



## **Transfers: DD/MF Waiver to Mi Via Waiver**

If a participant/legal representative chooses to transfer to the Mi Via Waiver from the DD/MF Waiver the steps listed below must be followed so important information is provided to the receiving Mi Via Waiver Consultant agency and to ensure the participant's health and safety. ***Participants are not responsible for the transfer of required paperwork but they or their legal representative must participate in the transfer process.***

1. It is the responsibility of the participant or their legal representative to contact the Department of Health/Developmental Disabilities Supports Division (DOH/DDSD) to initiate the Waiver Change Form (WCF).
  - a. For individuals receiving DD Waiver Services, contact the local DOH/DDSD Regional Office to request the WCF. When the form is completed, the WCF should be returned to the local DOH/DDSD Regional office.
    - DOH/DDSD Regional Office Contact:
      - Metro Regional Office: (505) 841-5500 or 1-800-283-5548  
Fax 505-841-4523  
5301 Central NE Suite 203, Albuquerque NM 87108
      - Northwest Regional Office: (505) 863-9937 or 1-866-862-0448  
Fax 505-863-4978  
2910 E 66, Gallup NM 87301
      - Northeast Regional Office: (505) 758-5934 or 1-866-315-7123  
Fax 505-758-5973  
224 Cruz Alta Suite B, Taos, NM 87571
      - Southwest Regional Office: (505) 528-5180 or 1-866-742-5226  
575-528-5194  
1170 Solano Drive, Suite G, Las Cruces, NM 88001
      - Southeast Regional Office: (505) 624-6100 or 1-866-895-9138  
575-624-6104  
726 South Sunset, Roswell, NM 88023
  - b. For individuals receiving MF Waiver Services, contact the DOH/DDSD MFW Manager for MF Waiver to request the WCF. When the form is completed, the WCF should be returned to the MFW Manager.

- DOH/DDSD MFW Manager Contact:

- MF Waiver Manager: (505) 841-2913 or 1-800-283-5548  
Fax 505-841-2987  
5301 Central NE Suite 1700 Rm 18, Albuquerque NM 87108

- c. Waiver transitions will not be allowed nor will the WCF be processed by DDSD if the participant is 90 calendar days or less from the expiration of the Level of Care (LOC).
  - d. If a participant wants to switch waivers within the first 30 days of allocation, and no medical or financial eligibility has begun, the transfer is permitted. If the participant has already begun the eligibility process, the participant must meet medical and financial eligibility before he/she may request a transfer.
2. Once the WCF has been received by the appropriate DOH/DDSD staff, it is forwarded by DOH/DDSD staff to the current DD/MF Waiver Case Manager, receiving Mi Via Waiver Consultant Agency, the Mi Via Program Manager, Molina and the local ISD Office. Transfers from DD/MF Waiver to Mi Via Waiver should occur within 90 calendar days of receipt of the WCF unless there are circumstances related to the participant's services that require more time.
  3. The Mi Via Consultant Agency will contact the DD/MF Waiver Case Management Agency and participant /legal representative within 5 days of the receipt of the WCF to schedule a transition meeting which should occur within at least 30 days of receipt of the WCF.
  4. The participant or their legal representative must be present at the transition meeting either by phone or in person. A Release of Information (ROI) can be completed if necessary prior to the meeting. The transition meeting must occur and include the participant or their legal representative, either by phone or in person, as well as the Consultant and Case Manager attending in person.
  5. The transition meeting will include the following:
    - a. Discussion of the critical clinical issues that need immediate follow up as well as historical information regarding the individual which include, but are not limited to:
      - i. Date of the Level of Care (LOC) and Individual Service Plan (ISP);
      - ii. Current services/goods on the ISP budget;
      - iii. Any budget revisions in process;
      - iv. Any Medical Issues (medications, adaptive equipment, allergic reactions, therapy needs etc.);

- v. Guardianship and Power of Attorney orders and related documents Medicaid, Medicare, other Third Party Coverage documents;
  - vi. Problems identified by the DD/MF Waiver Case Management Agency that the receiving Mi Via Waiver Consultant Agency should be aware of; and
  - vii. Agreement between all parties on the date for the Waiver transition to occur. The effective date must always be the first of a month.
6. Copies of the following documents must be presented by the DD/MF Waiver Case Management Agency to the receiving Mi Via Waiver Consultant Agency in person or via registered mail by the transition meeting date as they are applicable to the individual. The transition meeting should be held when required documents are available for transfer to the receiving Mi Via Waiver Consultant Agency. If required documents are not available, a plan to obtain those documents should be developed at the transition meeting. The actual transition should not occur until all documents are provided to the receiving Mi Via Waiver Consultant Agency or until a plan is developed to assure any remaining necessary documents will be provided to the Mi Via Waiver Consultant. The DD/MF Waiver Case Management Agency retains the original documents, which may be archived but must be available at the request of the HSD or DOH in accordance with Medicaid regulations.
- a) Current year assessments
  - b) Current LOC: TPA approval letter, Long Term Care Abstract;
  - c) Current ISP and ISP revisions, current TPA documents, approval/denial letters, Requests for Information, support documents to the ISP including justification or denial letters from Third Parties, additional funding documentation, environmental modification paperwork or any relevant reports or documents used to prepare the ISP;
  - d) Current approval letter from ISD;
  - e) Supports Intensity Scale (SIS) Assessment;
  - f) Meeting notes and correspondence as available;
  - g) Medical documentation (ie. primary care physician, specialist reports that may impact the ISP or LOC, Comprehensive Aspiration Risk Management Plan (CARMP), Medical Emergency Response Plans (MERP), healthcare plans, nursing care plans);
  - h) Other Evaluations/Assessments/Plans as applicable ( therapy, vocational, rehabilitation);

- i) Current Individual Education Plan, DVR Plan (if applicable);
  - j) Allocation letter/Waiver change form;
  - k) Guardianship/POA paperwork (if applicable);
  - l) One full year of case notes (narratives) and monthly site visit forms; and
  - m) Other pertinent information
7. After the transition meeting occurs, a *Letter of Transfer and Receipt* must be presented by the receiving Mi Via Consultant Agency to the transferring DD/MF Waiver Case Management Agency that lists:
- (a) Effective date of Waiver Transition;
  - (b) Documents that are transferred;
  - (c) Missing documents;
  - (d) *Release of Information* for the receiving Mi Via Waiver Consultant Agency to complete in order to request documents from generic or other supports that the transferring DD/MF Waiver Case Manager may not have requested or received; and
  - (e) Issues that need immediate follow-up.
8. Representatives of both agencies must sign the Letter of Transfer and Receipt document as well as the participant/ legal representative. The Letter of Transfer and Receipt will be sent by the receiving Mi Via Waiver Consultant Agency to the local DOH/DDSD Regional Office (DD Waiver only) or the DOH/DDSD MFW Manager (MF Waiver only) to indicate that the transition meeting has taken place.
9. Participants who wish to return to the DD/MF waiver from the Mi Via Waiver must contact the local DOH/DDSD Regional Office (DD Waiver only) or the DOH/DDSD MFW Manager (MF Waiver only) to request a WCF to initiate a transition back to the DD or MF Waiver (see 1a and 1b for contact information).
- a. For transfers from Mi Via Waiver (DD Waiver only) the Case Management Freedom of Choice form is also required.
  - b. Waiver transitions will not be allowed if the participant is 90 calendar days or less from the expiration of the Level of Care (LOC).

- c. If a participant wants to switch waivers within the first 30 days of allocation, and no medical or financial eligibility has begun, the transfer is permitted. If the participant has already begun the eligibility process, the participant must meet medical and financial eligibility before he/she may request a transfer.
10. Once the WCF has been signed it should be returned to the local DOH/DDSD Regional Office (DD Waiver only) or the DOH/DDSD MFW Manager (MF Waiver only).
11. Once the WCF has been received by the appropriate DOH/DDSD staff, it is forwarded by DOH/DDSD to the current Mi Via Waiver Consultant Agency, the receiving DD/MF Waiver Case Manager, the DDSD/DOH Mi Via Program Manager, Molina and the local ISD Office. Transitions from Mi Via Waiver to DD/MF Waiver should occur within 90 calendar days of receipt of the WCF unless there are circumstances related to the participant's services that require more time.
12. DD or MF Waiver Case Managers will initiate the transition process upon receipt of the WCF from the DOH/DDSD Regional Office (DD Waiver only) or the DOH/DDSD MFW Manager (MF only). The DD/MF Waiver Case Manager will contact the Mi Via Waiver Consultant and participant /legal representative within 5 days of the receipt of the WCF to schedule a transition meeting which should occur within at least 30 days of receipt of the WCF.
13. The participant or their legal representative must be present at the transition meeting either in person or by phone. A Release of Information (ROI) shall be completed prior to the meeting so the exchange of information may occur. The transition meeting must occur and include the participant or their legal representative, either by phone or in person, as well as the Consultant and Case Manager attending in person.



**Letter of Transfer and Receipt  
DDW/MF Waiver transfers to Mi Via Waiver**



ACT New Mexico  
Access Community Together

Date:

Participant:

SS #:

DOB:

Complete address:

Phone number:

This letter is to confirm that the transition meeting and the transfer of records from the DD/MF Waiver Case Management agency, \_\_\_\_\_, to the new Mi Via Waiver consultant agency, \_\_\_\_\_ has occurred. This transition will be effective as of \_\_\_\_\_. (Must be the first of a month)

Meeting Minutes:

The records included in the transfer are to include the following information as applicable to the individual:

<b>Document(s)</b>	<b>Y/N/NA</b>	<b>Title/Date of Document</b>	<b>Pending or not yet obtained and who will be responsible for obtaining</b>	<b>Date received</b>
Current Year Assessments				
LOC				
ISP; attached documents & ISP & budget revisions				
Supports Intensity Scale Assessment (SIS)				
Current Approval Letter from ISD				
Meeting notes and correspondence as available				
Medical Documentation/ History & Physical/Care Plans/Emergency Plans				
Other evaluations, assessments, plans (therapy, vocational, rehabilitation)				
Current IEP, DVR Plan				
Allocation Letter/Waiver Change Form (s)				
Guardianship/POA paperwork				
One full year of case notes				

Document(s)	Y/N/NA	Title/Date of Document	Pending or not yet obtained and who will be responsible for obtaining	Date received
(narratives) and monthly visit forms				
Any applicable documents related to Environmental Modifications				

If there are any questions, the previous agency's contact person is (name, title and phone):

---



---

Signature/title of DD/MF Waiver Case Management agency/date

---

Signature/title of Mi Via Waiver Consultant agency/date

By signing below, I confirm that I attended the transition meeting in person or by phone.

---

Signature of participant/legal representation