HEALTH CARE

LEGISLATIVE HEALTH AND HUMAN SERVICES OPIOID FUND SPENDING

JUNE 27, 2025

DIRECTOR NICK BOUKAS, BEHAVIORAL HEALTH SERVICE DIVISION

INVESTING FOR TOMORROW, DELIVERING TODAY.

BEFORE WE START...

On behalf of all colleagues at the Health Care Authority, we humbly acknowledge we are on the ancestral lands of the original peoples of the Pueblo, Apache, and Diné past, present, and future.

With gratitude we pay our respects to the land, the people and the communities that contribute to what today is known as the **Great State of New Mexico**.

Learn more: About Taos Pueblo at Taospueblo.com

<image>

A cloudy morning looking over Taos Pueblo Photo provided by elpueblolodge.com



MISSION

We ensure New Mexicans attain their highest level of health by providing whole-person, cost-effective, accessible, and high-quality health care and safety-net services.

VISION

Every New Mexican has access to affordable health care coverage through a coordinated and seamless health care system.

GOALS



IMPROVE Leverage purchasing power and partnerships to create innovative policies and models of comprehensive health care coverage that improve the health and well-being of New Mexicans and the workforce.



SUPPORT Build the best team in state government by supporting employees' continuous growth and wellness.



ADDRESS Achieve health equity by addressing poverty, discrimination, and lack of resources, building a New Mexico where everyone thrives.



PROVIDE Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.



AGENDA

OPIOID SETTLEMENT FUNDS

- Fresh Start Rental Assistance (FSRA) Program
- Medication for Opioid Use Disorder (MOUD) in Public Health Offices



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MEET "JAMES"*

- Three years of homelessness had taken its toll on James. Constant battles with addiction, mental and emotional health struggles left him feeling isolated and hopeless.
- James is an older fellow who is alert and intuitive. We learned about the deep loneliness he had endured on the streets—alone, struggling, and uncertain about his future.
- James qualified for the Fresh Start program, and for the first time in years, had the opportunity to sleep in a warm, safe place of his own.





* Based on a real HCA client whose name and photo have been changed.

FRESH START RENTAL ASSISTANCE (FSRA) PROGRAM

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- The Fresh Start Rental Assistance (FSRA) program, overseen by BHSD, originated with the opioid settlement funding in State Fiscal Year 2024.
- Programming began in December 2023 with a total allocation amount of \$1.2M for FY24 and \$1.8M in FY25.
- Eligibility criteria includes Opioid Use Disorder (OUD), homelessness or precariously housed, active in behavioral health or recovery support services, and at or below 60% Area Median Income (AMI).
- Eligible individuals are supported with 6-9 months of rental assistance or \$10,000 of rental assistance, whichever comes first.
- Eligible individuals are also supported with a stipend of up to \$1,000 for furniture and/or basic necessities for their unit.



Providers/Counties – NM Reentry Center, YDI, Serenity Mesa (Bernalillo), Mental Health Resources (Curry, Roosevelt, Quay, DeBaca, Harding), Carlsbad LifeHouse (Eddy), Mesilla Valley Community of Hope (Dona Ana), Espanola Pathways (Rio Arriba), Dreamtree (Taos, Colfax, Mora, San Miguel, Union), Supporting People In Need (Grant, Luna, Hildago)



FRESH START RENTAL ASSISTANCE PROGRAM

- FY24 funding, \$1.2M, was fully expended to support initial operation costs and clients with rental assistance.
- Due to the high need in FY25, FSRA funding was increased from \$1.8M to \$2.7M; \$2.4M has been expended to date.
- FSRA has 9 providers who serve 13 counties.
- BHSD received \$1.8M for FY26, which will be shifted to an allocation amount for each provider. BHSD considered population size and provider activity in FY25 when determining each allocation amount.



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8

Investing for tomorrow, delivering today.

MEDICATION FOR OPIOID USE DISORDER (MOUD) IN PUBLIC HEALTH OFFICES

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- July 2024 BHSD contracted with Dr. Liederman, a subject matter expert in MOUD, to connect with clinical network to provide telehealth through DOH public health offices across the state.
- Two-day training was completed at all public health offices in a collaboration with DOH to expand TeleMAT (Medicated Assisted Treatment) in rural and frontier populations in need.
- Funding included writing of the protocol and ensuring all offices were connected for telehealth services.
- Enabled and enhanced direct clinical care throughout the network of public health offices.
- Consumers without insurance can access services through their public health office to include Medication for Opioid Use Disorder (MOUD) services.



Most Americans (61%) don't know that primary care physicians can prescribe addiction treatment

B del Pozo, et al. <u>Knowledge, attitudes, and beliefs of US adults about opioid use disorder treatment in primary care</u>. *JAMA Network Open.* DOI: 10.1001/jamanetworkopen.2024.19094 (2024).



MEDICATION FOR OPIOID USE DISORDER (MOUD) IN PUBLIC HEALTH OFFICES

- By June 1, 2024, 33 of 42 public health offices were participating.
 - 2 additional sites have been added in FY25 totaling **35** public health offices participating.
- Funding encouraged buy-in of public health offices to participate in telehealth services for MOUD.
- Telehealth services include eprescribing medication to a local and convenient pharmacy for participants to fill their prescriptions.



Investing for tomorrow, delivering today.

JAMES TODAY*

- It has been four months since James has successfully transitioned out of the Fresh Start program and into stable housing.
- Through the program, James was identified for other supportive services, such as MOUD.
- Recently, a well-groomed older man with a confident presence stopped by to say hello. It was James!
- Not only has he maintained his stability, but he has also begun a new chapter as an entrepreneur. He is currently working to start a small business using his love for dogs and his experience to give back to the community.
- We sometimes are not aware of the impact these efforts, programs and works have on people and their communities. However, it is a prime example of people coming together to lift each other up in selfempowerment. *Everyone deserves a second chance.*





* Story based on a real HCA client whose name and photo have been changed.



THANK YOU & QUESTIONS

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