennial Care? Will there be new case managers? Why are we moving to Centennial Care? Because Medically Fragile is so small we will have a hard time getting a voice in Centennial Care. We will be an even smaller population in a large pool.</p> <p>Concern that while a child is on the Medically Fragile waiver there are no available services where the child lives. Better availability of services.</p> <p>Request to add adult day program to the waiver for when child has aged out of school.</p> <p>Request for information regarding respite. Can you discuss the different types of respite?</p> <p>How will we know what changes are happening with the waiver?</p>	<p>their website:  <a href="http://cdd.unm.edu/mfcmp/fab.html">http://cdd.unm.edu/mfcmp/fab.html</a></p> <p>The state has a separate timeline for the renewal of the Centennial Care 1115 waiver that will include statewide public input sessions.</p> <p>The state acknowledges the need for more availability of services and will work to develop funding to assist with this issue.</p> <p>The Centers for Medicare and Medicaid Services (CMS) has established a Final Rule that mandates inclusion into the greater community and prohibits isolation in home and community settings. Every state is creating plans to comply with this rule. Under this rule NM will not be able to add an adult day program to the MFW as this setting is considered to be isolating in nature.</p> <p>Respite home health care or home respite provides time to the primary caregiver to rest, or have time away from care giving. The renewal includes home health care nursing services. Home respite is provided through an agency with trained family providers who provide care in private homes licensed as foster homes.</p> <p>The final approved waiver will be made</p>
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<p>How will we know when the comments are posted?</p> <p>There were 38 comments submitted regarding the following: I would like to express my support of the Medically Fragile Waiver renewal and am suggesting the following additions to the waiver: the inclusion of environmental modifications (EMODS) in the waiver to be consistent with the DDW and Mi Via, an increase in the nursing rate to be more competitive with other nursing employers, and an increase in the number of respite hours available under the waiver.</p> <p>What is the State looking at for respite in terms of choices? There are no RN respite providers in Farmington.</p>	<p>available on the HSD website which includes a summary of changes.</p> <p>HSD will notify the UNM MFCMP when comments are posted on the HSD website. A notification will also be sent to commenters who sent a comment by email.</p> <p>The state acknowledges the need for EMODs, an increase to the nursing rate, and an increase to respite hours and will work to develop a process and funding for these changes in an upcoming waiver amendment.</p> <p>Recruitment of respite providers is ongoing. The State continues to conduct recruitment activities targeted at identifying additional respite providers, particularly in the northwest region of the state where providers are limited.</p>
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