Brain Injury Association of New Mexico

A Chartered State Affiliate of the Brain Injury Association of America

To Whom It May Concern:

The Brain Injury Association of New Mexico has contracted with New Mexico's Aging and Long Term Services to provide information and hands on assistance to individuals that have a brain injury and are applying for long term services. Long term services are being provided through New Mexico's new Self Directed Waiver (also known as Mi Via). For individuals with brain injury, this is the first time that they have had an opportunity to obtain Medicaid long term services and the state recognizes that they may need additonal assistance to apply for those services. The Brain Injury Association is contracting with professionals (Brain Injury Guides) throughout our state to provide the hands on assistance that _____ may need. In order to help the participant with a brain injury with the process of applying for the medicaid waiver, we will need to speak with the following people to obtain the necessary documents to complete their process of applying for Mi Via.

☐ Medical Professional: _____(Number)_____

☐ Consumer Direct Personal Care _____ (Number)_____

☐ Molina Health Care, Mi Via TPA_____ (Number) _____

☐ Income Support Division Case Worker:_____(Number)_____

☐ Support Person:_____ (Number)_____

☐ NM State Department of Health or Aging and Long Term Services staff

_____(Number)_____

This is a one time request, through providing assistance with applying for Mi Via and should not exceed six months from the date of this letter.

I understand that by signing this form and writing the name and number of the appropriate person, that I am allowing the Brain Injury Guide to contact the person (s) on my behalf in order to help me apply for Mi Via.

_____ _____ _____

Participant Date Time

_____

Authorized Representative (Guardian) & Relationship to Participant

121 Cardenas NE • Albuquerque, New Mexico 87108

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