

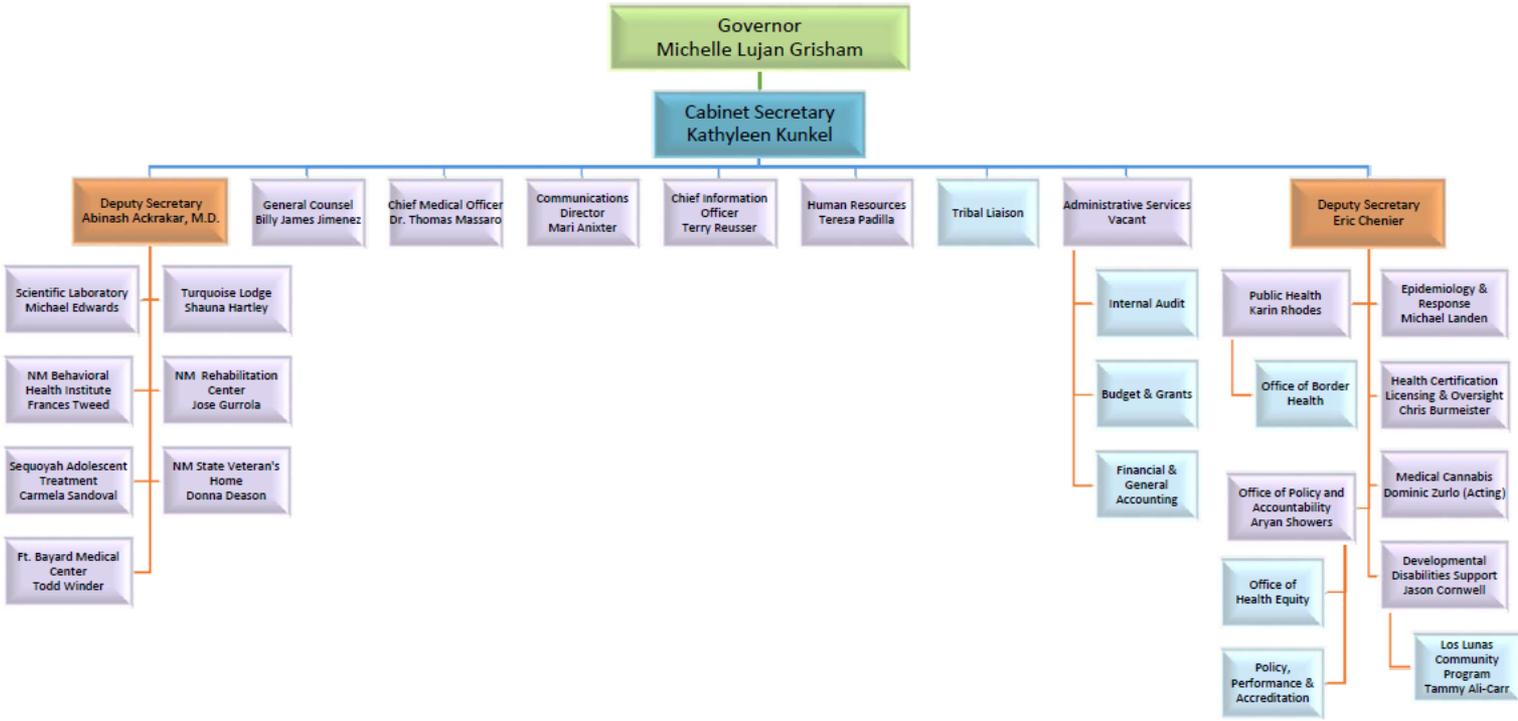


LFC Budget Hearing

December 10, 2019

Kathy Kunkel, Cabinet Secretary





Kathyleen M. Kunkel

Kathyleen Kunkel, Cabinet Secretary
October 2019



Our Mission, Vision, & Values

Vision: A Healthier New Mexico

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

Values: Accountability, Communication, Teamwork, Respect, Leadership, Customer Service

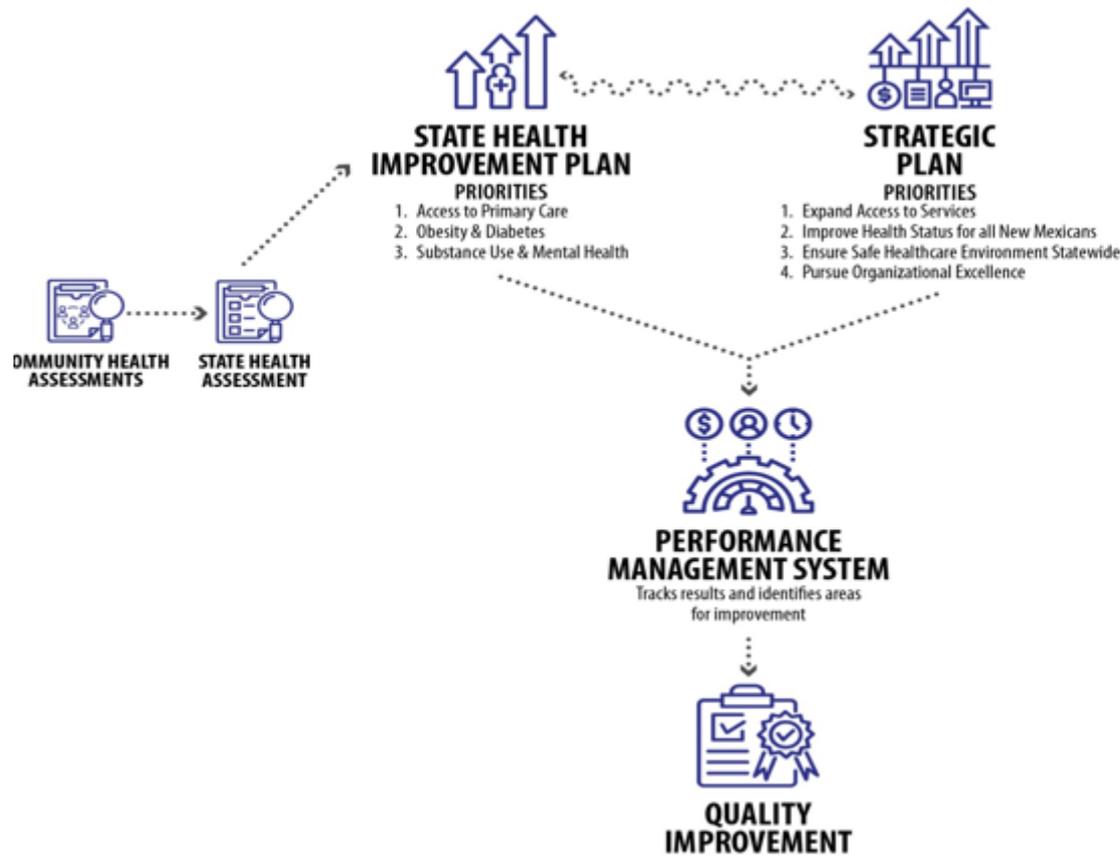


NM Department of Health

Developmental Disabilities Supports Services	Facilities Management	Public Health
<ul style="list-style-type: none"> • Home & Community Based Support • Medically Fragile Program • Mi Via Self-Directed Support • Family Infant Toddler Program • Autism Spectrum Disorder Services • Medicaid Intake & Eligibility 	<ul style="list-style-type: none"> • Fort Bayard Medical Center • Los Lunas Community Program • New Mexico Behavioral Health Institute • New Mexico Rehabilitation Center • New Mexico State Veterans Home • Sequoia Adolescent Treatment Center • Turquoise Lodge Hospital 	<ul style="list-style-type: none"> • Diabetes Prevention & Control • Obesity, Nutrition & Physical Activity • Tobacco Use Prevention & Control • Family Health & Planning • Heart Disease & Stroke Prevention • Overdose Prevention & Harm Reduction • Infectious Disease Prevention & Control • School-Based Health • Maternal & Child Health & MCH Epidemiology • Oral Health • Cancer Prevention & Control • Refugee & Border Health • Primary Care & Rural Health • Children & Youth with Special Health Care Needs
<h3 data-bbox="104 486 513 522">Epidemiology & Response</h3> <ul style="list-style-type: none"> • Infectious Disease Tracking • Public Health Surveillance • Disease Control • Injury Prevention • Vital Records & Health Statistics • Emergency Medical Systems & Health Emergency Management • Environmental Health & Health Systems Epidemiology • Health Assessments • Substance Use Epidemiology 	<h3 data-bbox="658 675 996 753">Health Certification, Licensing & Oversight</h3>	<h3 data-bbox="1147 839 1470 875">Scientific Laboratory</h3>
<h3 data-bbox="104 946 382 982">Medical Cannabis</h3>	<ul style="list-style-type: none"> • Health Facility Licensing • Certified Nurse Aide Registry & Training • Caregivers Criminal History Screening • Employee Abuse Registry • Abuse, Neglect & Exploitation Investigations (DD Waiver) 	<ul style="list-style-type: none"> • Indigenous & Exotic Infectious Disease Testing • Blood Alcohol Testing • Drinking Water Testing • Chemical Contaminants and Toxin Exposure • Drug Screening & Drug Confirmation Services
<ul style="list-style-type: none"> • Patient Registry • Rule & Regulation Promulgation • Licensing Requirements Inventory Control & Quality Assurance 		



Planning & Performance Monitoring Process



Department of Health

FY 21-23 Strategic Plan

NMDOH's goal for FY21 is to facilitate an integrated strategic planning process in order to better:

- Embed our mission, vision, values and priorities inside our organization at every level
- Use Performance Management to institute a results-based organization
- Strengthen and expand best practices through reaccreditation



Department of Health

FY21-23 Strategic Plan Goals

- Expand Access to Services
- Improve Health Status
- Ensure Safe Healthcare Environment Statewide
- Pursue Organizational Excellence

FY20: 44 AGA Performance Measures

FY21: 76 AGA Performance Measures



Department of Health

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
Total	589,597.1



DOH Budget Request Approach

Request adequate funding for critical statewide priorities

1. Eliminate the 13.5 year DD Waiver Waiting list
2. Impact population health by:
 - a) *Reducing* transmission of infectious diseases via increased vaccination rates and syringe services
 - b) *Addressing* substance use disorder
3. Provide oversight and quality of care in New Mexico's boarding homes, hospitals, crisis triage centers, and other facilities
4. Improve safety net services for the elderly, veterans, and others in the DOH facilities and community programs

-DDSD
-PHD/ERD
-DHI
-FACILITIES
-SLD



DD Waiver Trends Since FY2011



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Challenges in Reducing the Waitlist

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- 360 added to waitlist on average each year (yet only 6 attrition allocations each month)
- 25 expedited allocations this year
- 4530 completed applications
- 413 allocations on hold
- 2639 under the age of 22
- Longest wait in metro region (since 1/24/2007)



Solutions that will provide relief for waitlist applicants

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

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New Supports Waiver Details

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- Governor's Initiative (April 2020 pending funding)
- Created to bridge service gap from waitlist to allocation for Traditional or Mi Via waivers
- Traditional or Self-Directed options
- Will serve an additional 2,000 individuals per year
- \$10K allocation limit per person
- 10 services based on waitlist survey
- Repurposes state general fund dollars to leverage federal Medicaid revenue

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Reforming Existing Waivers

TRADITIONAL DD WAIVER

- Adopt Standardized Assessment Tool (for both waivers)
- Review Outlier Budgets to determine causation
- Implement the Supports Waiver

MI VIA WAIVER

- Review Outlier Budgets to determine causation
- Strengthen the Service Criteria to Inform Third Party Administrator (TPA)
- Increase oversight through Incident Management Bureau (IMB) to detect ANE
- Increase oversight through Quality Management Bureau (QMB) for provision of services
- Engaged with (NASDDS) National Association of State Directors of Developmental Disabilities Services for technical assistance to improve oversight of the Mi Via waiver

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DD, MF, & MI VIA Rates

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- 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



Caseload Growth in Family Infant Toddler

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- FIT had an average annual growth of 5%.
- FIT is moving from DDSD to ECECD in FY21
- FIT is a statewide network of 34 public and private providers
- FIT serves approximately 16,000 children and their families in Fiscal Year 2019
- FIT received a highest national rating from the US Office of Special Education Programs (OSEP) based on a number of performance indicators.

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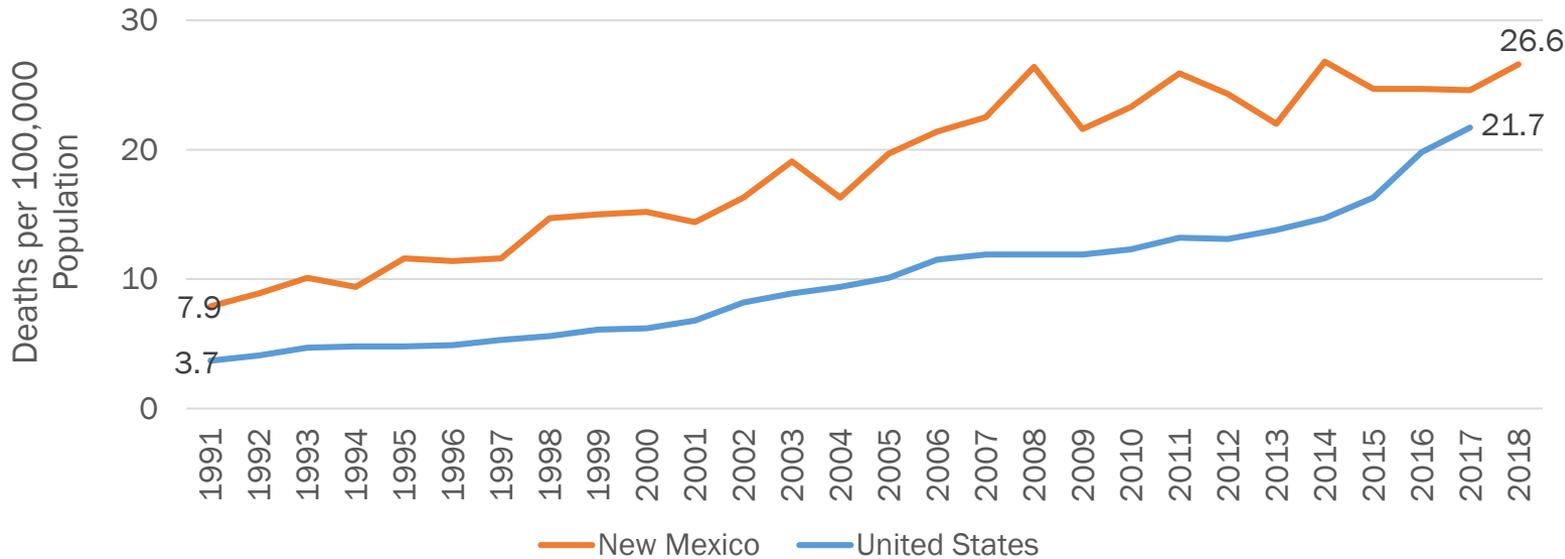
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Drug Overdose Death Rates

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

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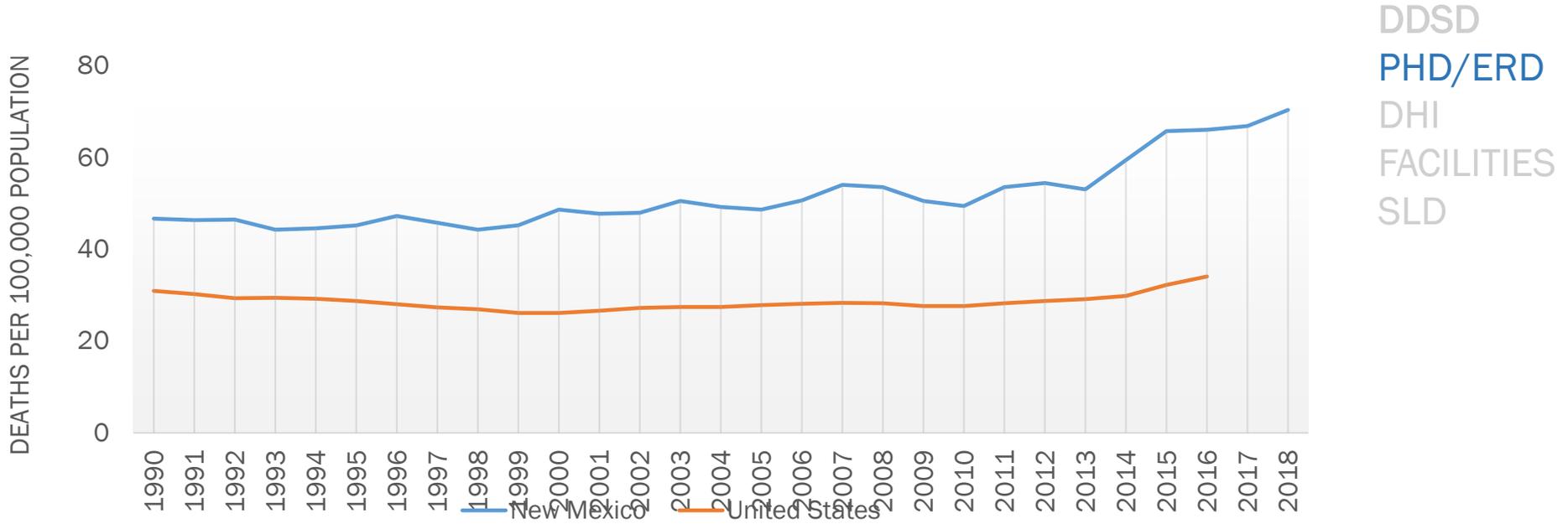
Rates have been age-adjusted to the standard U.S. 2000 population

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



Alcohol-Attributable Death Rates 18

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



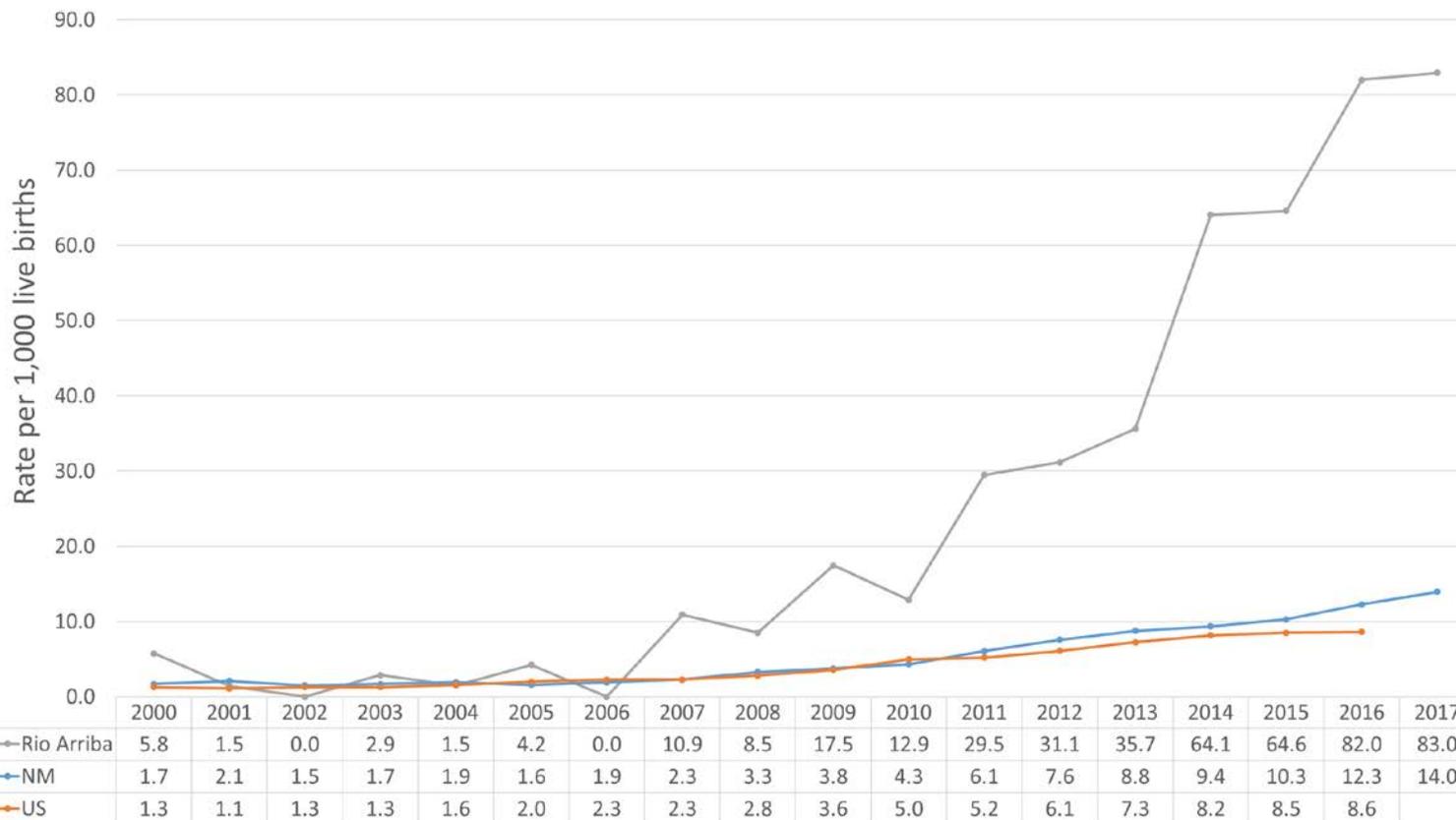
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Rates have been age-adjusted to the 2000 U.S. standard population

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



Neonatal Abstinence Syndrome – Rio Arriba County and NM (2000-2017) & the US (2000-2016)



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The graph above shows that the rates of neonatal abstinence syndrome (NAS) have been increasing both in NM and the US. The number of babies diagnosed with NAS in NM has more than quadrupled in the past decade. NAS babies represent but a subset of all babies born exposed to substances.



Improving Population Health

Requesting:

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



Substance Use Disorders

Request for critical services:

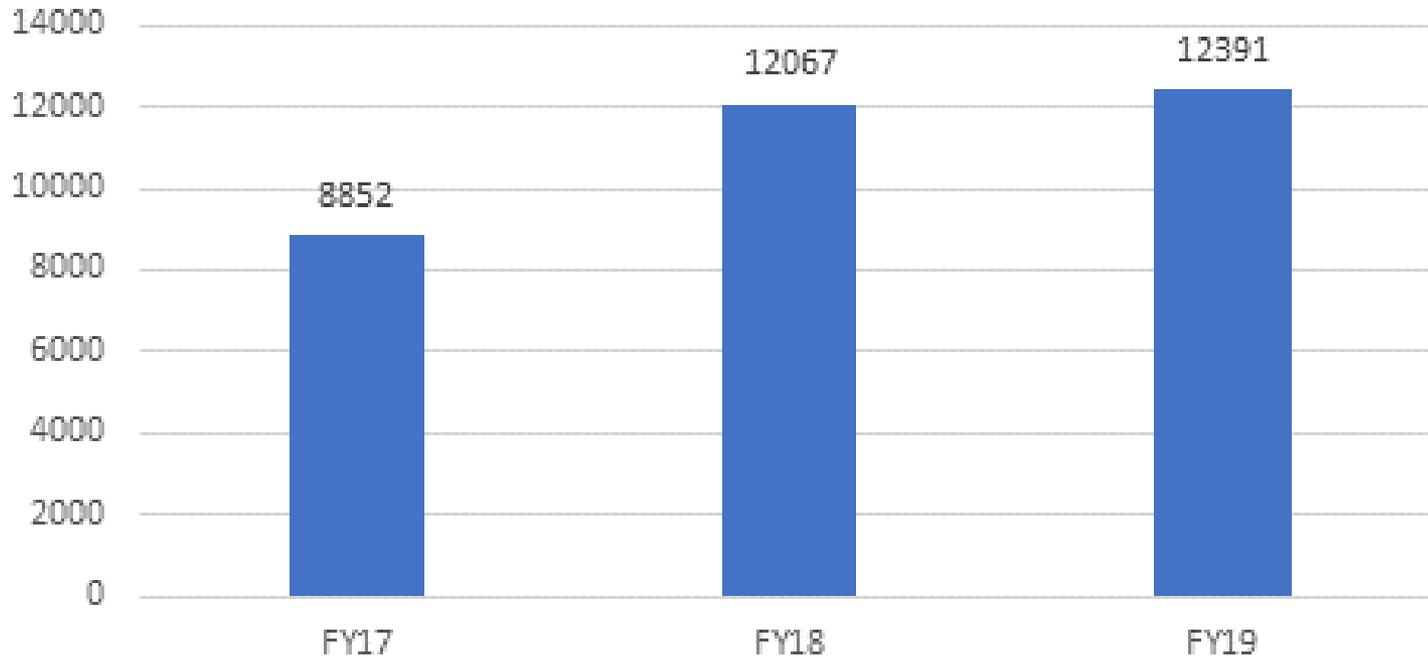
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- Increase Syringe services - \$400,000
- Expand Medication Assisted Treatment (MAT) in Public Health regions - \$450,000
- Neonatal Abstinence Syndrome Prevention - \$200,000
- Create “Office of Alcohol and Population Health” in Epidemiology and Response Division - \$180,000



Total Unduplicated Clients Participating in Syringe Services



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



Health Certification, Licensing, and Oversight

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

- Boarding Homes
- Crisis triage centers
- Assisted living facilities (237 licensed)



Assure Safety Net Services for All Facilities Revenue Plan

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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



Turquoise Lodge Hospital



Assure Safety Net Services for All ²⁵ Facilities Revenue Plan

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**

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Scientific Laboratory Overview

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- Provides laboratory testing for State and local agencies in infectious diseases, environmental hazards and impaired driving
- More than 125,000 tests per year
- Consultant services for partner agencies as well as healthcare community
- Expert testimony in courts for impaired driving.
- Run intoxilyzer breath alcohol program for state law enforcement agencies
- State Lab is currently experiencing a budget shortfall

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Thank you

Kathy Kunkel, Cabinet Secretary
New Mexico Department of Health

