

ACTION PLAN

Submitted by agency?	Yes
Timeline assigned?	No
Responsibility assigned?	No

“Access to and availability of effective contraceptive methods contribute to the steady decrease in New Mexico’s teen birth rate. The broad range of contraceptive methods including IUDs and implants (most-effective) and pills, injectable, and rings (moderately-effective) is available at 41 of the 43 public health offices that offer family planning services. In December 2020, 34 Public Health Offices provided family planning services, due to COVID response. Since 2014, the teen birth rate among 15-to-19-year-olds in New Mexico has declined by 34.8% to 24.4 per 1,000 in 2019 (NM IBIS) and is tied in 2018 for the seventh highest in the nation (at 25.2 per 1,000, with Tennessee and Texas) (National Center for Health Statistics).”

Source: Department of Health

Department of Health

The Department of Health’s (DOH) mission is to promote health and wellness, improve health outcomes, and assure safety net services for all people in New Mexico. DOH reported some increases in performance targets across the agency during the third quarter of FY21.

Covid-19

A significant portion of the state’s response to Covid-19 is either managed, delivered, or coordinated by the Department of Health. Given the tremendous department resources being dedicated to the pandemic, DOH began reporting temporary performance measures regarding this work. New Mexico has continued to rank highly nationally for vaccine distributions. As of April 2021, DOH reported that 47 percent of New Mexicans have been fully vaccinated.

Covid-19	FY21 Target	FY21 Q1	FY21 Q2	FY21 Q3
Covid-19 swab tests performed	N/A	104,540	180,511	60,246
Hours between the time a case is identified and when the case is contacted by Epidemiology and Response Division to isolate	24	24	25	21
Hours between the time a case contact is identified and when the case contact is contacted by Epidemiology and Response Division to quarantine	36	30	29	25
Facility admissions (and hospital readmissions) having two verified Covid-19 negative tests	100%	63%	53%	71%
Staff tested for Covid-19	20%	100%	100%	100%
Patients/residents tested for Covid-19	25%	100%	100%	100%
Number and percent of individuals receiving Home and Community Based Services (HCBS) who have received a Covid-19 test	N/A	2,864/ 5,134 16.8%	1,416/ 5,239 27.0%	967/ 5,364 18%
Number and percent of individuals receiving Home and Community Based Services (HCBS) who have received a Covid-19 test	N/A	24/5,134 0.7%	373/ 5,239 7.1%	115/ 5,364 2.1%
Number and percent of individuals receiving Home and Community Based Services (HCBS) who are confirmed positive for Covid-19	N/A	518/596 86.9%	1,201/ 1,558 77.1%	3,363/ 4,657 72.2%
Covid-19 tests resulted within 48 hours of receipt in the laboratory	95%	82%	99%	99%
Percent and number of individuals who have been fully vaccinated	N/A	N/A	N/A	1,525/3, 258 47%

Public Health Program

The Public Health Program continues to be a cornerstone of the state’s response to Covid-19. Given the significant size the of program’s response to the pandemic and statewide closures the program has reported declines in performance on tobacco cessation services and behavioral health in school based health centers. During the third

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quarter, the program reported meeting performance targets for females receiving the most or moderately effective contraception, increased healthy eating opportunities for children, and participation in diabetes prevention programming. During the first quarter, DOH was unable to refer participants to diabetes prevention services but increased performance during the second and third quarters. In 2018, an estimated 567 thousand New Mexican adults had prediabetes and only three out of 10 were aware of their condition. The CDC states without weight loss and physical activity, 15 to 30 percent of pre-diabetics will develop diabetes within 5 years, but with access to a services change program the risk can be reduced by nearly half.

Budget: \$170,302.6	FTE: 775	FY19 Actual	FY20 Actual	FY21 Target	FY21 Q1	FY21 Q2	FY21 Q3	Rating
Adolescents who smoke		8.9%	Not Reported	N/A	Reported Annually			
Adult who smoke		16%	Not Reported	N/A	Reported Annually			
Adult cigarette smokers who access cessation services		2.7%	2.6%	2.9%	0.4%	0.5%	0.5%	R
Successful overdose reversals per client enrolled in the NMDOH Harm Reduction Program		3,446	3,444	3,000	754	657	Not Reported	R
Births to teens per 1,000 females aged 15-19		21.7	Not Reported	N/A	Reported Annually			
Female clients ages 15-19 seen in NMDOH public health offices who are provided most or moderately effective contraceptives		68.5%	85.8%	62.5%	90.3%	89.8%	84.9%	G
Teens that successfully complete teen pregnancy prevention programming		512	502	232	Reported Annually			
School-based health centers that demonstrate improvement in their primary care or behavioral health care focus area		86%	50%	95%	0%	0%	0%	R
Third grade children who are considered obese		20.8%	22.9%	N/A	Reported Annually			
Children in Healthy Kids, Healthy Communities with increased opportunities for healthy eating in public elementary schools		99%	97%	89%	98%	98%	98%	G
Participants in the National Diabetes Prevention Program that were referred by a health care provider through the agency-sponsored referral system		29%	27%	25%	0%	100%	52%	G
Preschoolers (19-35 months) who are indicated as being fully immunized		69.9%	62.9%	65%	64.6%	64.3%	63.7%	R
Older adults who have ever been vaccinated against pneumococcal disease		71.6%	Not Reported	75%	Reported Annually			
Program Rating		Y	Y					Y

Epidemiology and Response

The Epidemiology and Response Program (ERD) also plays a key role in the state's response to the pandemic, including case investigations of individuals who test positive for Covid-19 and contact tracing of individuals with direct exposure to Covid-19. The program did not meet a majority of performance targets.

As of July 1, 2020, a newly created home and community-based waiver was federally approved. The Supports Waiver is an option for individuals who are on the Developmental Disabilities (DD) waiver wait list. Supports Waiver services are intended to complement unpaid supports that are provided to individuals by family and others.

In FY21 Q1, the Developmental Disabilities Supports Division (DDSD) began providing offer letters to individuals on the DD waiver waitlist. Over 200 people have begun receiving services.

Budget: \$108,305.7	FTE: 204	FY19 Actual	FY20 Actual	FY21 Target	FY21 Q1	FY21 Q2	FY21 Q3	Rating
Youth who were sexually assaulted in the last 12 months		11.4%	11.4%	N/A	Reported Annually			
Youth who have completed an evidence-based or evidence-supported sexual assault primary prevention program		5,905	13,051	7,000	0	287	1,958	R
Suicide per 100,000 population		24.1	Not Reported	N/A	Reported Annually			
Community members trained in evidence-based suicide prevention program		522	1,030	225	0	143	213	G
Hospitals with emergency department based self-harm secondary prevention program		New	2.5%	7%	2.5%	2.5%	2.5%	R
Alcohol-related deaths per 100,000 population		Not Reported	Reported Fall 2021	N/A	Reported Annually			
Persons receiving alcohol screening and brief intervention (a-SBI) services		20.8	62.7	5%	Reported Annually			
Retail pharmacies that dispense naloxone		83%	95%	85%	90%	88%	88%	G
Opioid patients also prescribed benzodiazepines		12%	11%	5%	11%	11%	11%	R
Heat related illness hospitalizations per 100,000 population		2.1	Reported Fall 2021	N/A	Reported Annually			
Cardiovascular disease (heart disease & stroke) deaths per 100,000 population		203.7	Not Reported	N/A	Reported Annually			
NM hospitals certified for stroke care		16%	14%	24%	14%	14%	16%	R
Rate of fall-related deaths per 100,000 adults, aged 65 years or older		91.6	Reported Fall 2021	N/A	Reported Annually			
Emergency department based secondary prevention of older adult fractures due to falls programs		Data not collected	5%	7%	5%	0%	0%	R
Rate of pneumonia and influenza death per 100,000 population		13.1	Not Reported	N/A	Reported Annually			
Cities and counties with Access and Functional Needs (AFN) plans that help prepare vulnerable populations for a public health emergency		New	5%	65%	15%	20%	15%	R
Rate of avoidable hospitalizations per 100,000 population		751	Reported Fall 2021	N/A	Reported Annually			
Program Rating		Y	Y					R

Scientific Laboratory

The Scientific Laboratory Program provides a wide variety of laboratory services to programs operated by numerous partner agencies across the State of New Mexico. The program provides a significant level of Covid-19 testing in the state. The program met all performance targets for the second quarter.

As of 2016, New Mexico has the twelfth highest drug overdose death rate in the nation. The consequences of substance use are not limited to death, but include many medical and social consequences, including poverty and lack of adequate insurance. Turquoise Lodge Hospital (TLH) is a specialty hospital that provides safety net services for New Mexican adults with substance use disorders.

According to the U.S. Centers of Disease Control and Prevention, for the year 2013, the average specialty hospital occupancy rate in the United States was 63 percent and in New Mexico the average rate was 56 percent.

Budget: \$16,963.1	FTE: 136	FY19 Actual	FY20 Actual	FY21 Target	FY21 Q1	FY21 Q2	FY21 Q3	Rating
Blood alcohol tests from driving-while-intoxicated cases that are completed and reported to law enforcement within 30-calendar days		44%	91%	95%	96%	97%	99%	G
Environmental samples for chemical contamination that are completed and reported to the submitting agency within 60-business days		91%	91%	90%	99%	93%	99%	G
Public health threat samples for communicable diseases and other threatening illnesses that are completed and reported to the submitting agency within published turnaround times		97%	97%	90%	99%	97%	99%	G
Program Rating		Y	Y					G

Facilities Management

The Facilities Management Division (FMD) provides services for mental health, substance abuse, long-term care, and physical rehabilitation in both facility and community-based settings. Intake and capacity of state facilities has also been impacted by the global pandemic. Many of the state facilities have experienced declining occupancy. If facilities are unable to increase their occupancy there will be significant operational funding strains. The Department of Health has projected an estimated operating deficit in current fiscal year due to declining occupancy. Occupied beds fell to 55 percent in the third quarter, falling 25 percent below the previous fiscal year. In particular, the New Mexico Veterans' Home (NMVH) and the Behavioral Health Institute have seen significant declines in occupancy. NMVH spent \$16.9 million on operations in FY20, with total revenue of \$14.1 million. Between July 2019 and December 2020, the average monthly census at NMVH was 109 individuals, with a high of 123 in July 2020 and a low of 69 in December 2020. The average monthly cost per patient over this period was \$12,400, and noticeably increased to \$19 thousand when the census dropped in December 2020. New Mexico Medicaid data indicated the average cost per member Nursing Facility Private – Low Level of Care in 2020 was \$4,738.

Budget: \$151,277.2	FTE: 2,003	FY19 Actual	FY20 Actual	FY21 Target	FY21 Q1	FY21 Q2	FY21 Q3	Rating
Eligible third-party revenue collected at all agency facilities		83%	81%	93%	95%	87%	96%	G
Beds occupied		New	New	75%	61%	58%	55%	R
Overtime hours worked		New	New	387,000	182,686	178,853	175,350	R
Direct care contracted hours		New	New	N/A	36,015	49,598	47,236	

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New Mexico has one of the highest suicide rates in the country. The state's Medical Advisory Team estimated that the Covid-19 pandemic will likely exacerbate behavioral health issues and could lead to an increase in suicides. State agencies and the suicide prevention coalition should expand and use proven initiatives, including ensuring care is provided to those in crisis and that care continues after a crisis, increasing access to behavioral healthcare through telehealth, and expanding gatekeeper training. Finally, the Legislature could enact laws to restrict access to lethal means and to strengthen best practices for the coalition and strategic plan.

Significant medication errors per 100 patients	2.4	.2	2.0	0.7	.6	1	G
Long-term care residents experiencing one or more falls with major injury	3.9%	5.3%	4%	4.5%	3%	4.5%	R
Long-term Veterans Home residents experiencing facility acquired pressure injuries	.8%	4.4%	2%	4.9%	2.8%	4.8%	R
Adolescent residents (SATC & NMBHI Care Unit) who successfully complete program	78%	77%	90%	86%	100%	100%	G
Priority Request for Treatment clients who are provided an admission appointment to Turquoise Lodge's program within 2 days	68%	66%	50%	55%	70%	69%	G
Medical detox occupancy at Turquoise Lodge Hospital	83%	68%	75%	69%	67%	72%	R
Naltrexone initiations on alcohol use disorders	New	New	360	38	46	47	R
Naltrexone initiations on opioid use disorders	New	New	12	1	0	1	R
Buprenorphine inductions conducted or conducted after referrals on opioid use disorders	New	New	240	34	29	41	R
Narcan kits distributed or prescribed	New	New	180	49	48	70	R
Program Rating	Y	Y					Y

Developmental Disabilities

DOH reported a decline in the number of individuals receiving Developmental Disabilities (DD) and Mi Via Medicaid waivers. The program reported as of April 2021, there were 4,646 individuals on the waiting list for waivers. Of those individuals, 485 have placed their allocation on hold, meaning these individuals were offered waiver services and chose to remain on the waiting list, for now. During the third quarter, the number of individuals on the waitlist decreased. As of January 2021, over 200 individuals on the wait list had enrolled in the community supports waiver, far less than the 1,000 expected. The slow enrollment of people on wait list for the community supports waiver and increased federal matching dollars have led to a significant projected surplus for the program.

Budget: \$167,880.4	FTE: 182	FY19 Actual	FY20 Actual	FY21 Target	FY21 Q1	FY21 Q2	FY21 Q3	Rating
Individuals on the developmental disabilities' waiver waiting list		5,064	4,743	N/A	4,713	4,660	4,646	
Individuals receiving developmental disability waiver services		4,641	4,934	N/A	4,859	5,034	5,053	
Individuals receiving developmental disability supports waiver services		New	New	N/A	0	4	44	

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People on the waiting list that are formally assessed once allocated to the DD Waivers	New	New	100%	100%	100%	100%	G
Developmental disabilities waiver applicants who have a service and budget in place within 90-days of income and clinical eligibility	87%	96%	95%	93%	97%	100%	G
Adults of working age (22 to 64 years), served on the DD Waiver (traditional or Mi Via) who receive employment supports	29%	29%	34%	27%	27%	25%	Y
DD Waiver providers in compliance with General Events timely reporting requirements (2-day rule)	66%	84%	86%	70%	55%	27%	Y
Program Rating	Y	Y					Y

Health Certification, Licensing, and Oversight

The Health Certification, Licensing, and Oversight Program met a majority performance measures targets during the third quarter of FY21. The program also has many Covid-19 related activities such as routine outreach to all nursing homes and assisted living facilities in the state in order to obtain information on how many staff and residents have been tested for Covid-19, test results, deaths, number of test kits available, and identifying any issues with PPE and staffing.

Budget: \$14,371.1	FTE: 183	FY19 Actual	FY20 Actual	FY21 Target	FY21 Q1	FY21 Q2	FY21 Q3	Rating
Rate of abuse for developmental disability waiver and mi via waiver clients		10.6%	12.8%	NA	7.4%	9%	5.5%	G
Rate of re-abuse for developmental disability waiver and mi via waiver clients		7%	8.5%	N/A	Reported Annually			
Percent of abuse, neglect and exploitation investigations completed within required timeframes		48.6%	81.7%	86%	99.5%	99%	92%	G
Percent of (IMB) assigned investigations initiated within required timelines		New	90.3%	86%	96.2%	92.7%	93.3%	G
Percent of Assisted Living Facilities in compliance with caregiver criminal history screenings requirements		New	77%	85%	97%	96%	93%	G
Percent of Nursing Home survey citation(s) upheld as valid when reviewed by the Centers of Medicare and Medicaid Services (CMS) and through Informal Dispute Resolution		85%	83%	90%	100%	100%	60%	Y
Program Rating		Y	Y					G