

**MINUTES  
of the  
FIFTH MEETING  
of the  
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE**

**October 19-21, 2005  
Room 322, State Capitol  
Santa Fe**

Representative Danice Picraux, chair, called the fifth meeting of the Legislative Health and Human Services Committee to order on October 19, 2005 at 9:00 a.m. in Room 322 of the State Capitol in Santa Fe. She welcomed everyone and asked the committee members to introduce themselves to the audience.

**Present**

Rep. Danice Picraux, chair  
Sen. Dede Feldman, vice chair  
Sen. Rod Adair  
Sen. Mary Kay Papen (10/19)  
Rep. Jim R. Trujillo

**Absent**

Rep. William "Ed" Boykin  
Rep. Keith J. Gardner  
Sen. Steve Komadina

**Advisory Members**

Sen. Sue Wilson Beffort (10/20, 10/21)  
Rep. Ray Begaye (10/19, 10/21)  
Rep. Miguel P. Garcia (10/19, 10/20)  
Rep. John A. Heaton  
Sen. Linda M. Lopez  
Rep. Antonio Lujan  
Rep. James Roger Madalena (10/20, 10/21)  
Sen. Gerald Ortiz y Pino (10/19, 10/21)  
Rep. Edward C. Sandoval  
Sen. Leonard Tsosie (10/21)  
Rep. Gloria C. Vaughn

Rep. Gail Chasey  
Rep. Kandy Cordova  
Sen. Clinton D. Harden, Jr.  
Sen. Timothy Z. Jennings  
Sen. Gay G. Kernan  
Rep. Terry T. Marquardt  
Rep. Rick Miera

(Attendance dates are noted for those members not present for the entire meeting.)

**Staff**

Karen Wells  
Ramona Schmidt  
Sarah Salazar

**Guests**

The guest list is in the meeting file.

## **Wednesday, October 19**

Connie Monahan, MPH, the state Sexual Assault Nurse Examiners (SANE) coordinator, presented information on the SANE program and stated that the purpose of SANE is to provide medical treatment to sexual assault victims of all ages and genders by using advanced trained nurses who provide prompt medical treatment in a private setting; document injuries; ensure evidence is collected properly and through chain of custody; and testify through legal proceedings. Ms. Monahan reviewed SANE's presence throughout the state.

Kim Alaburda, Sexual Assault Program manager, reviewed the legislative funding to address sexual violence in New Mexico. She noted that during the past year the number of centers has been doubled. Ms. Alaburda stated the program is viewed as a model throughout the nation. She noted that funding for the program is through the Department of Health (DOH) budget and is recurring.

Agnes Maldonado, director, New Mexico Coalition Against Domestic Violence, stated that a new program is up and running in Las Vegas, New Mexico, but there remains a high need for shelter providers statewide. She spoke to promotion of the issue of domestic violence against children and noted the great success of a program that uses puppets to assist with counseling for children. Ms. Maldonado said the coalition is asking for \$3 million, divided between 40 programs.

Betty Fleishman, director, Albuquerque Rape Crisis Center (ARCC), gave an overview of the rape crisis centers and the vast services they provide. She noted that 80 to 90 percent of women who are incarcerated on addiction charges have experienced sexual assault at some point in their lives. Ms. Fleishman stated that ARCC works closely with SANE. She noted that calls to ARCC have increased 20 percent already this year.

A request was made by the committee that representatives from the state agencies and the governor's office attend future committee meetings to carry back information to appropriate staff. In response to a question concerning how SANE works with state agencies, Ms. Monahan stated that Sandra L. Gardner, the state domestic violence coordinator, has worked closely with SANE on a daily basis, ARCC works closely with DOH, and their funding with the Children, Youth and Families Department (CYFD) is through the Children's Juvenile Justice Group. Ms. Alaburda stated that the sexual assault report is done on a \$10,000 budget and the information is gathered on a voluntary basis. Representative Ray Begaye raised concern that the statistics are actually higher in the Navajo community than is reflected.

Committee members discussed the following issues: funding priorities; potential sexual assault targets; education in the school system; mandatory course work for social workers; Native American programs funding; and how the funds are appropriated. Gwendolyn Packard, director, Morningstar House in Albuquerque, said that Indian women experience more domestic violence than other populations. She noted that Morningstar House works from an educational and empowerment model and wants to create a space where women can speak freely about the

violence that occurs in their lives. They would like the ability to address their particular needs. She expressed concern that domestic violence funding is through CYFD while sexual assault funding is through DOH. She noted that only two Indian programs throughout the state are funded by CYFD, and she would like to see more funding of programs for Indians, who comprise 11 percent of the population.

Representative Picraux asked that specific legislative requests be channeled to Karen Wells.

Mary Molina Mescall, director, Commission on the Status of Women, Office of Women's Health Task Force, and Dr. Justina Trott, medical director, Women's Health Services (WHS), gave a presentation on women's health. Ms. Mescall reviewed the Executive Summary of Legislative Report on Senate Joint Memorial 30 and House Joint Memorial 21 from the 2005 legislative session. Dr. Trott said that entities can come together in a strategic manner to address varying community needs. She noted that gender and societal responses are based on biological and social roles in society. She stated that this is a major issue, and the task force supported an office on women's health to address the issue. Dr. Trott expressed the need for an executive order to establish a statewide advisory council appointed by the governor to work with private and nonprofit organizations on a demonstration project to ensure that the office of women's health is meaningful. Dr. Trott stated that WHS may seek funding, but it would be minimal. It is proposed that DOH will staff the office, but if it is found they are unable to perform the tasks needed, then funding will be requested. She stated that WHS requested approximately \$2 million to \$2.5 million for a building to be appropriated to Santa Fe County and would also ask for an appropriation of \$300,000 to \$350,000 for operations.

Karen Wells, Legislative Council Service (LCS) staff, addressed the committee and gave a brief overview of the Part D Prescription Drug Benefit. She noted that this is a moving target and the legislators should be informed about it, but because it is a federal program, they will not be able to affect the program. Ms. Wells reviewed a number of documents distributed to committee members. The Medicare Prescription Drug, Improvement and Modernization Act of 2003 added prescription drug coverage to Medicare, beginning on January 1, 2006. She noted that this prescription drug benefit is similar to any insurance drug benefit. She clarified that the list of pharmacies participating has not been finalized to date. Ms. Wells noted that AARP is developing literature specific to New Mexico that will be forthcoming.

It was noted that there are 10 different standardized plans and they vary in cost from \$40 to \$700 a month. Mike Batte stated that he would get a copy of these plans and their premium rates for committee members.

Discussion occurred as to the clawback and cost to the state. Senator Dede Feldman moved to recommend in writing to the Human Services Department (HSD) and the Office of the Attorney General that New Mexico join other states to protest and potentially sue the Centers for Medicare and Medicaid Services (CMS) for the subsidy the states are now providing the federal government for the Medicaid program. The motion was seconded and passed unanimously.

Discussion occurred as to individuals enrolling in the Medicaid program or staying with their current insurance program. There are incentives for employers to continue insuring their employees. It was noted that the insurers will work with CMS to ensure their plans are creditable. The original presentation claimed that it would be less expensive for states to cover the Medicaid population. As more information comes forward, it is turning out to be more expensive than expected. Secretary Pamela Hyde, HSD, stated that the original intent of the program was for the states to save money, but it actually will cost New Mexico more money. She stated there is no way to calculate the cost until the rules are finished. Secretary Hyde stated that HSD is involved with other states to challenge CMS, and it may take congressional action to change the formula through statute.

Roba Whitely, Paul Poister and Larry Heyeck presented on the Prescription Drug Discount Cards and Access. Mr. Heyeck stated that five companies have been interviewed and have assisted in crafting a drug discount card savings program for New Mexico. Mr. Heyeck reviewed the criteria for enrollment. Extensive outreach and education would be required for implementation. Mr. Heyeck noted that having a common Preferred Drug List (PDL) for the program would not necessarily be beneficial. Paul Poister addressed the Partnership for Prescription Assistance. Mr. Poister reviewed a handout on prescription assistance programs, which was distributed to the committee.

Roba Whitely, executive director, Together RX Card, gave an overview of RX access. She stated it is a program for the non-Medicare-eligible uninsured. There will be mailings, public service announcements and web sites to get the word out about the program.

Questions and comments from the committee raised concern about the prescription RX program and its transparency. Ms. Whitely stated that the brand identity of the program itself or the operational systems of the program cannot be changed, but there could be something on the card to reflect some partnership between Together RX Card and the state of New Mexico. There is no mail-order portion of the program because of the belief that community is central to health.

Discussion occurred as to the benefit of a common PDL to be included in the prescription drug discount card and access and the effect of getting greater market-share discounts. It is believed that a proposal will be submitted before the end of the year to the secretaries of the various state departments impacted, as well as to the Legislative Health and Human Services Committee, addressing policies and procedures regarding the prescription drug discount card program.

Representative Jim R. Trujillo gave the background on House Joint Memorial 98, which addresses pharmacy benefit manager regulation. He stated that the pharmacy benefit manager plays a very important role. There is concern about rebates, who receives them and how they are used. Representative Trujillo suggested licensing pharmacy benefit managers. Dr. Patricio Larragoite and Letitia Rutledge from the New Mexico Health Policy Commission (HPC) spoke to the committee about the task force formed to address this issue. Ms. Rutledge stated that the role of the task force was to study the need for regulation and oversight of pharmacy benefit

management (PBM) companies. The task force members represented various stakeholders: pharmacy benefit managers, consumers, state agencies, health plans, retail chain pharmacies and independent pharmacists. The task force educated itself on the health care role of PBMs and their value and impact for employers, health plans, consumers and pharmacies. Although the task force was unable to reach a consensus on whether to regulate pharmacy benefit managers, it did come up with a number of recommendations to the committee, including:

- develop and implement a registry of active pharmacy benefit managers in New Mexico;
- educate the public to reduce confusion between the responsibilities of a health plan/employer and the responsibilities of pharmacy benefit managers;
- promote education on available negotiating options between contractors and pharmacy benefit managers; and
- propose, through a future memorial, that HPC conduct further research and analyze PBM activities and existing federal and state laws that regulate PBMs.

Dr. Larragoite reviewed the recommendations by HPC, including:

- all PBMs should be registered in New Mexico through an application process that would include (1) a description of how PBMs will educate the public about their role and what prescriptions are covered and (2) disclosure of administrative costs and profits; and
- PBMs should develop a standardized formulary.

Committee members raised concerns about: the lack of knowledge as to the amount of the rebates; the fiduciary responsibility to the client as to the drug costs; disclosure of conflict of interest by companies and insurance plans; and the transparency on changing drugs on a formulary. The task force was unable to assess the number of PBMs in the state due to lack of time, but it could, in the future, conduct a survey to attain this information. It was noted that the registration of PBMs would depend upon the type of regulatory framework that legislation would require. There was also concern raised by pharmacists as to the need for assistance and the need to introduce legislation to allow any pharmacist to become a part of a pharmacy network. Discussion occurred as to contract requirements and the opportunity to require pass-through and pass-back at a level of 100 percent. Representative Trujillo thanked everyone for the hard work that they put into the report and acknowledged the difficulty in working with all of the varying participants.

The meeting recessed at 5:42 p.m.

#### **Thursday, October 20**

Representative Antonio Lujan called the meeting to order at 9:18 a.m.

Raul Burciaga, assistant director, LCS, gave a presentation on the Health Care Financing Study (HCFS). He stated that Tony Popp, New Mexico State University, will be a point person

working on the study and each cabinet secretary will assign someone to work with Mr. Popp on the study. Mr. Popp will meet with Lisa Cacari-Stone to see how data were collected for the federal portion of the report and will meet with Ms. Wells regarding the state data collected. Mr. Burciaga reported on access and quality issues. Mr. Burciaga reminded committee members that several years of data must be collected to provide reliable information for use in legislative and policy areas. Committee members asked whether data would be gathered on costs for health care without taking into consideration education and prevention. Mr. Burciaga stated that because of limited time and resources, the original report did not include education, but this information will be included in the future. He will check with Mr. Popp to ensure that the report includes the cost of prevention for specific categories. The committee was reminded that additional legislation may be required to compel agencies to gather particular prevention and education data.

In response to concerns regarding health education in the school system, Kris Muerer, School and Family Supports Bureau, Public Education Department (PED), stated that health education is now required for first through twelfth grade, and performance standards are being developed to guide the curriculum. Ms. Muerer shared with the committee some of the new recommendations and regulations being developed to address the issue of obesity, as well as other issues facing children through the PED. The recommendations are now at the executive level, after which they will be put in draft rule, published and opened for public input. The secretary of education will sign the rules into place with input from the secretary of health and the executive. Ms. Muerer stated that she hoped the hearing would occur in December so that all pertinent recommendations could be grouped together.

Mr. Burciaga stated that the cost of chronic disease specific to obesity is \$117 million nationally and of that, \$61 million is in direct medical care. The indirect cost of \$56 million includes income lost due to workplace absence and future income lost due to premature death. He noted that the cost to New Mexico totals \$324 million, with \$169 million in direct costs and \$155 million in indirect costs. Mr. Burciaga will provide committee members with a report that breaks down the cost of obesity to New Mexico.

Committee members asked Mr. Burciaga for suggestions on how to "incentivize" wellness programs. Mr. Burciaga stated that he did not have specific recommendations, but he noted that there are a number of areas to be looked at, such as examining what other states have done and reviewing the HCFS to see what areas need to be targeted. Mr. Burciaga noted that how those issues are turned into specific programs would be the committee's choice. Mr. Burciaga stated that when the results of the HCFS are available in June 2006, a more comprehensive approach could be taken. Mr. Burciaga that reminded the committee of Scott Leitz's presentation of data gathered in Minnesota, when Mr. Leitz stated that several years of data are required for trends and analysis. The requirements for what data are gathered could be done by statute and by enabling legislation requiring certain data. Mr. Burciaga suggested that the committee consider some legislation that requires collection of specific data. Ms. Wells reminded the committee of the presentation by Kevin McMullan at the committee's August meeting, in which Mr. McMullan compared data collection in New Mexico and Minnesota.

Discussion shifted to the importance of the study of nutrition; gathering data from the private sector; and the barriers to small employers to provide health care. Mr. Burciaga reminded committee members that private sector data, such as uncompensated care, could not be gathered in the initial HB 955. Committee members raised concerns regarding quality issues, underlying causes and effects and disease management.

A panel of presenters, including Dr. Larragoite and Kootch Jacobus of the New Mexico HPC, Patsy Nelson, deputy director, Public Health Division, DOH, Kris Muerer and Linda Siegle, addressed nursing issues. The panel noted that a task force was convened to study nurse staffing and retention as a result of Senate Joint Memorial 37. The task force reviewed literature on nationwide nursing issues and on studies of specific concern for New Mexico. Key areas of concern to nurses were identified, including: the maturing of the nursing work force; level of education; how to progress through the educational system; nursing education faculty shortages; and the work environment. Recommendations for staffing, work environment, overall retention, nursing education programs, nursing education faculty recruitment and retention and K-12 education were discussed.

HPC's recommendations included:

- support for capital funds to upgrade the infrastructure and equipment for nursing programs;
- an increase in the stipend awarded in the loan for service program at the Higher Education Department (HED) and in the number of loans available to those who wish to continue practicing nursing in the state and tying funds to quality master's degree programs;
- allowance for continuing education program hours at the workplace to count toward a bachelor of science in nursing;
- further cost analysis regarding the reduction of travel for agency nurses; and
- requiring the Board of Nursing and HED to make rural health a high priority.

Ms. Nelson presented the report for Senate Joint Memorial 9. She reminded the committee that the number of nurses in schools is inconsistent, since there is no provision in state statutes or any regulation regarding appropriate school nurse staffing levels. She also stated that professional school nurses can serve the important role of helping to integrate the coordinated school health approach into the educational system. Ms. Nelson presented two recommendations to the committee:

- a request that the Funding Formula Study Task Force, as set forth in SB 125, include school nurses as part of the equity and efficacy of the public school funding formula as a whole; and
- revising current school reform legislation to include school nurses in the three-tier licensure system.

The panel presented a series of questions and answers on how the task force has responded to its tasks.

The committee expressed concern about the nursing student/faculty ratio at universities in New Mexico. Discussion occurred as to the ability of nurses to address concerns openly in the work environment, nursing salaries in varying roles and organizations and the number of nursing shortages to date.

Public comment was made by Jane Larson. Ms. Larson stated that Secretary Lujan-Grisham is an incredible advocate for the DOH Family, Infant Toddler (FIT) Program and is working to ensure funding for FIT, in the belief that children receiving FIT program services are the most vulnerable in the state. She asked for legislative and executive support.

Anna Hatanaka thanked the committee members for "sticking their necks out" for the disabled. She noted that there are problems with the bill passed during the past legislative session addressing FIT services, as it was overly broad, and said she would like to see legislation amending the bill at the upcoming session. Ms. Hatanaka stated that the Association of Developmental Disabilities Community Providers' priorities are to fully fund the Medicaid program to ensure the health of New Mexico's citizens and providers, to avoid additional reductions in services and or reimbursement rates and to restore FY05 reductions in Medicaid services and reimbursement rates. Ms. Hatanaka made the following appropriation requests (amounts were not included):

- fully fund the DOH cost study on early intervention services to ensure the provision of entitled quality services to children with, or at risk of, developmental delay and to improve staff;
- increase reimbursement rates to improve staff recruitment and retention and to meet the increased costs of employee benefits and rising programmatic operational costs;
- move towards rate equity with the Developmental Disability Medicaid Waiver program to improve staff recruitment and retention and meet increased costs of employee benefits and rising programmatic operational costs;
- restore the CMMS Market Based Index Inflation Factor, suspended in FY05, in order to improve staff recruitment and retention and to meet increased costs of employee benefits and rising programmatic and operational costs; and
- assist with increased costs of heating fuel for residential services and agency facilities and increased gasoline costs for transportation for home- and community-based agencies.

A request was made to expand state-sponsored health care initiatives for small businesses to include all developmental disability and developmental delay service agencies that contract with the state to address the rising cost of health care and the loss of employee health care benefits.

Discussion shifted to the impact of health care insurance and staff salary on the agencies involved with people with disabilities.

Doris Husted, public policy director for the ARC of New Mexico, thanked the committee for its support for the disabled community throughout the years. She requested that \$6 million

be appropriated to DOH for developmental disabilities Medicaid waiver services and an additional \$1 million to DOH for the medically fragile waiver program. Ms. Husted stated that ARC's priorities are to counteract the provider cuts in Medicaid that have occurred.

Senator Feldman moved that the committee send a letter to HSD asking the department to include client representation in the long-term care coordinated care program planning. The motion was seconded and unanimously adopted.

Pat Putnam, director, Developmental Disabilities Planning Council (DDPC), presented information on the Center for Self-Advocacy and its programs. Mr. Putnam made recommendations to the committee on how much money the center will need if it is to continue to improve. Mr. Putnam noted that the DDPC's request for \$27,300 includes money for a van and for hiring a student to work with the program. Mr. Putnam presented information on the 211 program and a request for \$419,000 in nonrecurring funding for DDPC's expansion throughout the state. He also requested \$87,600 in capital outlay that would expand services to certain counties. Mr. Putnam discussed the guardianship program and presented a summary of the program's history and improvements.

Mark Weber and Kacee Collard, LFC analysts, reviewed the funds appropriated for the ARC program to assess proper distribution. Mr. Weber noted that the question of appropriate spending is being investigated. Discussion followed regarding the disabled and elderly waiver special appropriation reversion of \$4.9 million; the response from Secretary Hyde; and the number of people on the disabled and elderly waiver list.

Gil Yildiz, executive director for the Independent Living Resource Center (ILRC), and Vince Montano, chairman of the State Independent Living Council, gave a presentation entitled "Money Follows the Person". They are requesting funding for this program and are asking the governor to include "Money Follows the Person" as part of an overall legislative package. Mr. Montano stated that they are looking for support from both the house and the senate. Ms. Yildiz reviewed the components of the program. Mr. Montano introduced individuals from the audience who have been deinstitutionalized and support the program. Commentators included Ms. Foghorn, who stated that she was very happy to be released from the nursing home. Mr. Sam Lopez shared conditions similar to those shared by Ms. Foghorn and stated that they were nearly intolerable. He thanked ILRC for assisting him in being released from the nursing home and in navigating the bureaucracy. He stated that more programs like this are needed and more funding is needed to assist others to become independent. Mr. Putnam stated that under the self-directed waiver there is not a "Money Follows the Person" choice, which moves people from nursing homes into the community. There are no new dollars required for the program; current funds used for programs under basic state Medicaid programs for nursing homes would be moved to a personal choice option for a different service delivery model. Representative Picraux stated that this option will be included in the list for proposed legislation, and they will work with Ms. Wells to draft the bill. It was clarified that there are two issues on the national budget, but they would not limit New Mexico from implementing a similar program. Committee members asked for follow-up on how these issues would fit in the new model for long-term care.

Dr. Mary Beresford, executive director, Governor's Commission on Disability, and Greg Trapp, executive director, Commission for the Blind, discussed the Task Force on Disability Employment. Mr. Trapp gave a report on House Joint Memorial 72 that requested that the Executive Task Force on Disability Employment develop policies, procedures and guidelines to increase the employment of persons with disabilities in state government. He stated that the proposal for increasing employment of persons with disabilities has been active since the governor's announcement of the initiative on August 27, 2004. Since then, the task force has been working to accomplish the key actions for the key strategies.

Dr. Beresford shared key strategies and progress, including enhancing recruitment and retention of persons with disabilities; increasing education and awareness training related to hiring and retaining employees with disabilities; modifying state statutes for hiring persons with disabilities; and expanding state on-the-job training, internship and apprenticeship. The task force continues to work on key actions for each strategy. Ms. Wells asked if there was a legislative request. Mr. Trapp stated that the item they would like to have considered is a centralized fund for accommodations, such as a council that would hear and merit requests. He noted that most accommodation requests do not cost very much, but some, such as translators or drivers, could be \$5,000 to \$20,000. Mr. Trapp stated that he hoped to model the fund after other states but would need to work with the governor's office and the task force to investigate further.

The meeting recessed for the day at 5:50 p.m.

### **Friday, October 21**

The meeting was called to order by the chair at 9:05 a.m. Charm Lindblad, executive director, New Mexico Health Care Takes on Diabetes, gave a presentation on diabetes. She noted that there is an epidemic in New Mexico and stated that our children are increasingly at risk. Native Americans and Hispanic populations are at higher risk than whites for developing diabetes. Nationwide, diabetes prevalence has increased 30 percent in the 1990s. In 2002, the cost to New Mexico, including direct and indirect costs, was approximately \$1.1 billion. Ms. Lindblad asked the committee to support an appropriation bill for \$950,000 during the session.

Nathan Bush, government relations director, American Cancer Society, spoke about the New Mexico Department of Health Breast and Cervical Cancer Early Prevention program. Mr. Bush stated that in 2005, there will be 999 new diagnoses of breast cancer and 190 deaths resulting from breast cancer. The program is funded by the federal government for screening and diagnostic services; treatment services are the state's responsibility. He noted that younger women are being diagnosed with breast cancer. Mr. Bush reviewed the program details and intent and stated that \$3.6 million is federally funded for this program.

Dr. David Roddy, executive director, New Mexico Primary Care Association, reviewed the primary care safety net in New Mexico and statistics on federal- or state-funded clinics. Dr.

Roddy reviewed the current level of state investment, including recurring general funds of approximately \$9 million and the county-supported primary care fund of \$1.8 million. Dr. Roddy stated that he is asking for \$2 million to finance an additional \$50,000 for the uninsured. The second request is a nonrecurring request of \$2.4 million to help speed up electronic medical records, at a cost of \$40,000 to \$50,000 per physician.

A request was made for a report analyzing the amounts billed and collected by clinics and for a study regarding funding diabetes education in schools. Discussion followed regarding health care for Native Americans.

The chair noted that a discussion of the disability and elderly (D&E) waiver the previous day raised some concerns, and Secretary Hyde was asked to address them. Secretary Hyde stated that she was aware there were some questions regarding the D&E waiver. She gave background on the budget and noted that they have three fiscal years of budget in play. Secretary Hyde stated that it is not possible to look at the budget for one given year, because the D&E waiver program has a billing cycle different from that of other state agencies or programs. She reminded the committee members that during the years in question, a sizeable amount of money reverted to the general fund from old accounts of prior years. A clean-up has been taking place. Secretary Hyde noted that a general fund dollar appropriated today does not fund as much service as it did three years ago because the FMAP has changed.

Secretary Hyde reviewed the criteria for the program and the inaccuracy of the waiting list as a predictor for the need for the D&E waiver. Individuals are not assessed when their names are placed on the list for service. Instead, they are assessed when service is available. She noted that individuals may no longer be interested in the program once they are eligible, due to a variety of reasons. Secretary Hyde stated that the number of people allocated to the program is fewer than the number of people on the waiting list. She noted that there is a difference between the number of people on the program and the number of people served. On average, a person is on this program for about 10 months. People move onto and off of the program at all times. The program can cost more or less, depending on the needs of those on the program. It is a dynamic program. The special appropriation was \$4.9 million, that was to be spent over two years on both the D&E waiver and the DD waiver. Of that amount, \$3.5 million went to HSD for the D&E waiver. The money was to be spent based on a plan approved by the Board of Finance. An additional 382 people were put on the program, and the commitment was to get an additional 600 people. As of September 2005, this goal has been reached.

Secretary Hyde stated that between 2003 and 2006, they will have spent nearly \$5 million from the general fund and \$20 million total since the special appropriation occurred.

Committee members addressed concerns about the number of people on the waiting list, the concept of "slots" and real ways in which the waiting list can be reduced. Secretary Hyde stated that they do not think in terms of slots. The program cannot cost more than the federal government would have paid otherwise.

It was noted that the appropriation was made during the end of the legislative session. The appropriate departments were not able to address the committees regarding what the funding would actually cover. Committee members asked how to keep a meaningful waiting list. Secretary Hyde stated that Secretary Armstrong is working aggressively on getting a better handle on the list. They are also looking at a longer-term plan that would allow all with long-term needs to be addressed separately from the current waiting list system. They are preparing cost options for the LFC and will include costs for eliminating the waiting list. Secretary Hyde will prepare a report that reflects costs and the "slot" system.

Comment was made that, for 2007, there will be a one-quarter of loss on the FMAP but no dramatic reductions are anticipated for 2007. Committee members asked that Secretary Armstrong put prescreening procedures in place. Committee members asked if the waiting list is meaningless, and, in response, Secretary Hyde stated that there has been much work between the departments to make the waiting list more pertinent. It was clarified that it is not possible to do away with the list without increased funds. Secretary Hyde stated that they have appropriately spent the money allocated.

Mark Weber, LFC, stated that the question raised was whether the \$3.6 million was spent as appropriated. He noted that the appropriation did not address decreasing the waiting list. The disagreement is not that the effort was not put into it, but that the time period specified in the appropriation was not met. Mr. Weber stated that to alleviate issues such as this in the future, language to determine how much money is going for these services should be added. Mr. Weber stated that the key to move forward is to better understand what the legislature gets for the money.

Doris Baker, RDH, and Barbara Psoler, RDH, from the New Mexico Dental Hygienists' Association, spoke to the problem of access to care. Ms. Baker stated that the solution proposed is based on the medical model of the career ladder. They recommend changing the state statute to allow dental hygienists with additional education to deliver therapeutic, preventive, diagnostic and limited restorative services in a public health partnership. Such a change would expand the hygienists' scope of practice and fill the gap in needed services. Committee members questioned if they would support a program in southern New Mexico. Ms. Baker stated that a program is being implemented in Roswell that will be linked to the accredited program at UNM. Those involved feel that this is more cost effective than a stand-alone program. Information on collaborative practice was shared with the committee. It was recognized that there are more issues to be dealt with, including costs and number served. Statistics will be gathered and distributed to the committee members.

Public comment was made by Niles McCall in support of the appropriation requested by New Mexico Takes on Diabetes. He stated that education and communication were important factors in fighting diabetes. In meetings with diabetes educators statewide, lack of funding and lack of cohesion were identified as major problems that need to be addressed. Mr. McCall stated that the appropriation can assist DOH, which will partner with the New Mexico Diabetes Advisory Council.

Harry Montoya, Santa Fe County commissioner, and Rob Mitchell, San Juan County coordinator, addressed issues concerning Santa Fe County, increased funding needs and funding for local DWI programs. He reviewed three alternatives to increase funding. Mr. Mitchell noted that while the programs are wide-ranging, they address the same issue. Mr. Mitchell stated that they have made a presentation to the Revenue Stabilization and Tax Policy Committee and will put together a coordinated summary and distribute it to the committee. Discussion occurred on the process that awards counties funding for DWI programs. Representative Picraux stated that legislation would be presented at the November Legislative Health and Human Services meeting, and the request would be included.

The issue of tribal gaming revenue distributions to local governments was discussed. It was noted that both Santa Fe County and the gaming tribes within Santa Fe County support proposed legislation to apportion an amount of gaming revenue distributions, paid by tribal gaming establishments to the state, to local governments, including municipalities and counties. In a joint venture, Santa Fe County will pursue this proposed legislation with tribal leadership throughout the state during the 2006 legislative session. Concern was expressed by committee members about opening up the gaming compacts and statutes for the benefit of one county.

Martie Rafferty, LMSW, representing the International Trauma Center of New Mexico, presented veterans' concerns. She stated that they are asking for \$500,000 to be appropriated to address concerns as follows:

- continue to deliver and expand the program for veterans' families with the Albuquerque Veterans Center;
- establish and deliver a program for families in partnership with the Santa Fe Veterans Center;
- establish services for veterans and families in Silver City and train locally based people to deliver services;
- develop services in the Navajo Nation;
- establish services for veterans and families in identified areas from which National Guard units have been deployed; and
- create a residential healing center in New Mexico for veterans, families and caregivers.

Senator Ortiz y Pino stated he was contacted by Michael Archuleta regarding the New Mexico Veterans Integration Center for a legislative appropriation to go to the Veterans' Services Department to support services that might be needed but are not being funded. Audience members spoke regarding personal experience with post-traumatic stress disorder (PTSD). Secretary John M. Garcia, Veterans' Services Department, stated that he is extremely interested in the outreach occurring through the International Trauma Center and shared his concerns and experiences. Secretary Garcia stated that there is a need for a greater partnership for the private, public and veterans' sectors to address PTSD. Committee members asked how PTSD is currently being addressed in the state. The procedure for treatment of veterans for PTSD was reviewed. Senator Leonard Tsosie asked for more information to be presented at the extraordinary session.

Poverty issues were addressed by Ruth Hoffman, Lutheran Office of Governmental Ministries. She gave a snapshot of New Mexico regarding the population and stated that 42.5 percent of the New Mexico population lives at or below poverty. Ms. Hoffman stated that there are only two ways to reduce poverty: by raising income or by reducing expenses. Ms. Hoffman reviewed the 2006 legislative priorities of affordable housing and homelessness, budget and tax policy, family-sustaining income, health care and hunger.

Hank Hughes, executive director, New Mexico Coalition to End Homelessness, reviewed homelessness issues and addressed steps to end homelessness. He spoke to two issues in particular: supportive housing and setting up a statewide supportive housing development arm.

Sally Moore, president of Community Action New Mexico (CANM), spoke to the committee members about the community action network and an initiative called the Individual Development Account (IDA) program. Ms. Moore stated that they are looking not just at policy but also at behaviors. She noted that their federal funding has been cut in half. She asked the committee to be CANM's partner in ending poverty in New Mexico. Ms. Moore reviewed the dynamics of IDA. Linda Siegle reviewed the proposed funding for the program. She stated that \$1 million in federal funding cannot be used until it is matched 100 percent by the state. Ms. Siegle stated that proposed funding would occur through the sale of bonds and through a charitable remainder annuity trust. Funds of \$1.9 million would help leverage \$4.5 million, for a total of \$9.5 million in IDA funds. Ms. Hoffman stated that they appreciate the support of the committee but do not necessarily require sponsorship.

In the public comment period, Susan Loubet stated the support of the women's agenda for many of these projects and also for at-home infant care.

The meeting adjourned at 5:05 p.m.