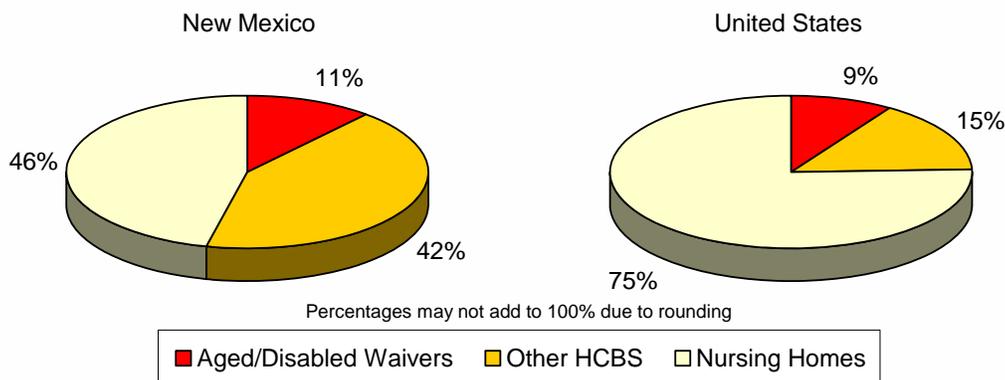


State Long-Term Care Reform in
NEW MEXICO

Medicaid Long-Term Care Spending for Older People and Adults with Physical Disabilities in New Mexico and the U.S., 2006



New Mexico is one of the few states that allocates the majority (53 percent) of its Medicaid long-term care (LTC) spending for older people and adults with physical disabilities to home and community-based services (HCBS). In FY 2006, New Mexico spent 11 percent on waiver services and 42 percent on personal care services (PCS).

Type of Service	Medicaid Participants ¹			Expenditures (millions)		
	1999	2004	Change	2001	2006	Change
HCBS	1,404	12,118	+10,714	\$87	\$227	+\$140
Nursing Homes	7,074	6,895	-179	\$166	\$196	+\$30

New Mexico has one of the most balanced LTC systems for older people and adults with physical disabilities in the nation, and recent Medicaid trends indicate that the state is continuing to make even more progress toward balancing. Many more Medicaid participants received HCBS than received nursing home services. In fact, the number of participants receiving HCBS increased significantly from 1999 to 2004, while the number of participants in nursing homes declined slightly. From FY 2001 to FY 2006, the increase in Medicaid spending on HCBS was nearly five times the increase in spending on nursing homes.

¹ This analysis separates Medicaid participation and spending data for older people and adults with physical disabilities from the population with mental retardation/development disabilities (MR/DD) and other LTC populations. Participants and expenditures for HCBS include all 1915(c) waivers for older people and adults with physical disabilities, and the personal care services option, if the state offers it. All participants and expenditures for nursing homes are included, regardless of the participants' type of disability or reason for admission. Excluded are participants and expenditures for intermediate care facilities for mental retardation (ICF/MR), HCBS waivers for other populations such as MR/DD, home health, and individuals receiving LTC services through managed care programs. Participant numbers include all persons receiving services during the year, not the average number on a given day; the number of nursing home participants is greater than the number of nursing home beds in each state. The average number of Medicaid nursing home residents on any given day for each state appears in the *Tables* tab at the end of the full report *A Balancing Act: State Long-Term Care Reform (#2008-10)*.

A major factor in the state's progress toward balancing its LTC system is the Medicaid State Plan Personal Care Option, which targets consumers at risk of nursing home care. Implemented in 1999, this program provided PCS to more than 10,400 people in 2006.

Major Initiative

Mia Via, a new waiver program offering self-directed services, began in November 2006 with a Cash and Counseling planning and development grant from the Robert Wood Johnson Foundation. The program allows participants to choose the services they need, hire their own workers, and decide where and how to spend their Mia Via budget. A consultant is available to provide assistance if needed.

Mia Via

Mia Via is a Cash and Counseling program to empower older adults and people with disabilities to direct their own care. Mia Via will provide services to 400 participants.

By February 2008, the program had received applications from 283 persons age 65 and older; 95 of them had completed the process and were receiving self-directed services.

Other Developments

Managed Long-Term Care. New Mexico has proposed creating a new capitated managed LTC program, called "Coordinated Long-Term Services" (CLTS), that will provide primary, acute, and LTC services to consumers in one coordinated and integrated program. An estimated 38,000 people will be enrolled in CLTS. The program will be phased in by geographic region starting in July 2008, beginning with Bernalillo County, the state's most populous county. Eligible populations include:

- dual-eligibles (persons eligible for both Medicare and Medicaid) who do not need nursing facility level of care;
- nursing home residents;
- participants in the state's disabled and elderly waiver program;
- participants in the state's Personal Care option under the Medicaid state plan; and
- certain persons with a brain injury not currently enrolled in a waiver program.

The state proposes to develop a "single blended rate" approach to capitation, with annual targets for decreases in use of nursing facility services. New Mexico intends to contract with at least two managed care organizations to deliver services. State officials say the program is needed because existing fragmentation of services leads to duplication, over- and underutilization of services, and inappropriate emergency room visits and in-patient hospitalizations.

Single Point of Entry. Access to services has been improved through creation of a statewide Aging and Disability Resource Center, which began full operation on January 1, 2005. This one-stop resource for older persons and people with disabilities integrates several Aging and Long-Term Services Department programs—its benefits and counseling program, prescription drugs, in-home and community-based care, housing, and caregiver support.