



Brain Injury Association of New Mexico

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Dear Doctor _____:

Your patient _____, date of birth _____ is applying to receive Medicaid long term waiver services.

Traditionally in New Mexico, individuals with brain injuries have had very limited opportunities to access the services and supports that are critical to their safety and well being. Under the Medicaid Waiver, Mi Via, an individual with a brain injury will have the opportunity to receive services to live independently in their community.

In order for your patient to be assessed for Mi Via, the State requires documentation to determine medical eligibility. **These forms are time sensitive, so your attention to completing these documents is appreciated.**

Confirmation of a diagnosed Brain Injury:

Individuals with brain injuries must have a "Confirmation of ICD 9 Code" filled out by a physician, nurse practitioner, physician assistant or licensed psychologist verifying a brain injury diagnosis for medical eligibility (See back of Pink form for ICD 9 codes that qualify).

Long Term Care Assessment Abstract:

The Mi Via Waiver, utilizes the "Long Term Care Assessment Abstract" (ISD379), which is a Federal requirement to determine medical level of care. When completing this form, please consider your patient's worst day, time of day, and how they complete their activities of daily living. **Please be sure to complete the entire form and include your signature. This form will not be accepted by the Mi Via Waiver program, unless it is filled out completely.**

History and Physical:

Attached is the Mi Via, History and Physical (H&P) form. The entire H&P must be completed and should include your signature on each page. The H&P is your patient's current medical status and can also be medical chart notes for the past year. The information should document how your patient's brain injury affects their daily functioning, as well as justification for long term services. **Please ensure the H&P/medical chart notes correspond with the ISD379.**

Upon completion of all three forms (**ICD 9 Code, ISD379, and H&P**) have been filled out, you can give them to your patient or you may send them to the Brain Injury Association of NM (see release of information).

If you have any questions, please contact the BIANM toll free at 1-888-292-7415.

Respectfully,

Brain Injury Association of New Mexico