

**2015 PROPOSED
WORK PLAN AND MEETING SCHEDULE
for the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE
and the
DISABILITIES CONCERNS SUBCOMMITTEE**

Members

Sen. Gerald Ortiz y Pino, Chair
Rep. Nora Espinoza, Vice Chair
Rep. Deborah A. Armstrong
Rep. Miguel P. Garcia

Sen. Gay G. Kernan
Rep. Tim D. Lewis
Sen. Mark Moores
Sen. Benny Shendo, Jr.

Advisory Members

Sen. Sue Wilson Beffort
Sen. Craig W. Brandt
Sen. Jacob R. Candelaria
Rep. Gail Chasey
Rep. Doreen Y. Gallegos
Sen. Daniel A. Ivey-Soto
Sen. Linda M. Lopez
Rep. James Roger Madalena
Rep. Terry H. McMillan
Sen. Cisco McSorley

Sen. Howie C. Morales
Sen. Bill B. O'Neill
Sen. Mary Kay Papen
Sen. Nancy Rodriguez
Sen. Sander Rue
Rep. Patricio Ruiloba
Sen. William P. Soules
Sen. Mimi Stewart
Rep. Don L. Tripp
Rep. Christine Trujillo

Disabilities Concerns Subcommittee Members

Sen. Nancy Rodriguez, Chair
Rep. Tim D. Lewis, Vice Chair
Sen. Craig W. Brandt

Rep. Miguel P. Garcia
Sen. Linda M. Lopez

Advisory Members

Rep. Deborah A. Armstrong
Sen. Ted Barela

Rep. Nora Espinoza
Sen. Gerald Ortiz y Pino

Work Plan

The Legislative Health and Human Services Committee (LHHS) proposes to cover the following topics during the 2015 interim. In choosing its proposed areas of focus, it has considered what topics are likely to be germane in the 2016 regular session.

Behavioral Health

The LHHS proposes to monitor access to behavioral health services statewide and receive updates on related litigation and program integrity activities. The committee proposes to review data on indicators for mental illness, substance abuse and drug overdose and receive updates on developments at the federal level and in other states relating to behavioral health services.

Children and Families

The LHHS proposes to make children and families a major area of focus during the 2015 interim.

The confirmation of a new cabinet secretary, Monique Jacobson, to the Children, Youth and Families Department (CYFD) means that the course of the CYFD may change in the coming months. The LHHS proposes to hear Secretary Jacobson's vision for the CYFD and the CYFD's new strategic plan.

In conjunction with the Courts, Corrections and Justice Committee, the LHHS proposes to hold a summit on juvenile justice regarding children at risk, teen violence and the efficacy of several juvenile justice models and facilities, including the New Mexico "Cambiar" model, the Missouri model, the Sierra Blanca facility and the Sequoyah Lodge. The LHHS would invite local and national stakeholders and experts from all three branches of government and the private sector. After the summit, the LHHS proposes to visit juvenile justice facilities and review proposals made at the juvenile justice summit for possible legislative action.

The LHHS proposes to examine services for families where there is a risk of or reports of child abuse or neglect, early childhood programming, supportive housing services, teen pregnancy and the latest recommendations from the J. Paul Taylor Task Force on child well-being.

Corrections Health Care

With the passage of Senate Memorial 132 and Senate Bill 42 in the 2015 regular session, the LHHS proposes to hold a corrections health care summit to hear testimony from the Corrections Health Care Task Force, the Corrections Department, the counties and the Human Services Department (HSD) relating to the quality and cost of corrections health care and maximizing Medicaid funds. This review would also entail an examination of policies such as "compassionate release" and medical release as well as the care of elderly, disabled and chronically ill inmates. Also at the corrections health care summit, the LHHS proposes to hear testimony relating to 2015's Senate Joint Memorial 4, which requests reporting from the New Mexico Association of Counties on services for mentally ill individuals awaiting trial.

Health Care Delivery and Health Care Work Force

The LHHS proposes to continue its oversight of policy and programming to track and increase the number and distribution of health care professionals statewide, including incentives for increasing the "pipeline" of recruits and attracting and retaining health care professionals.

The LHHS proposes to continue its review of the status of the state's hospital system, including a report on the sustainability of critical access hospitals statewide and the effect of the Safety Net Care Pool in its second year of implementation.

2015's House Memorial 33 requests that the Legislative Finance Committee (LFC) and the Department of Health (DOH) study uncompensated health care in the state. The LHHS proposes to hear reporting pursuant to House Memorial 33.

Pursuant to recent discussions and legislation proposed to increase patients' ability to compare hospitals for price and quality, the LHHS proposes to examine the possibilities for the safe disclosure of information to these ends, as required pursuant to 2015's Senate Bill 323, as well as outcomes in other states' experiences in increasing hospital pricing transparency and accountability.

The LHHS proposes to receive updates on health information technology and interoperability, including an update from the state's health information exchange.

As the state's population continues to see an increase in the number of individuals over 60 years of age, the issue of access to health and human services resources in rural areas becomes a greater issue. The LHHS proposes to review the availability of these services and care coordination among these services.

Medicaid

The state's Centennial Care Medicaid waiver program is in its second year of implementation under the leadership of a new HSD cabinet secretary, Brent Earnest. The LHHS proposes to hear updates from Medicaid recipients, Secretary Earnest, HSD staff, Medicaid managed care organizations, federal officials and policy experts on the status of Centennial Care.

The LHHS proposes to review Medicaid long-term care, including the HSD's reintroduction of health homes for implementation as part of the Centennial Care program to serve the mostly needy and vulnerable long-term care recipients, the Program of All-Inclusive Care for the Elderly (PACE) and Money Follows the Person.

Tribal health facilities have raised concerns about care coordination in the state's Medicaid Centennial Care program. One tribe has conducted a survey of available care coordination services. The LHHS proposes to hear testimony and review any available data related to this issue.

A year after Medicaid eligibility was expanded pursuant to the federal Patient Protection and Affordable Care Act (PPACA), the LHHS proposes to review any available data on the effects that Medicaid expansion has had on health care demographics, health care facilities and health care costs.

The LHHS proposes to hear expert testimony on the efficacy and availability of medical, vision and hearing screenings for children as well as early and periodic screening, diagnostic and treatment "EPSDT" services in the state.

Children in New Mexico with household incomes between 185 percent and 235 percent of the federal poverty level (FPL) currently receive coverage through the state's Children's Health Insurance Program (CHIP), which receives federal matching funds. Continuation of federal funding for CHIP depends on whether the U.S. Congress reauthorizes these funds in 2015. The LHHS proposes to review this matter during the interim, including its implications for keeping this population of children covered.

The U.S. Supreme Court has just handed down a decision that holds that providers of goods and services to a state Medicaid program cannot recover from the program for reimbursement rates that they claim to be inadequate. The LHHS proposes to hear expert testimony on the implications of this decision.

The LHHS proposes to review any developments and other states' experiences with a pediatric dental health care pilot program, which was the subject of recently introduced legislation.

There are a number of issues related to Medicaid managed care that the LHHS proposes to review this interim, including matters related to network adequacy and transparency, state oversight and compliance with new model regulations.

Health Coverage

Five years after the enactment of the PPACA, there appears to be some confusion among health plans, enrollees and state and federal regulators as to the benefits and services that health plans must cover and enrollee responsibilities, especially as they relate to preventive services and screenings, benefits and services related to women and reproductive health and "balance billing" practices. The LHHS proposes to hear expert testimony relating to this matter.

The LHHS proposes to continue its review of health insurance provider network adequacy, including information related to other states' responses to network challenges.

The New Mexico Health Insurance Exchange has just ended its second open-enrollment season. The LHHS proposes to receive updates as to the exchange's progress in establishing an infrastructure and increasing access to health coverage.

The PPACA provisions requiring large employers to offer affordable health coverage to their employees are now in effect. The LHHS proposes to review the effect that they are having on employers and employees statewide.

The LHHS proposes to hear testimony from experts on the experience of the states of New York and Minnesota in implementing a basic health program pursuant to the PPACA to offer affordable health insurance coverage to individuals whose household income exceeds the Medicaid eligibility maximum of 138 percent of the FPL and 200 percent of the FPL.

Since its recent establishment, the Office of Superintendent of Insurance has undertaken enhanced health insurance oversight and consumer advocacy functions and has proposed a number of technical and substantive changes to the New Mexico Insurance Code. In addition, the passage of 2015's Senate Bill 3 (Chapter 11) entails changes to the procedures and laws pertaining to the superintendent of insurance's appointment and oversight. The LHHS proposes to review these matters this interim.

Human Services

States such as Utah have implemented "housing first" programs to address homelessness. The LHHS proposes to hear testimony from Utah lawmakers and experts on the efficacy of this approach as well as testimony on the feasibility of combining a plurality of housing programs and providing services such as mobile shower services to homeless individuals.

The HSD proposes to report to the LHHS on an update on its use of federal Community Services Block Grant funds.

The New Mexico Family Caregiver Task Force is scheduled to report to the LHHS this interim pursuant to a request in 2014's House Joint Memorial 4 that this task force examine supports, training and services for family caregivers to elderly and disabled New Mexicans.

The LHHS seeks to renew its inquiry into the status of adult protective services and protection from elder abuse and exploitation, hearing LFC staff testimony and examining programs at the Aging and Long-Term Services Department, the Office of the Attorney General and senior service agencies, as well as other states' work in this area.

The LHHS proposes to seek an update from the Workforce Solutions Department relating to its administration of unemployment compensation and job training programs. The LHHS also proposes to review a proposal to reduce some unemployment compensation benefits.

Public Health

The LHHS proposes to take another look at the state's ongoing substance dependence crisis, especially as it relates to misuse and dependence on prescription drugs. This review would include the state's options to take advantage of the federal Drug Enforcement Agency's new rules to allow for more entities to recover unused prescriptions, the Board of Pharmacy's Prescription Drug Monitoring Program, the DOH and the University of New Mexico's reporting pursuant to 2015's House Memorial 98 related to chronic pain and overdose and the state's options for halting the overprescribing of controlled substances.

The LHHS proposes to request that the DOH provide an update to the committee on implementation of the 2014-2016 strategic plan, its public health surveillance indicators report and its efforts to attain public health accreditation and combat hepatitis C statewide.

The LHHS proposes to request an update on the state's Medical Cannabis Program, with testimony from the DOH, producers, enrollees and experts on the program and on some of the practical barriers that enrollees and producers face, as well as funding for the program.

With the removal of the New Mexico Health Policy Commission and the University of New Mexico-Robert Wood Johnson Foundation Center for Health Policy as sources of health care analysis in the state, the LHHS proposes to examine options for establishing or reinvigorating entities with the capacity to provide this analysis.

Recent research shows that South Dakota's model for providing services to Native Americans who live off-reservation in urban areas may show potential, and the LHHS proposes to review that model for best practices.

Disabilities Concerns Subcommittee

The statutory Disability Concerns Subcommittee proposes to monitor access to services for persons with disabilities throughout the state, receive updates on related litigation and program integrity activities and receive updates on developments at the federal level and in other states relating to services for persons with disabilities.

Legislative Health and Human Services Committee
2015 Proposed Meeting Schedule

<u>Date</u>	<u>Location</u>
June 5	Santa Fe Organizational Meeting
July 15-17	Las Cruces — La Clinica de Familia
August 24	Fort Stanton
August 25	Ruidoso
August 26 and 27	Roswell
September 21, 22 and 23	Albuquerque
September 24	Albuquerque — Juvenile Justice Summit/Joint Meeting with Courts, Corrections and Justice Committee
October 5, 6 and 7	Santa Fe
October 19, 20 and 21	Santa Fe
November 16, 17 and 18	Santa Fe

**Disabilities Concerns Subcommittee
2015 Proposed Meeting Schedule**

<u>Date</u>	<u>Location</u>
August 28	Roswell
September 25	Albuquerque
October 22	Santa Fe