1	SENATE BILL 222
2	52ND LEGISLATURE - STATE OF NEW MEXICO - SECOND SESSION, 2016
3	INTRODUCED BY
4	Michael Padilla and Sarah Maestas Barnes
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10	AN ACT
11	RELATING TO HEALTH CARE; ESTABLISHING A DIRECT CARE WORKFORCE
12	SUBCOMMITTEE OF THE LEGISLATIVE HEALTH AND HUMAN SERVICES
13	COMMITTEE; PRESCRIBING DUTIES.
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15	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:
16	SECTION 1. A new section of Chapter 2, Article 13 NMSA
17	1978 is enacted to read:
18	"[ <u>NEW MATERIAL</u> ] DIRECT CARE WORKFORCE SUBCOMMITTEE
19	CREATIONMEMBERSHIPAPPOINTMENTMEETINGSREMOVALDUTIES
20	REPORTING
21	A. The "direct care workforce subcommittee" is
22	created as a permanent subcommittee of the legislative health
23	and human services committee. The subcommittee shall be
24	composed of six members of the legislative health and human
25	services committee and nine additional members, as follows:
	.203043.5

<u>underscored material = new</u> [<del>bracketed material</del>] = delete 1 (1) three members of the house of 2 representatives appointed by the speaker of the house of representatives, with political party representation in 3 proportion to party representation in the house of 4 5 representatives; three members of the senate appointed by (2)6 7 the president pro tempore of the senate, with political party 8 representation in proportion to party representation in the 9 senate; one representative from the developmental 10 (3) disabilities planning council; 11 12 (4) one representative of a local or state association or coalition providing support, education or 13 training for direct care workers; 14 one representative of the direct care (5) 15 workforce: 16 (6) one representative of an agency or a 17 collective providing direct care services; 18 one representative of a disability 19 (7) 20 advocacy agency, organization or group; one representative of the community health (8) 21 worker or community health representative workforce; 22 one representative of a senior citizen (9) 23 advocate agency, organization or group; 24 (10) one public member with knowledge and 25 .203043.5 - 2 -

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1 experience in direct home care; and

(11) one representative of the New Mexico community college system or other public higher education system providing training or engaged in the study of the New Mexico direct care workforce.

B. The New Mexico legislative council shall appoint the subcommittee members specified in Paragraphs (3) through (11) of Subsection A of this section for two-year terms expiring on January 1 of the appropriate year. Those subcommittee members shall serve staggered terms at the time of their initial appointment as determined by the co-chairs of the New Mexico legislative council.

C. A vacancy in the membership of the subcommittee shall be filled by the New Mexico legislative council.

D. Public members shall receive per diem and mileage as provided in the Per Diem and Mileage Act.

E. The subcommittee shall make policy recommendations to the legislative health and human services committee. The subcommittee shall:

(1) review opportunities for informing employers of requirements under the federal Fair Labor Standards Act of 1938 and other state and federal fair labor standards laws;

(2) identify best practices for application of the federal Fair Labor Standards Act of 1938 and other federal.203043.5

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1 and state labor and employment laws to the direct care 2 workforce: identify the cost to state government that 3 (3) compliance with labor standards laws represents; 4 recommend policies for an exceptions 5 (4) process incorporating consumer input; 6 7 (5) recommend an implementation policy that incorporates a plan to maintain consumer services without 8 9 disruptions to consumer hours; (6) study ways to leverage and allocate state 10 and federal funding for overtime and travel time for direct 11 12 care workers and consider data from the payers that: identify the number of consumers (a) 13 14 determined to need more than forty hours of direct care per week; and 15 (b) are obtained through surveys of home 16 health care agencies, personal care agencies and other self-17 directed programs that promote self-direction of direct care 18 worker services to identify the number of consumers that rely 19 20 exclusively on a single worker and are allotted more than forty hours of care per week; 21 receive testimony from the payers; (7) 22 make recommendations to the legislative (8) 23 health and human services committee for assisting payers to 24 meet the requirements of the federal Americans with 25 .203043.5 - 4 -

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1 Disabilities Act of 1990 and regulations promulgated pursuant 2 to that act to ensure that consumers are not put at serious risk of institutionalization as a result of state action in 3 implementing state or federal regulations relating to direct 4 5 care: make recommendations for assisting state 6 (9) 7 agencies in developing and disseminating information to direct care workers, consumers and employers of direct care workers, 8 9 explaining each stakeholder's new rights and responsibilities under state and federal fair labor standards laws; 10 (10) conduct a study of how the private and 11 12 public systems of direct care in the state may enhance a comprehensive system of direct care services and supports, 13 14 including an analysis of: (a) statewide coordination and 15 collaboration among the direct care programs and services 16 within both urban and rural settings in the state; 17 (b) the supply of services of the 18 19 state's direct care workforce and personal care attendants; 20 (c) the affordability and accessibility of direct care services; 21 the sustainability and retention (d) 22 rates of the direct care workforce and methods for improving 23 workforce retention; and 24 the economic participation of the 25 (e) .203043.5

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New Mexico direct care workforce and methods for making direct care services a sustainable source of employment for residents of the state; and

(11) evaluate the capacity for the state's 4 5 residents to age in their homes and maintain their independence for as long as possible, or "age in place", while addressing 6 7 the risk of isolation and lack of socialization that may accompany aging in place. This evaluation shall include an 8 9 analysis of means to encourage the development and use of new forms of technology and digital communications that may support 10 aging in place through monitoring, emergency response and real-11 time communications. 12

F. By December 1, 2018, the subcommittee shall consult with direct care workers and produce a report on the feasibility of creating a direct care worker registry. The report shall include:

(1) an evaluation of the need for a registry;(2) identification of the potential cost and

savings to the state that may result from the registry;

(3) identification of possible funding sourcesfor the registry;

(4) recommendations to the payers and the legislative health and human services committee on how to coordinate, align and support family members who serve as caregivers with the direct care workforce; provided that in .203043.5

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1	developing these recommendations, the subcommittee shall
2	consider:
3	(a) how to consolidate and coordinate
4	resources and public funding streams for direct care services;
5	and
6	(b) the impact of turnover in the
7	industry and any relationship to the quality of care for
8	individuals who are elderly or have a disability;
9	(5) recommendations on methods to compensate
10	direct care workers at a living wage, including recommendations
11	for revenue streams to fund direct care;
12	(6) proposals to promote direct care work as a
13	profession in New Mexico;
14	(7) identification of problems faced by direct
15	care workers and means by which these pressures could be
16	alleviated;
17	(8) an analysis of the affordability of
18	long-term care for low- and moderate-income New Mexico
19	residents and identification of strategies and funding streams
20	to provide affordable access to direct care for those residents
21	to allow residents to age in place;
22	(9) an examination of methods to provide
23	consumer education and accessibility to direct care resources;
24	(10) consideration of the ways to advance the
25	quality of in-home care programs;
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1 (11) consideration of the development of a 2 seamless service delivery system with local points of entry for home care programs administered by local, state and federal 3 4 agencies; a discussion of the methods to provide 5 (12)for collaboration with state and local programs and health and 6 7 behavioral health programs; 8 (13) consideration of the methods to develop 9 and manage data collection systems to support the functions of a coordinated direct care system and to enable accurate 10 evaluation of the system; 11 12 (14) recommendations to reflect the diversity, cultural heritage and strengths of the families and communities 13 14 of the state; consideration of the development of an (15)15 aligned system of professional development for professionals 16 providing direct care and education; 17 (16) consideration of the establishment of an 18 19 administrative framework to promote the development of direct 20 care services that are staffed by qualified professionals and are available in every community for all families requiring 21 those services; 22 (17) an analysis of the state's aging 23 population, including: 24 the income levels and health and 25 (a) .203043.5

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1 disability statistics of individuals reaching sixty-five years 2 and older during the next twenty years; and (b) the array of services and supports 3 that exist in the state for retirees; and 4 5 (18) an assessment of the state's attractiveness as a location for economically solvent retirees 6 7 to relocate and the development of strategies to encourage and promote New Mexico as an attractive place for economically 8 9 solvent retirees to relocate. These strategies shall include coordination of public-private partnerships among the tourism 10 department, state and local convention and visitors services, 11 12 private tourism stakeholder groups and the media. G. As used in this section: 13 14 "direct care worker" means an individual (1)providing care as a home health aide, personal care assistant, 15 personal care aide, nursing assistant or home care aide; 16 "direct care workforce" means the 17 (2) individuals employed as home health aides, personal care 18 19 assistants, personal care aides, nursing assistants and home 20 care aides to provide direct care services; and "payer" means the state medicaid program, (3) 21 a state agency or a private entity, risk-bearing or non-risk-22 bearing, that pays for direct care services in the state." 23 - 9 -24 25 .203043.5

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