





MEDICAID & DEVELOPMENTAL DISABILITIES SERVICES PROGRAM UPDATE

OCTOBER 17, 2023

MEDICAID ACTING DIRECTOR LORELEI KELLOGG & DOH DDSD DIRECTOR JOSÉ ACOSTA

INVESTING FOR TOMORROW, DELIVERING TODAY.

BEFORE WE START...

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

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



Evening drive through Corrales, NM in October 2021. By HSD Employee, Marisa Vigil





AGENDA & PRESENTERS

- HCA Reorganization
- Medicaid Public Health Emergency Unwinding
- Turquoise Care Innovations
- Developmental Disabilities
 Services Division

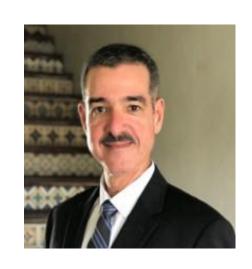


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MEET MARIA*

- Power wheelchair in and out of repair for 3 months
 - Repair clinic sometimes involves travel more than three hours from home
 - Part on backorder from manufacturer
 - Insurance delays to approve payment of the part
 - Insurance only pays for a new wheelchair every 5 years
- Backup wheelchair use intermittent
 - Frame did not accommodate transportation for "tiedowns" in the van
 - Callouses developed on her hands due to selfpropelling the manual chair vs. powerchair
 - Did not offer the support of a customized tilting wheelchair to minimize edema and pressure points
 - Led to less time in the community

*Based on a real person, whose name and photo are changed.





HSD IS BECOMING THE HEALTH CARE AUTHORITY

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

•HCA 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.



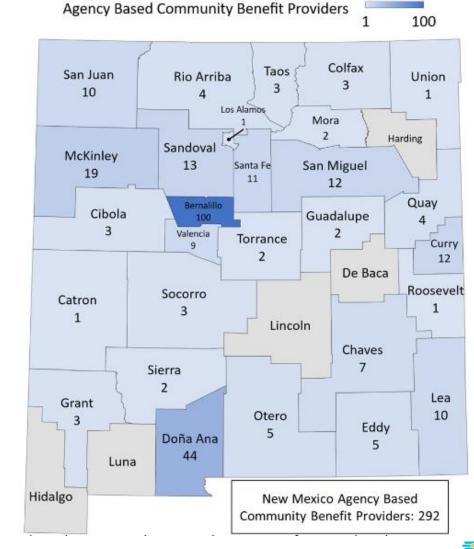


BETTER TOGETHER: MEDICAID & DEVELOPMENTAL

DISABILITIES SERVICES DIVISION

With the HCA reorganization....

- Shared strategic goals
 - Provider rates
 - Program enhancement
- Improved program oversight
- Coordinated stakeholder response



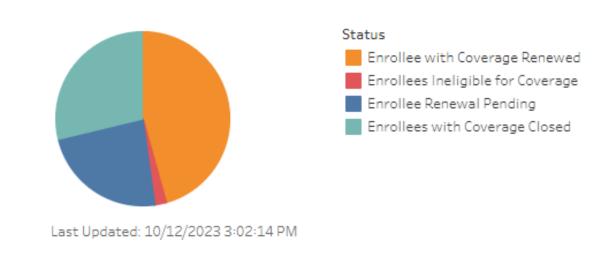


PUBLIC HEALTH EMERGENCY MEDICAID UNWINDING: RETURNING TO PRE-PANDEMIC OPERATIONS

- New Mexico began unwinding in April with the first closures occurring effective May 1
- We have 12 months to complete the unwinding (through April 2024)
- Prioritized financially ineligible members over the first four months (April-July); renewals for eligible members begin in August, with most vulnerable populations in early 2024.

Medicaid Renewal Tracking for August 2023

| Enrollees with Renewals Due | Enrollees with Coverage Renewed | Enrollees Ineligible for Coverage | Enrollee Renewal Pending | Enrollees with Coverage Closed |
|--------------------------------|---------------------------------------|---|--------------------------------|--------------------------------------|
| 66,585 | 30,399 | 1,435 | 15,599 | 19,152 |

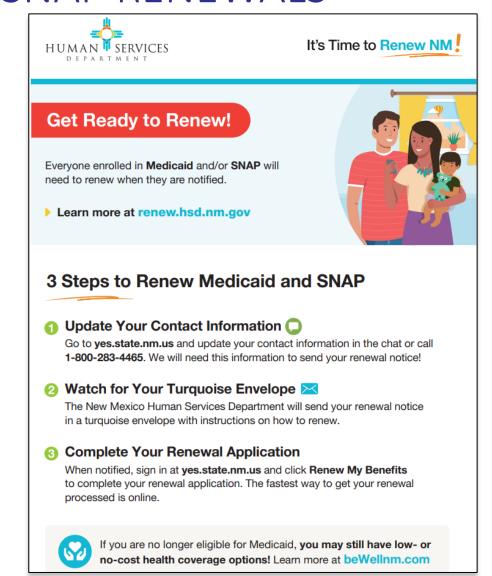






HSD IS WORKING WITH CENTERS FOR MEDICARE & MEDICAID SERVICES TO EASE MEDICAID AND SNAP RENEWALS

- Maintain continuous enrollment for children aged 0-6, eliminating need for recurrent reenrollment. Goal is to launch by 2024, pending approval from CMS.
- Automatically re-enroll eligible children into Medicaid who have lost coverage during the unwinding, pending CMS approval.
- Extend deadline to submit Medicaid renewal application from 45 to 75 days.
- We received CMS approval to renew automatically Medicaid coverage for New Mexicans with incomes up to 100% of the Federal Poverty Level (\$14,580/yr. family of 1; \$30,000/yr. family of 4).





TURQUOISE CARE: TRANSFORMING HEALTH CARE FOR NEW MEXICANS BEGINNING JULY 2024

- Whole Person Care with a Focus on the foundations of community health (Social Determinants of Health):
 - Comprehensive healthcare is more than just addressing immediate medical needs. Recognizing the importance of whole person care, we advocate for a holistic approach to care. Factors like socio-economic status, education, neighborhood and physical environment, employment, and social support networks play a pivotal role in determining health outcomes. By integrating these determinants into our healthcare strategies, we can provide truly effective and empathetic care to New Mexicans.
- Increased Program and MCO (Managed Care Organization) Accountability:
 - Accountability is paramount in ensuring that healthcare services are delivered effectively and ethically. By holding programs and MCOs to higher standards, we can ensure that resources are utilized efficiently, and patients receive the care they deserve. Regular audits, transparent reporting, and feedback mechanisms can enhance the trust between the public and healthcare providers, promoting a system where quality is non-negotiable.
- Expansion of Services to Meet New Mexicans' Needs:
 - New Mexico's diverse population has unique and evolving healthcare needs. As such, it's crucial to be adaptive and responsive. By expanding the range of services offered, we can cater to the specific requirements of different communities. Whether it's mental health support, specialized treatments, or preventive care programs, our commitment is to continuously evolve and adapt to serve every New Mexican better.

Turquoise Care (NM's new Medicaid program)



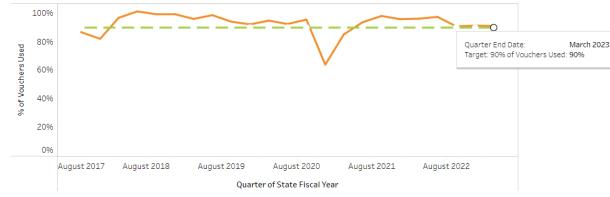




TURQUOISE CARE: TRANSFORMING HEALTH CARE FOR NEW MEXICANS BEGINNING JULY 2024

- In negotiations with the federal government for January 2024 go-live of key programs:
 - Expansion of supportive housing for individuals with serious mental illness;
 - Expansion of Centennial Home Visiting Evidence Based Models;
 - Continuous eligibility for children up to age six;
 - Expansion of home and community-based waiver services by adding enrollment slots;
 - Addition of chiropractic services to the Medicaid benefit.

As a person with behavioral health (BH) issues and housing insecurity, what are the chances I will get assistance with securing stable housing through the Behavioral Health Services Division's (BHSD's) supportive housing programs and services? (↑qood)



Source: https://sites.google.com/view/nmhsdscorecard/goal-1/BH



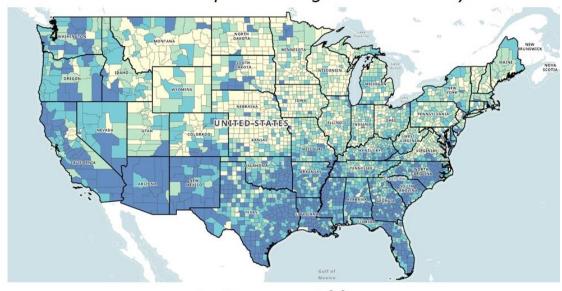


TURQUOISE CARE: TRANSFORMING HEALTH CARE FOR NEW MEXICANS BEGINNING JULY 2024

- Centers for Medicare and Medicaid Services (CMS) issued a formal extension of Centennial Care 2.0 through Dec 31, 2024.
- Ongoing negotiations with CMS on additional 1115 programs:
 - Additional new housing supports programs
 - Justice involved population prerelease coverage
 - Food supports

SOCIAL VULNERABILITY INDEX BY COUNTY, 2020

Darker color represents higher vulnerability



Level of Vulnerability



Source: https://www.atsdr.cdc.gov/placeandhealth/svi/interactive_map.html





USING MEDICAID FLEXIBILITIES TO BETTER SERVE PEOPLE WITH 12 DISABILITIES & THEIR FAMILIES

Programs covered by this waiver:

- Developmental Disability (DD) Waiver
- Mi Via Waiver
- Medically Fragile Waiver

Super Allocation Project

- Funded through dollars made available to states with the American Rescue Plan Act (ARPA)
- Elimination of DD wait list with ongoing budget requests to keep wait list at zero

1915c Amendment

- Rate increases \$10.2m appropriation to DOH
- Expansion of Legally Responsible Individuals as caretakers to DD and MedFrag waiver recipients

| Super Allocation | | | |
|---|-------|--|--|
| Status at beginning of Super Allocation - November 22, 2021 | | | |
| Wait List (Complete) | 4,136 | | |
| Allocation On Hold | 494 | | |

| Status as of September 29, 2023 | | |
|---------------------------------|-------|--|
| Wait List (Complete) | 378 | |
| Allocation On Hold | 1,092 | |

| Letters & Responses | | | |
|--------------------------|-------|--------|--|
| Letters of Interest Sent | 4,967 | % | |
| Accepted allocation | 3,063 | 61.67% | |
| Placed on hold | 680 | 13.69% | |
| Closed - deceased | 24 | 0.48% | |
| Closed - refused | 42 | 0.85% | |
| Closed - no response* | 1,149 | 23.13% | |
| TBD | 9 | 0.18% | |

^{*} Allocations are closed due to no response after multiple attempts to contact or engage the individual/guardian. An allocation is re-opened if the individual or guardian contacts IEB. To date 132 allocations have been re-opened upon request.

| Allocation Status | | | |
|-----------------------|-------|--------|--|
| Accepted allocation | 3,063 | % | |
| Placed into Program** | 2,105 | 68.72% | |
| Allocation in Process | 958 | 31.28% | |

^{**} Individuals completed the allocation process and are approved to or have started receiving services. The file is closed by IEB and transferred to the regional office.





PCS RATES IN REVIEW

Temporary rate increases provided during the COVID-19 PHE using ARPA dollars:

- 15% temp increase FY21-22
- 10% temp increase FY23
- 5% increases FY24

Permanent Increases:

- Minimum Wage and Paid sick leave increases
- HB2 5.32% permanent increase

Future work:

- DD waiver rate review conducted in 2023
- Maintain pay parity between waiver and EPSDT providers

| Fiscal Year | Total Mi Via | Total DD | TOTAL |
|-------------|--------------|---------------|---------------|
| FY 2021 | \$3,631,929 | \$7,867,757 | \$11,499,686 |
| FY 2022 | \$22,673,959 | \$50,781,949 | \$73,455,907 |
| FY 2023 | \$17,269,327 | \$41,440,839 | \$58,710,166 |
| FY 2024 | \$1,596,435 | \$4,306,047 | \$5,902,482 |
| TOTAL | \$45,171,649 | \$104,396,592 | \$149,568,241 |





DEVELOPMENTAL DISABILITIES SUPPORTS DIVISION (DDSD) 2018

- 2023

- Average client age:
 - Mi Via and DD = 41
 - Allocation in process= 31
- Waitlist reduced from 4,479 to 378
- Allocation in process = 734
- Allocation on hold have deferred services = 1,092
- Expected annual growth = 350 to 400



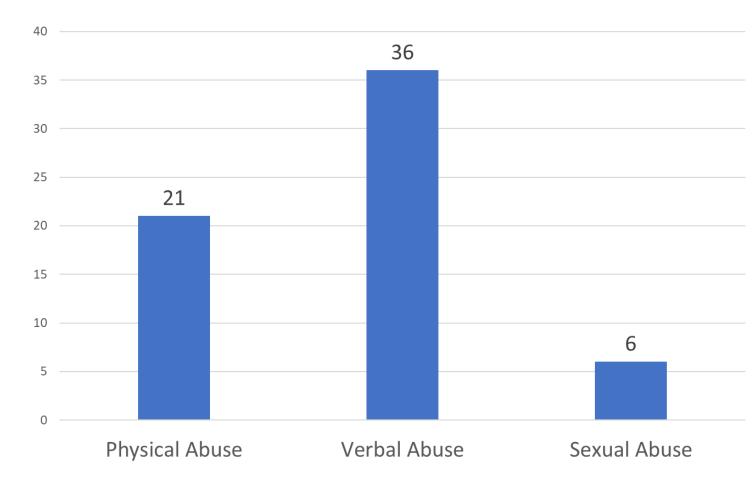




NO EXCUSE FOR ABUSE, NEGLECT, AND EXPLOITATION (ANE)

- Approximately 60 calls per week
- Substantiated incidents 777 in 547 individuals
 - Neglect = 624
 - Exploitation = 90
 - Abuse 63
- Law enforcement referrals 225
- Wellness visits 1316 new individual allocations and 321 prior victims ANE
- Committed to 2 annual visits (approx. 15,300)
- Other initiatives
 - Validated risk model
 - Decrease survey burden allowing in person interactions
 - Working with providers and participants enhance training
 - Address issues of burn out

Incident Management Bureau FY 23 Report: Abuse



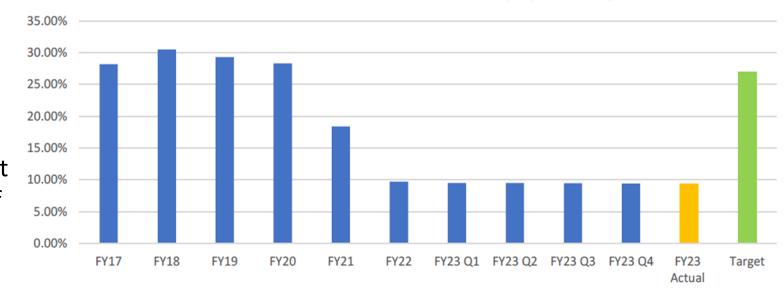




EMPLOYMENT SUPPORTS

- Employment First -individuals with the most significant disabilities, are capable of full participation in Competitive Integrated Employment (CIE)
- Want to Work Project- 500 people in our system who have indicated that they want to work
- Partners for Employment- Department of Health, Public Education Division of Vocational Rehabilitation, Dept. of Workforce Solutions, and the University of New Mexico Center for Development and Disability

Percent of Adults Between Ages 22 and 64 Served on a Developmental Disabilities Waiver (Traditional or Mia Via) Who Receive Employment Supports.







DENTAL CARE

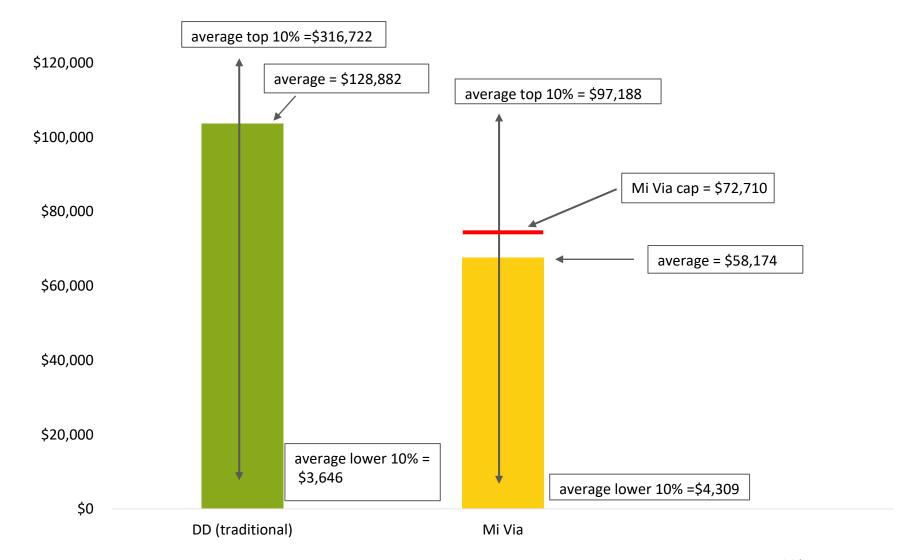
- Three tiers of care:
 - Specialized dentists
 - Sedation
 - General anesthesia
- Waitlist DDSD clinic 209 individuals going back Sept. 2022
- August 2023
 - 79 visits
 - 5 new
- Collaboration with UNM
- Opportunities with contracting
- Filling vacant positions







INDIVIDUAL EXPENDITURES FY 23







PROVIDER RATES

American Rescue Plan Act

| Increase (%) | Dates | |
|--------------|------------------------------|--|
| 15 | April 1, 2021-March 31, 2022 | |
| 10 | April 1, 2022-March 31, 2023 | |
| 5 | April 1, 2023- June 30, 2024 | |

Legislative base rate increase amendment %
 5.32 for all services

Public Consulting Group Rate Study Recommended (DD)

• Therapist = 8% to 35%



e.g. physical therapist

Direct Support Staff = current to 47%



e.g. customized community support individual, respite

Bundle Services = current to 36%



e.g. supported living (DSP + nursing + nutrition + transportation)

Mi Via = increase cap from \$72,710 to \$80,189





PUBLIC CONSULTING GROUP CAPACITY STUDY SEPTEMBER 2023

SAN JUAN

MCKINLEY

NORTHWEST

SOUTHWEST

BERNALILLO

METTIRO

- Report based on:
 - Surveys
 - Document reviews
 - Provider enrollment data

| Services | Regions with majority of counties with no slots | Regions with one or more counties with no slots |
|----------------------------------|---|---|
| Behavior Support Consultation | NW, SE | Metro, NE, NW, SE |
| Therapies | SE, SW | Statewide* |
| Supported Living (DD) | SW | NE, SE, SW |

^{*} Speech Therapy has availability in all counties in the Metro region

Source: Provider Capacity Assessment Presentation 9/23





COLFAX

INORTHEAST

SAN MIGUEL

GUADALUPE

ROOSEVELT

LEA

SOUTHEAST

EDDY

DDSD FUTURES

- Centers for Medicare and Medicaid Services (CMS) amendments
- House Bill 395
- House Memorial 5
- Consolidated information system
- Health Care Authority Department (HCAD)
- Abuse, Neglect and Exploitation Prevention







MARIA TODAY*

- DDW Interdisciplinary Team (IDT) Coordination
 - Case Manager and Physical Therapist coordinating repairs with Durable Medical Equipment (DME) provider
 - Training on use of backup wheelchair by Physical Therapist
 - Obtained gloves to prevent callouses on hands
 - Living Support Provider and Customized Community Support provider coordination to address transportation needs
- DDSD Collaboration
 - Regional Office Request for Assistance (RORA) submitted by CM
 - Assistance provided through Therapy Services Unitcoordinate with DME provider and the IDT
 - Regional office coordination with IDT
 - Power wheelchair repaired and back in use within 1 month



*Based on a real HSD person, whose name and photo are changed.











QUESTIONS & COMMENTS

INVESTING FOR TOMORROW, DELIVERING TODAY.







APPENDIX

INVESTING FOR TOMORROW, DELIVERING TODAY.

NEW MEXICO HEALTH CARE AUTHORITY GOALS

- •Goal 1: Leveraging 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.
- Goal 2: Achieve health equity by addressing poverty, discrimination, and lack of resources, building a New Mexico where everyone thrives.

• Goal 3: Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.

• Goal 4: Build the best team in state government by supporting employees' continuous growth and wellness.





PUBLIC HEALTH EMERGENCY UNWINDING TIMELINE

HSD MUST COMPLETE ALL MEDICAID RENEWALS FROM APRIL 2023 TO APRIL 2024

April-July 2023

Complete
 renewals for
 ~110,000 New
 Mexicans who
 no longer meet
 Medicaid
 income
 eligibility
 requirements
 (loss of coverage
 begins in the
 month of May).

August 2023– January 2024

- Complete renewals for Medicaid customers who according to our data will continue to be eligible.
- SNAP &
 Medicaid
 renewals
 aligned as much
 as possible –
 Medicaid to be
 completed with
 SNAP

February–March 2024

 Complete renewals for Medicaid customers receiving institutional and/or home and communitybased care. (Allowing more time to reach out to this population and facilitate transitions). April 2024

 Medicaid unwinding complete.





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Investing 6994675 w, delivering today.

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Investing for tomorrow, delivering today.