

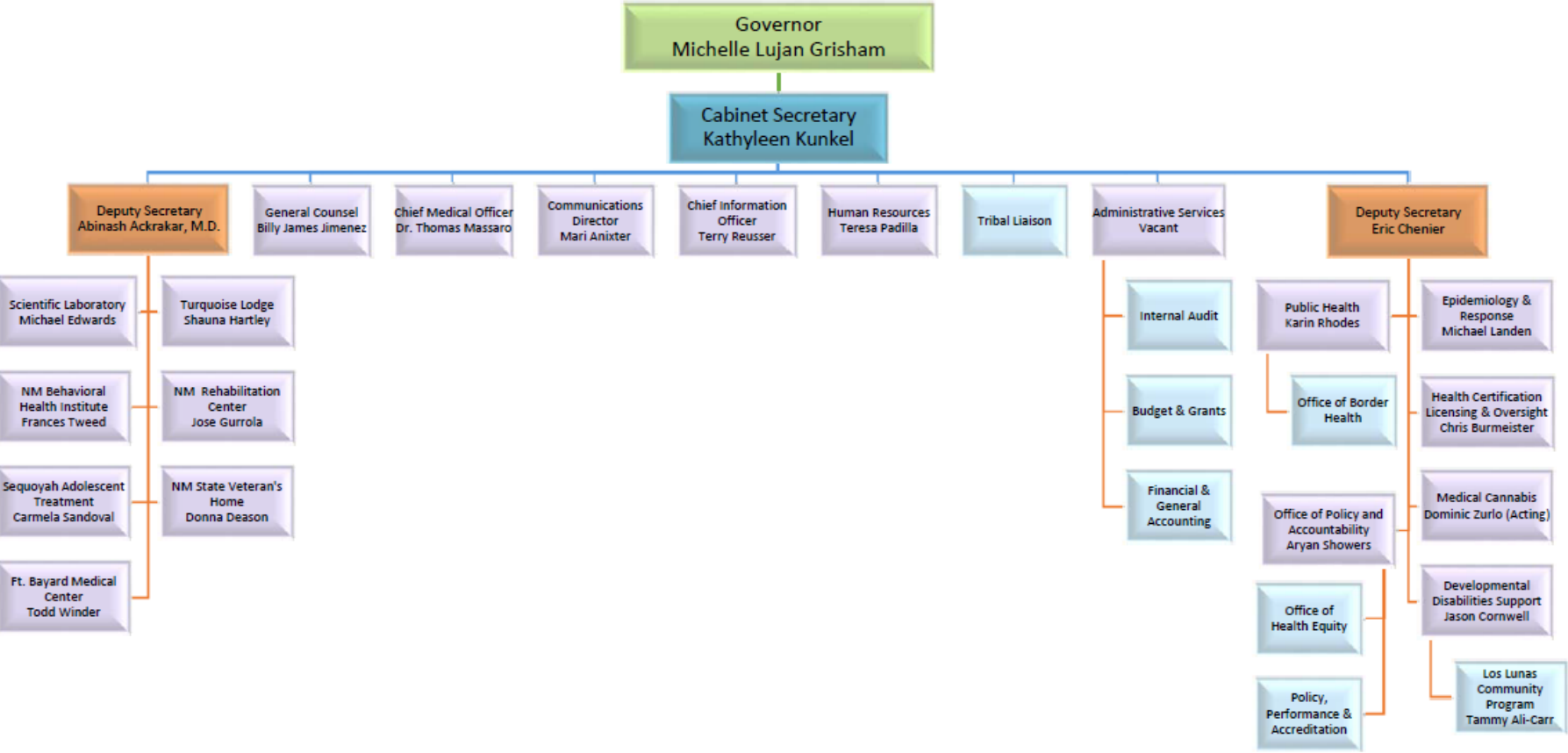


# LFC Budget Hearing

October 29, 2019

Kathy Kunkel, Cabinet Secretary





*Kathyleen M. Kunkel*

Kathyleen Kunkel, Cabinet Secretary  
 October 2019

# Department of Health

Vision  
A Healthier New Mexico!



Mission

Promote health and wellness, improve health outcomes, and assure safety net services for all people in New Mexico.

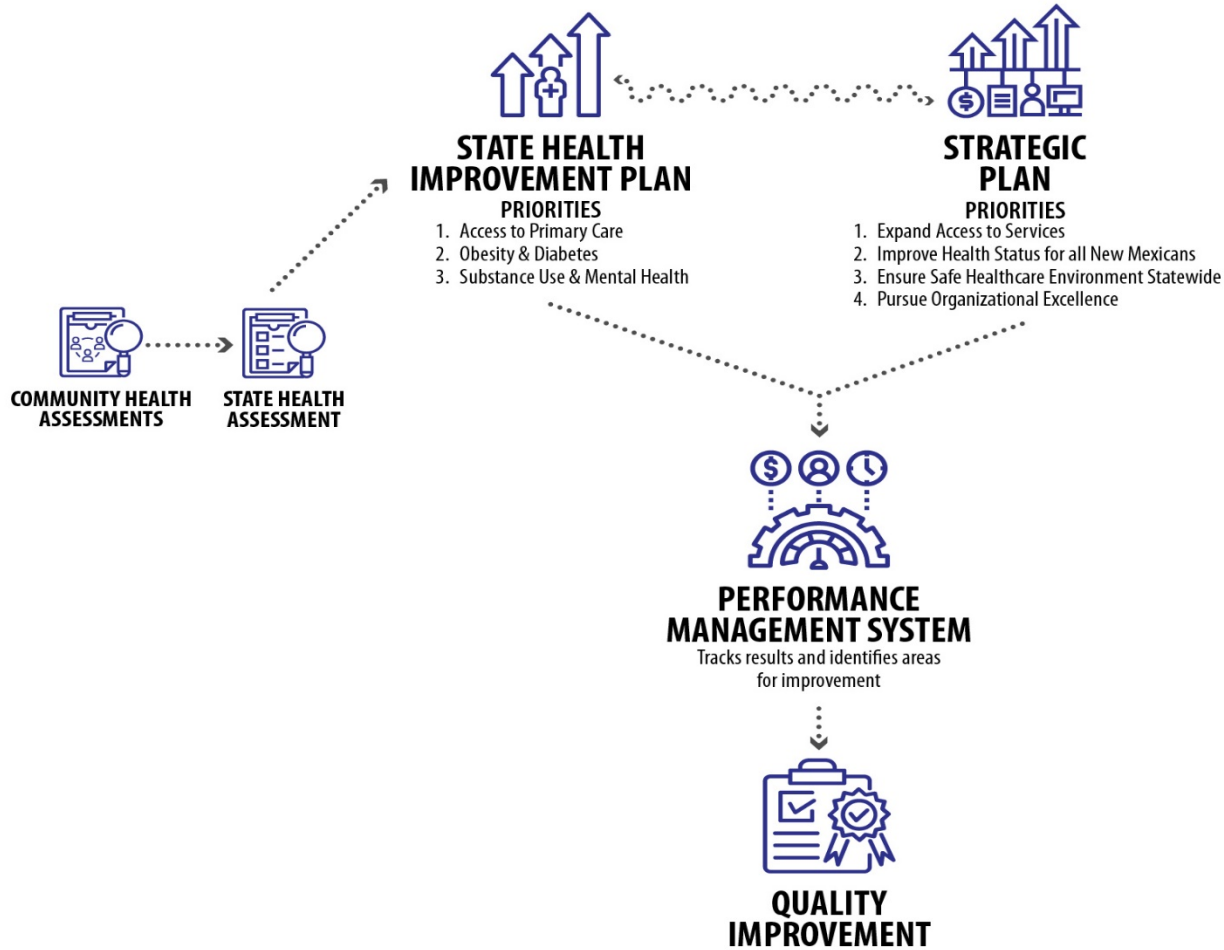


# DOH Divisions, Bureaus, and Programs

Public Health Division	Epidemiology & Response Division	Developmental Disabilities Supports Division
Diabetes Prevention & Control	Infectious Disease Tracking	Home & Community Based Support
Obesity, Nutrition & Physical Activity	Public Health Surveillance	Medically Fragile Program
Tobacco Use Prevention & Control	Disease Control	MI Via Self-Directed Support
Family Health & Planning	Injury Prevention	Family Infant Toddler Program
Heart Disease & Stroke Prevention	Vital Records & Health Statistics	Autism Spectrum Disorder Services
Overdose Prevention & Harm Reduction	Emergency Medical Systems & Health Emergency Management	Medicaid Intake & Eligibility
Infectious Disease Prevention & Control	Environmental Health & Health Systems Epidemiology	
School-Based Health	Health Assessments	Scientific Laboratory Division
Maternal & Child Health & MCH Epidemiology	Substance Use Epidemiology	Indigenous & Exotic Infectious Disease Testing
Oral Health	Health Improvement Division	Blood Alcohol Testing
Cancer Prevention & Control	Health Facility Licensing	Drinking Water Testing
Refugee & Border Health	Certified Nurse Aide Registry & Training	Chemical Contaminants and Toxin Exposure
Primary Care & Rural Health	Caregivers Criminal History Screening	Drug Screening & Drug Confirmation Services
Children & Youth with Special Health Care Needs	Employee Abuse Registry	Office of Facilities Management
Medical Cannabis Division <td>Abuse, Neglect &amp; Exploitation Investigations (DD Waiver)</td> <td>Behavioral Health</td>	Abuse, Neglect & Exploitation Investigations (DD Waiver)	Behavioral Health
Patient Registry		Drug & Substance Abuse Treatment
Rule & Regulatory Promulgation		Nursing & Skilled Long-Term Care
Licensing Requirements		Administrative Oversight & Support
Inventory Control & Quality Assurance		Adolescent Residential Treatment



# Department of Health



## WORKFORCE DEVELOPMENT

Workforce Development is foundational to all



# Department of Health's FY20 Interim Strategic Plan

NMDOH's intention for FY20 is to conduct a robust strategic planning process in order to:

- Build a plan that exemplifies and makes our mission, vision, values and priorities central to our organizational dynamic and direction
- Enculturate a results and performance orientation throughout the Department
- Foster transparency, alignment, accountability and improvement
- Strengthen and expand NMDOH's capacity by incorporating accreditation best practices



# Department of Health's FY20 Interim Strategic Plan (con't)

Month	Key Activities
FY20: 44 AGA Performance Measures FY21: 76 AGA Performance Measures	
September 2019	<ul style="list-style-type: none"> <li>• Submit FY20 Interim Strategic Plan ✓</li> <li>• Conduct FY21-23 Strategic Planning Retreat ✓</li> </ul>
November 2019 – January 2020	<ul style="list-style-type: none"> <li>• Draft Four NMDOH Goals ✓</li> <li>• Compile Retreat Report ✓</li> <li>• Formulate objectives, tasks and action plan</li> <li>• Collect management input</li> </ul>
February – April 2020	<ul style="list-style-type: none"> <li>• Communicate to the workforce and get employee feedback</li> <li>• Finalize FY21-23 Strategic Plan</li> </ul>
June 2020	Submit and publish FY21-23 Strategic Plan

# FY21 Budget Overview

## FY21 Appropriation Request (thousands)

### Revenue

General Fund	327,680.4
Other Transfers	36,457.2
Federal Funds	102,798.4
Other State Funds	122,661.1
Fund Balance	0.0
<b>Total</b>	<b>589,597.1</b>





# DOH Budget Request Approach (overview):

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Address health priorities long overdue for adequate funding including working towards:

- 1. Eliminating the 13.5-year DD Waiver waiting list**
- 2. Improving public health**
  - By reducing the transmission of infectious diseases;
  - Increasing vaccination rates; and
  - Addressing substance use disorders
- 3. Improving the oversight and the quality of care in New Mexico's boarding homes, hospitals, crisis triage centers, and other facilities**
- 4. Improving safety net services for the elderly, veterans, and others in the DOH facilities and community program**



# DD Waiver Trends Since FY2011



# Provide Relief to those on the 13.5-Year Waiting List to Receive DD Waiver Services by:

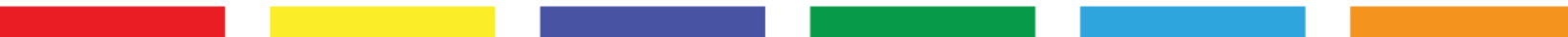
- Ensuring all who are eligible receive Early Periodic Screening, Diagnosis, and Treatment (EPSDT) and community benefit
- Implementing a short-term family supports and reimbursement program
- Developing a new supports waiver in FY21 to support 2,000 individuals in the first year
- Requesting \$1.4 million to conduct acuity assessments to reform the DD Wavier system
- Requesting an additional \$7.5 million for the DD and Mi Via Medicaid waivers
- Working to clean up the waitlist



# Supports Waiver

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- Governor's Initiative
- Will serve an additional 2000 individuals per year
- 10K Budget Limit
- 10 Package Service Array based on survey of Waitlist
- Repurpose state general fund dollars to leverage federal Medicaid revenue
- Traditional or Self Directed
- **Individuals receive services while waiting for allocation to Traditional/ Mi Via**



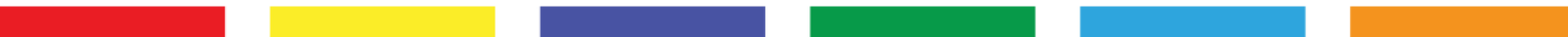
# Comprehensive Waivers Reform

## TRADITIONAL DD WAIVER

- Adopt Standardized Assessment Tool
- Review Outlier Budgets to determine causation
- Implement the Supports Waiver

## MI VIA WAIVER

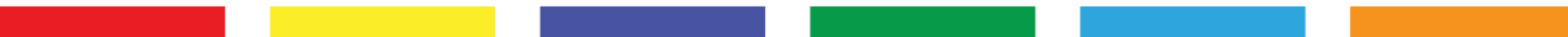
- Strengthen the Service Criteria to Inform Third Party Administrator (TPA)
- Increase oversight through Quality Management Bureau (QMB) for provision of services
- Review Outlier Budgets to determine causation
- Increase oversight through Incident Management Bureau (IMB) to detect ANE



# DD Waiver Assessments

CMS requires states to use a valid and reliable assessment tool for HCBS Waiver program to:

- Support the Level of Care Determination
- Describe Intensity of Need
- Describe Urgency of Need



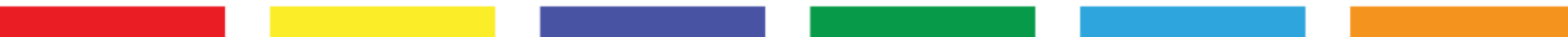
# Reduce the Waitlist

- 360 Added to Waitlist on Average each year
- 6 Attrition Allocations each month
- 25 Expedited Allocations Opportunities this SFY
- 4530 Completed Applications
- 413 Allocations on Hold
- 2639 Under the age of 22
- Longest Wait Metro Region 1/24/2007
- DDSD Hiring Contractor to Verify Waitlist Contact Info



# DD, MF, & MI VIA RATES

- Based on CMS Required Rate Study performed by independent experts
- Examines current “cost of doing business”
  - DD Waiver: 19% Underfunded
  - Med Frag: 37% Underfunded
  - Mi Via: 17% Underfunded





# Family Infant Toddler Program Growth

- Statewide network of 34 public and private providers
- Served approximately 16,000 children and their families in Fiscal Year 2019
- Experienced an average annual growth of 5%.
- Received a highest national rating from the US Office of Special Education Programs (OSEP) based on a number of performance indicators.



# Improve Public Health, Epidemiology, and Laboratory Services

For the Public Health, Epidemiology and Response, and Laboratory Services Programs the request seeks to improve outcomes related to substance use disorders, infectious disease transmission, firearm injuries, suicide, older adult falls, and cardiovascular disease death.

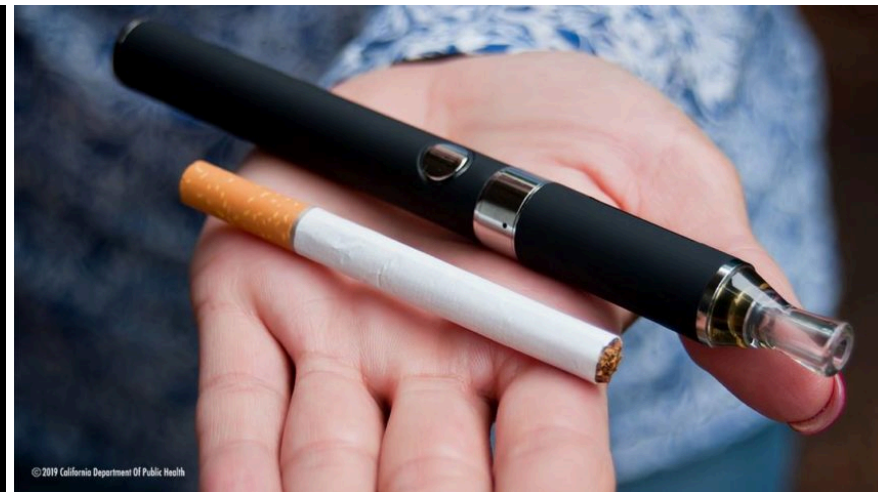


**MEASLES**

is **highly contagious** and spreads through the air when an infected person **coughs or sneezes**.

It is so contagious that if one person has it, **9 out of 10 people** of all ages around him or her will also become infected if they are not protected.

The graphic features a CDC logo in the top right corner. On the left, there are 10 stylized human figures: one large red female figure and nine smaller orange figures (five male, four female) arranged in two rows. The text is in white and orange on a black background.



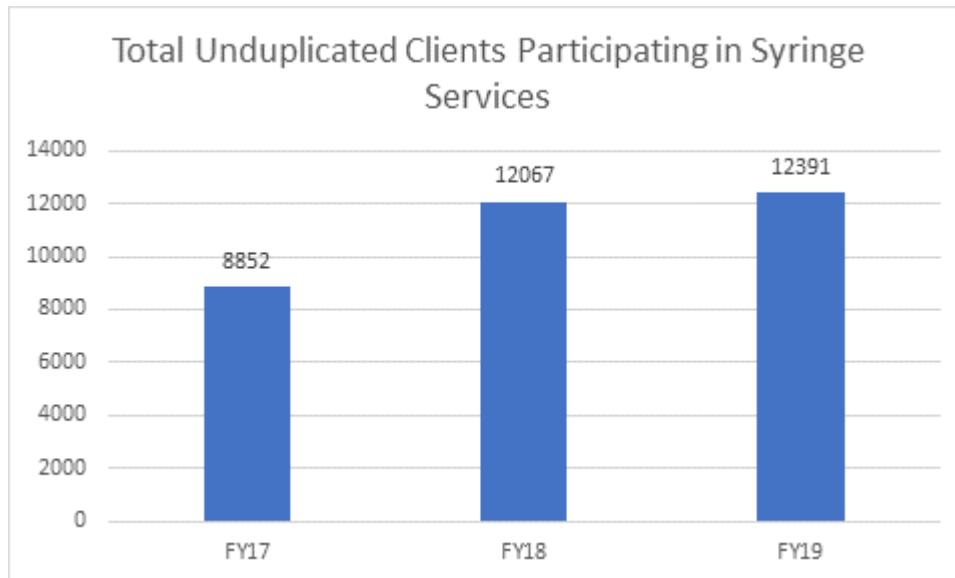
*Above: nicotine addiction from cigarette smoking and vaping is a leading contributor to death from cardiovascular disease.*



# Substance Use Disorders

Request includes:

- \$400 thousand for syringe services
- \$450 thousand to expand Medication Assisted Treatment (MAT) in the Public Health regions
- \$200 thousand to prevent Neonatal Abstinence Syndrome
- Additional amounts to create an Office of Alcohol and Population Health to be created in the Epidemiology and Response Division

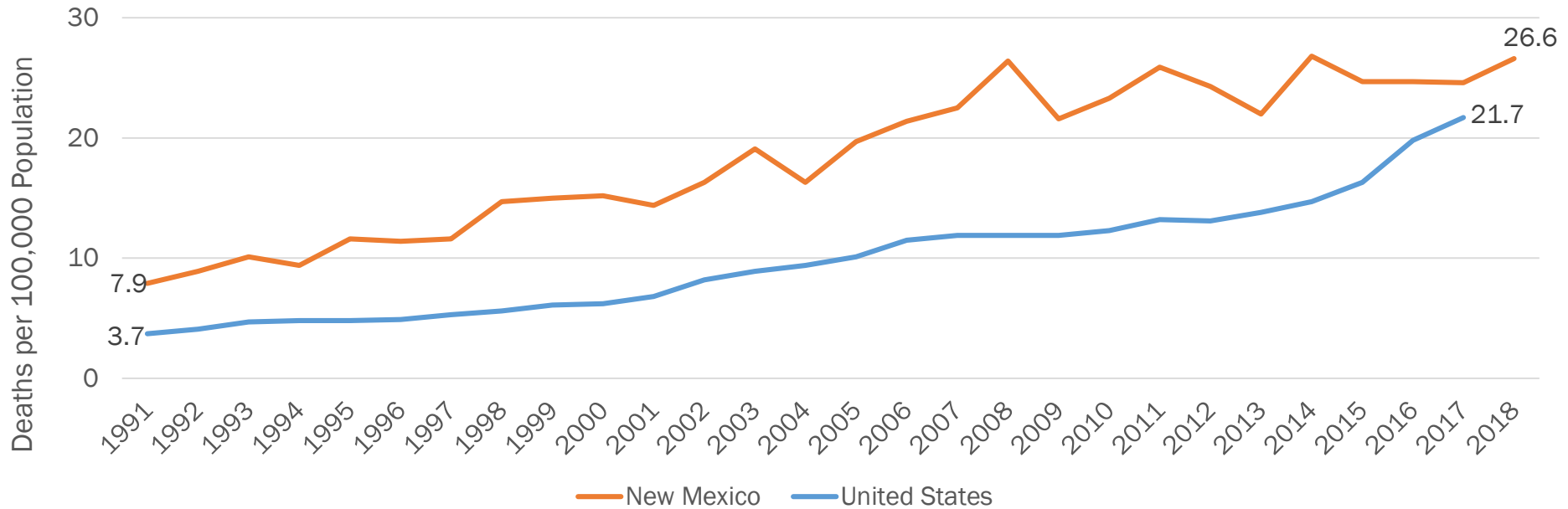


*Left: The number of clients participating in syringe services is growing steadily.*



# Drug Overdose Death Rates

## New Mexico, 1991-2018, and U.S., 1991-2016



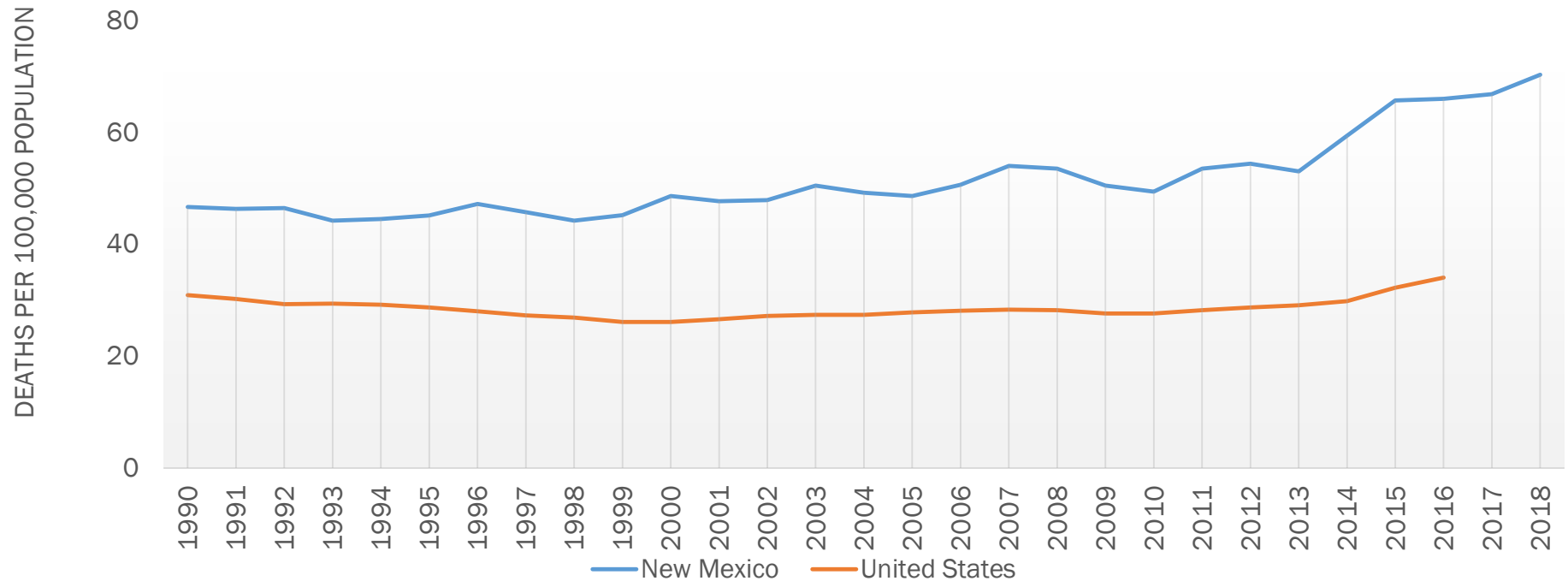
Rates have been age-adjusted to the standard U.S. 2000 population

Source: NMDOH, Bureau of Vital Records and Health Statistics; CDC WONDER



# Alcohol-Attributable Death Rates <sup>21</sup>

## New Mexico, 1990-2018, and U.S., 1990-2016

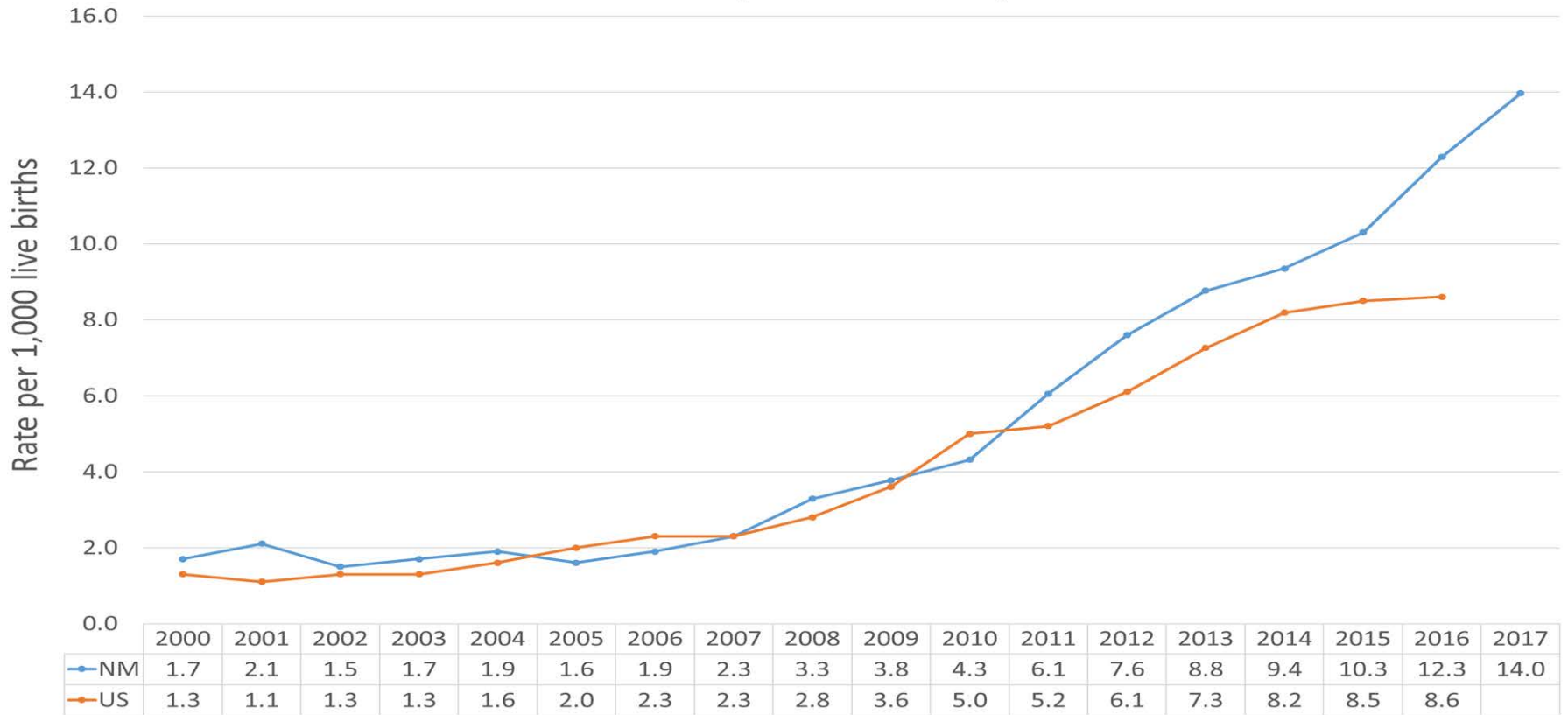


Rates have been age-adjusted to the 2000 U.S. standard population

**Data Sources: NCHS (US); NMDOH BVRHS; UNM-GPS; IBEB SAES; CDC ARDI v. 2**



# Neonatal Abstinence Syndrome – NM (2000-2017) & The US (2000-2016)



Neonates who have had in utero exposures from maternal substance abuse can experience effects, including drug toxicity and withdrawal. The number of babies born with opiate exposure in NM has more than quadrupled in the past decade.



# Improve Population Health

## Request includes:

- \$200 thousand to prevent Neonatal Abstinence Syndrome
- \$184.5 thousand for the state's 39 health councils to address local public health needs
- \$400 thousand for the trauma system fund to support the development of new trauma centers statewide
- \$200 thousand for public health nurses to work in the schools to increase vaccination coverage.
- \$1 million to improve toxicology, processing, and staffing in the state lab division



# Health Certification, Licensing, and Oversight

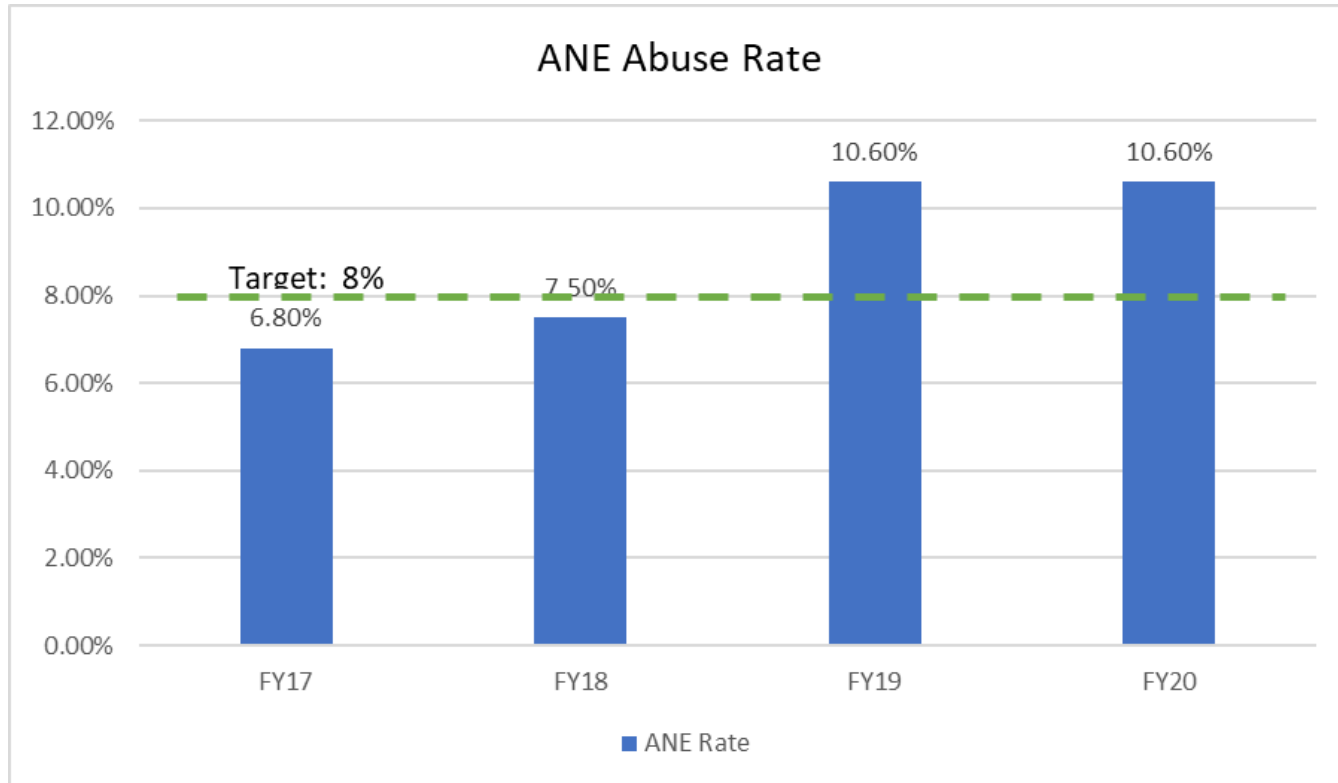
Requesting \$1.3 million for investigations of abuse, neglect, and exploitation to improve oversight of:

- boarding homes
- crisis triage centers
- assisted living facilities





# Health Certification, Licensing, and Oversight - Incident Management Bureau HCBW



The current increase in the abuse rate to 10.6% is a direct reflection of the increase and completion of backlogged cases. *As of September 30, 2019, all backlog cases were completed and closed.*

# Facilities Revenue Plan

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- Assure safety net services for all
- Appropriate placements
  - Nurses
    - 35 more than last year
  - Certified Nursing Assistants and Psychiatric Technicians
    - 33 more than last year



*DOH is working to replace beds and equipment at Fort Bayard Medical Center and Turquoise Lodge Hospital with capital funding.*



# Facilities Revenue Plan (con't) <sup>27</sup>

- Work with partners to leverage patient billing:
  - Seeking accreditation for Turquoise Lodge Hospital
  - Expanding billable services such as Medication Assisted Treatment,
  - Improving DOH billing capacity, and
  - Contracting for a new Electronic Health Record



*Left: Turquoise Lodge Hospital (TLH) in Albuquerque. In June, TLH moved as part of a joint effort with Bernalillo County to better align state and local resources to address behavioral health and substance misuse treatment needs.*

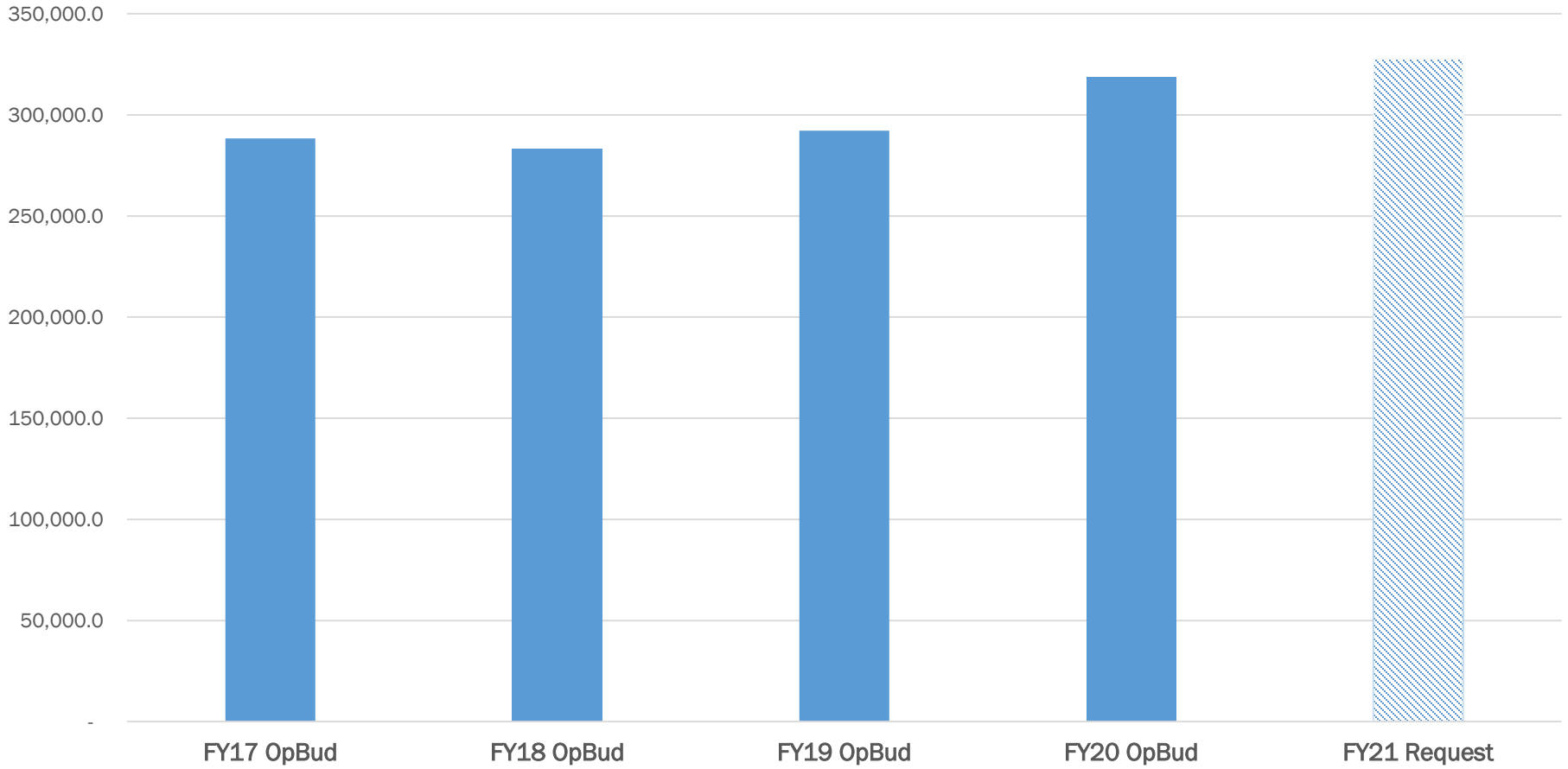


# Facilities Revenue Plan (con't) <sup>28</sup>

- Develop long-term economic feasibility plan and determine:
  - Whether local populations are sufficient to sustain facility
  - Whether we can improve our use of best practices
  - What safety net services are not offered that could be
  - What services do we currently offer that are not safety net
  - Whether we are leveraging all available revenue streams
  
- Inform future master planning activities



# General Fund Appropriation Trend FY17-FY21



# Thank you!

