

Family Health Care Tips

Developmental Disabilities Waiver

4

Parents Reaching Out provides resources that focus on helping families make informed decisions about the care and education of their children. Keeping your family healthy means knowing how to navigate the health care system and talk with your doctor or other providers. We hope these tip sheets will give you the information you may need to access the best, most cost-effective medical and related services to meet the needs of your family.

What is the Developmental Disabilities (DD) Waiver?

The Developmental Disabilities Home and Community-Based Medicaid Waiver is often referred to as the DD Waiver. The DD Waiver provides services for children and adults in their homes and communities, not in more restrictive and expensive institutional settings. It allows children and adults with developmental disabilities to receive services in the places where they live.

Who is eligible for the DD Waiver?

To qualify for services, the person applying must have a diagnosis of mental retardation or a related condition such as autism, cerebral palsy, seizure disorder, chromosomal disorders, syndrome disorders, or inborn errors of metabolism. They must also have a developmental disability that began before the age of eighteen for mental retardation, or before the age of twenty-two for a related condition.

To demonstrate eligibility, the family will need to gather medical and educational information. There must be things the person cannot do or has difficulty with, referred to as "substantial functional limitations," in three or more of the following areas of major life activities: self care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, and/or economic self-sufficiency. The person applying must be a resident of New Mexico and meet New Mexico financial requirements.



In New Mexico only the income of the person with a developmental disability is considered when determining financial eligibility, not the household income. This is true even for children living with parents whose income would normally disqualify the child for Medicaid services.

What services are available through the DD Waiver

A person receives services through an Individual Service Plan (ISP) and based on their needs. Some services for children, such as therapies and personal support services, become available because the person receives Medicaid once they are on a waiver. Each person must choose a case manager who is responsible for developing the ISP and arranging for services.

What are the service options for children?

Services options for children differ from options for young adults or adults. Typically children receive therapy services through Medicaid, but the waiver may cover certain therapy services not covered by Medicaid or the child's school. Service options for children include:

- Case Management
- Nutritional Counseling
- Personal Plan Facilitator
- Respite Care

- Behavioral Support Consultation
- Non-Medical Transportation
- Goods and Services

- Community Access
- Supplemental Dental Care
- Environmental Modification



Why should parents apply for the DD Waiver for their child?

- There is a waiting list and it usually takes several years before an opening becomes available. Applying now is a way to plan ahead.
- Once your child is on a waiver program, they can use Medicaid to cover medical expenses such as doctor visits, therapies and other medical expenses.
- Your child and family may benefit from services that support active participation in their community.
- Your child may exhibit challenging behavior that can be helped by behavioral support.
- Your family may benefit from respite care (child care).
- Children can receive funding for environmental modifications such as a wheelchair ramp for their home.
- Your child and family may benefit from a Personal Plan Facilitator who would provide a fun and creative process designed to assist in developing a clear vision for the future.
- Once your child is offered an allocation for waiver services, you may choose the traditional DD Waiver or the Mi Via Self-Directed Waiver. Mi Via may offer additional services, goods (items) and support not available through the traditional DD Waiver. Call 1-866-786-4999 for an information packet.

How do families apply for the DD Waiver?

You must complete an application form at your local Income Support Division office (ISD) <u>or</u> at your Developmental Disabilities Supports Division (DDSD) Regional Office, either in person or by phone. Ask for a copy of the completed application form once it has been date stamped. Keep the date stamped receipt in a safe place as proof of your registration.

Within 10 working days of applying, you should receive a Match for Services packet from the DDSD Regional Office in your region. The packet includes Release of Information (ROI) forms for you to send to people (doctors, schools, etc.) who have information regarding medical eligibility. If you do not receive such a packet you should call the DDSD Regional Office nearest your home. The DDSD Regional Offices are also available to answer questions about the waiver.

Metro Regional Office:	Albuquerque	1-800-283-5548
		(505) 841-5500
Northeast Regional Office:	Taos	1-866-315-7123
		(505) 758-5934
Northwest Regional Office:	Gallup	1-866-862-0448
C	•	(505) 863-9937
Southeast Regional Office:	Roswell	1-866-742-5226
_		(505) 624-6100
Southwest Regional Office:	Las Cruces	1-866-742-5226
_		(505) 528-5180

If you have questions about applying for the DD Waiver or need more information to help you understand the DD waiver, please contact **Parents Reaching Out**. Ask to speak to a staff member in the Family to Family Health Information Center. We have developed free publications and materials to assist families who have questions about the DD Waiver process.

[&]quot;Health Care Tips" are publications of Parents Reaching Out and developed under a grant from the Center for Medicare and Medicaid Services (CMS). Views expressed do not necessarily represent their policy and should not be assumed to be an endorsement by the Center for Medicaid and Medicare Services.

