

**MINUTES
of the
FOURTH MEETING
of the
BEHAVIORAL HEALTH SUBCOMMITTEE
of the
LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE**

**October 25, 2019
State Capitol, Room 317
Santa Fe**

The fourth meeting of the Behavioral Health Subcommittee of the Legislative Health and Human Services Committee was called to order by Representative Patricia Roybal Caballero, chair, at 9:36 a.m. on October 25, 2019 in Room 317 of the State Capitol in Santa Fe.

Present

Rep. Patricia Roybal Caballero, Chair
Rep. Phelps Anderson
Sen. Michael Padilla

Absent

Sen. Bill B. O'Neill, Vice Chair
Rep. Rebecca Dow
Rep. Doreen Y. Gallegos
Rep. Andrea Romero
Rep. Christine Trujillo

Advisory Members

Sen. Gerald Ortiz y Pino
Sen. Mary Kay Papen
Rep. Elizabeth "Liz" Thomson

Rep. Deborah A. Armstrong
Rep. Karen C. Bash
Rep. Zachary J. Cook
Rep. Dayan Hochman-Vigil

Guest Legislator

Rep. Joanne J. Ferrary

Staff

Lenaya Montoya, Staff Attorney, Legislative Council Service (LCS)
Andrea Lazarow, Bill Drafter, LCS
Karen Wells, Contract Staff, LCS

Minutes Approval

Because the subcommittee will not meet again this year, the minutes for this meeting have not been officially approved by the subcommittee.

Guests

The guest list is in the meeting file.

Handouts

Handouts and other written testimony are in the meeting file.

Friday, October 25

Welcome and Introductions

Representative Roybal Caballero welcomed the subcommittee, staff and members of the audience. Subcommittee members and staff introduced themselves.

Update on Homelessness Interventions from the City of Albuquerque

Lisa Huval, deputy director, Department of Family and Community Services, City of Albuquerque, and Gilbert Ramirez, deputy director, Department of Family and Community Services, City of Albuquerque, addressed the subcommittee.

Ms. Huval stated that in Albuquerque each year, approximately 5,615 households experienced homelessness, with 1,525 homeless individuals on any given night. Mr. Ramirez noted that it is estimated that 44% of the homeless have substance abuse issues and 45% have mental health issues. He noted that 39% of the homeless are chronically homeless, meaning that they have been homeless for 12 months or more and have a disabling condition that is long-lasting. He provided the personal story of one homeless woman as representative of a typical experience of chronic homelessness. Ms. Huval described the current system in which the city becomes aware of and provides support to a homeless person, and she provided data regarding the number of responses to reports of homelessness and the disposition of those reports. She asserted that responding to these calls does not address the underlying circumstances in which someone becomes homeless.

Ms. Huval described transitional homelessness, a situation in which an individual enters a shelter for a short period of time. She stated that these individuals are often youth or younger individuals who need specific types of help to get back into housing and stability. She provided the personal story of one homeless woman as representative of a typical experience of transitional homelessness and identified the scope of needed supports to help individuals in such a situation.

Mr. Ramirez highlighted systemic problems that he contends need to be addressed and coordinated to solve the problem of homelessness, including coordinated entry, outreach, permanent housing, supportive services and medical care. He provided a map that reflects the lack of emergency shelters, noting that the city has many strong partners, but more partners and more shelters are needed.

Ms. Huval described the city's strategy for an emergency shelter that will be centrally located and that will have the capacity to provide case management, medical care and substance abuse treatment. The development of this emergency shelter will address all of the identified systemic needs. She described the conceptual design for this facility and options for funding

construction of the shelter. She noted that the legislature appropriated \$950,000 during the 2019 legislative session that allowed the city to begin the process of development. She noted that the city is currently in the design phase using national experts. A bond election will occur in November to fund the continued development and construction of the shelter; it is hoped that construction will occur in 2020 to 2021. She recognized that an emergency shelter is not the complete answer to homelessness and that many underlying issues need to be addressed. She described other key strategies that the city is working on, which include providing supportive housing vouchers, behavioral health services, affordable housing development and street outreach.

Subcommittee members had questions and made comments in the following areas:

- a member cautioned that billboards encouraging the use of 311 services should not be relied upon for emergency calls; Mr. Ramirez noted that 311 service is intended to guide callers to local services and is not for emergencies;
- a group called "Hell Fighters", which is providing hygiene amenities, such as soap, socks and toothbrushes, was recognized;
- how can the city reach out to more partners to address homelessness? Ms. Huval noted that the city has a small group that is looking at this issue and is close to presenting a more effective and coordinated outreach plan;
- a member suggested that a clearinghouse be included in the development of the new emergency shelter to identify and coordinate all entities that are working on this issue;
- how is the city combining the issues of behavioral health and addiction and homelessness? Mr. Ramirez noted that the system is currently fragmented and that more work is needed to address efforts in a coordinated manner;
- has the city conducted polling on the bond issue? Ms. Huval stated that polling shows strong support for the bond issue;
- a member asserted that the costs presented seem very low and asked how the cost estimates regarding the current initiatives were established; Ms. Huval stated that the cost estimates were obtained from first responders;
- once the new emergency center is completed, who will pay for the operation, and will the westside shelter remain open? Ms. Huval stated that it is hoped that the city will cover operations, and the westside shelter, if it is kept open, is anticipated to have less traffic;
- does Albuquerque expect other communities in the state to model their efforts on Albuquerque's approach? Ms. Huval noted that is already happening;
- what efforts are being made to try to deal with the bigger issues of homelessness? Homelessness presents big, societal challenges; Mr. Ramirez is hopeful that the work being done in Albuquerque will address this to some degree;
- does the city have an arrangement with the animal shelter that will allow temporary shelter for pets that are separated from homeless individuals? Ms. Huval did not know;

- does the homeless population vary from summer to winter? This is not known, as this is the first year the city has operated the shelter in the summer;
- a member observed that homeless individuals are subject to stereotyping, which is an issue that needs attention;
- how has the homeless population been engaged in the planning process for the new shelter? Ms. Huval noted that some conversations have been held, but a formal input process has not yet been identified;
- how is the city dealing with the problem of discarded syringes and the extent to which it is caused by the homeless? Ms. Huval stated that the issue has not been studied;
- would a local option liquor excise tax be supported by the city? Ms. Huval does not know, but she will follow up with the legislative policy team; and
- has the city identified an existing site that could serve as the new shelter? No, but all options are on the table.

Update on Behavioral Health Summit

Margarita Chavez-Sanchez, assistant director, Department of Behavioral Health Services, Bernalillo County, and Greg Perez, deputy county manager, Bernalillo County, addressed the subcommittee.

Ms. Chavez-Sanchez provided a brief summary of a statewide behavioral health summit that was held in Albuquerque in September. A handout from that summit was provided and identified national trends in behavioral health. Ms. Chavez-Sanchez described the topics that were covered in the summit and emphasized that telehealth is seen as an important tool to address behavioral health conditions and greatly increase access to needed services. She identified the importance of continuing dialogue to enhance relationships among state and county governmental entities, managed care organizations and providers. She noted that consistent approaches to align meaningful performance measures from all parties are crucial. She also noted that the Human Services Department (HSD) has implemented value-based reimbursement and collection of performance data of behavioral health care providers, as recommended at the summit. She stated that taking these steps will take time but will improve service provision and noted that addressing workforce shortages is also a critical step.

Subcommittee members had questions and made comments in the following areas:

- is the county using the \$75 million that has grown from a tax increment imposed in 2015 that is dedicated to behavioral health services? Ms. Chavez-Sanchez asserted that the county is working to identify opportunities for leveraging federal funds and described a coalition of governmental entities that are collaborating to share ideas and funding opportunities;
- how does the county identify potential additional sources of funding? Ms. Chavez-Sanchez described a process to receive funding concepts that allows the county to pursue funding through the Procurement Code;

- how does the new value-based reimbursement mechanism actually benefit people in need of services? Ms. Chavez-Sanchez stated that it comes from a requirement for outcome measures and an evaluation of the impact of those outcomes;
- a member encouraged the presenters to explore whether the county would support imposition of a local option alcohol excise tax. Ms. Chavez-Sanchez noted that the Behavioral Health Services Division (BHSD) of the HSD went to Vancouver to examine that city's model for an excise tax;
- to what extent is the county working to become a Medicaid provider? The county is engaged in this, but it is not a requirement for providers at this time;
- what are the locations in which there are shortages of psychologists? Ms. Chavez-Sanchez said that she will get that information;
- is the county working to develop single-site supportive housing models? Yes, the county has just entered into an agreement with the Children, Youth and Families Department to build such sites;
- a member suggested that the county look into Oxford House as a housing model;
- how many of the programs in the county are accredited by the Commission on Accreditation of Rehabilitation Facilities? The county has two accredited sites and is working to expand accreditation;
- a member asked for an update on the development of a triage crisis center. Ms. Chavez-Sanchez stated that there has been a start on certification and that the county is working closely with the University of New Mexico on development of a larger unit;
- what is the role of the Vocational Rehabilitation Division (VRD) of the Public Education Department in this work? Ms. Chavez-Sanchez noted that it is important to work with the VRD as it deals with vulnerable clients, often with dual diagnoses; this is beginning to be explored; and
- a member emphasized the importance of collaborations among all partners in eliminating unnecessary administrative steps.

Update on Behavioral Health and Homelessness Interventions for Veterans

Bobby Ehrig, chief executive officer, Veterans Integration Center (VIC), Judy Griego, secretary, Veterans' Services Department (VSD), and Andrew Davis, M.S.W., L.C.S.W., coordinated entry specialist, Veterans Health Administration, addressed the subcommittee.

Mr. Ehrig described the VIC and its primary mission, which is to house homeless veterans. He noted that homelessness, transportation and access to mental health services are key issues that the VIC addresses. He stated that the VIC has created multiple programs to combat veteran homelessness, adding that the VIC offers three options to address different reasons for homelessness: emergency housing; transitional housing; and rapid re-housing. He described a program called "Operation Warrior Recovery" in which peer specialists serve as "battle buddies" to listen to veterans and offer support to prevent suicide. He stated that food insecurity is a chronic problem of the homeless, adding that the VIC operates a food pantry that distributes 87,000 pounds of food products each year to veterans and their families.

Mr. Ehrig noted that, despite state budget surpluses, veterans' services through the VSD were cut. He further noted that the United States Department of Veterans Affairs (VA) Raymond G. Murphy VA Medical Center in Albuquerque often does not fully understand the unique stressors faced by veterans or issues faced by veterans who are or have been incarcerated.

Mr. Davis stated that he works in the Health Care for the Homeless Veterans program (HCHV) located at the VA medical center in Albuquerque. He identified supportive housing, encompassing housing vouchers and case management services, and traditional housing, using a federally funded program that offers case management and housing through the VA, as the two primary programs offered by the HCHV. He described other services provided by the HCHV, including veterans' justice outreach, respite shelter, an employment program and multidisciplinary medical and psychological interventions. Mr. Davis asserted that in Albuquerque, the HCHV has a strong continuum of care with a coordinated entry system that locates, screens and offers housing and assists veterans to achieve permanent housing.

Subcommittee members had questions and made comments in the following areas:

- where does the funding come from for the VIC? Mr. Ehrig noted that most funding comes from the VA, the Department of Health and the BHSD;
- is the VIC planning to make a request for the lost state funding to be restored? Secretary Griego noted that money for the VIC was removed from the VSD budget. She noted that the VSD had been funding operating costs for six nonprofit veteran-related programs. The funds have been diverted to support the Angel Fire Vietnam Veterans Memorial;
- does the VSD address the needs of veterans as soon as they are released from active duty, and does that save money for future problems that arise out of that transition? Secretary Griego said that personnel are assigned to meet with soldiers on their release from active duty. Brenda Mayne, psychologist, Veterans Health Administration, stated that the VSD has programs designed to get ahead of typical problems that plague veterans. She identified the difficulty of meeting needs due to a lack of behavioral health providers;
- an observation was made that the ratio of veterans to residents is one to 11, which is a high percentage, and that many veterans suffer from behavioral health disorders;
- are health care providers serving veterans paid equitably? Ms. Mayne noted that she took a 20% cut in pay when she left private practice to work for the VA;
- a member asked why the VSD cut funding for the VIC. The VIC is a nonprofit entity, so a legislative appropriation is the only way it can be funded by the VSD;
- a member asked whether there is an opportunity to provide funding through a grant process? Secretary Griego stated that the VSD has many competing priorities, but it would support a legislative appropriation request for the VIC;
- a member clarified the legislative funding process for nongovernmental entities;
- Mr. Ehrig noted that the VIC food pantry can feed veterans but is challenged to serve other populations;

- how does an incarcerated veteran obtain help from the VIC or other veterans organizations? Personnel in prisons or jails must notify inmates of the availability of veterans services, such as housing;
- a suggestion was offered to change the mandate of the VSD to include the role of the VIC in providing housing; and
- a suggestion was offered that as a nonprofit organization, the VIC could engage in a pledge campaign as an additional source of funding.

Update on Behavioral Health and Homelessness Interventions From the HSD

Angela Medrano, deputy secretary, HSD, and Mika Tari, acting director, BHSD, HSD, spoke to the subcommittee. Ms. Medrano introduced members of her staff who were present.

Ms. Medrano identified programs in which the HSD and the BHSD support housing and behavioral health services. She noted that in 2019, 840 veterans and their family members were served by the BHSD. She identified the top diagnoses and services provided, the providers of those services and the providers' locations. Ms. Medrano described supportive housing services provided by the HSD and noted that the HSD is the lead agency to provide housing for individuals with special needs. She explained a new supportive housing program that is a benefit of Medicaid and serves individuals with serious mental illness.

Ms. Tari identified additional BHSD housing programs that are funded by the General Fund, including temporary crisis housing for severely mentally ill individuals being discharged from psychiatric hospitals, jails or other institutional settings. She identified other housing supports provided by the BHSD through partners, including Oxford House, home case management and training and technical assistance. She shared data regarding how program funds are expended and described a \$2.451 million workforce assessment grant that was awarded by the federal Centers for Medicare and Medicaid Services to the Medical Assistance Division of the HSD and the BHSD. The goals of the grant include a comprehensive statewide assessment to determine treatment needs for substance use disorders and opioid abuse disorders. Grant partners were identified.

Subcommittee members had questions and made comments in the following areas:

- are community health workers eligible to receive payment under Medicaid for peer support services? Not at present, but the HSD is working on this;
- is the source of the grant money related to federal opioid funding? Ms. Tari noted it is through a federal Substance Abuse and Mental Health Services Administration grant;
- is the BHSD asking for more funding in the 2021 budget request? Ms. Medrano stated that the HSD is asking for more money in a variety of areas;
- are regional housing boards working together with the New Mexico Finance Authority (NMFA)? The HSD and the NMFA are working together regarding eligibility for funding;

- a request was made for more information on the move-in assistance program. Lisa Howley, supportive housing program manager, BHSD, HSD, noted five providers that offer assistance or eviction prevention grants in the amount of \$600;
- is there overlap between programs for homeless veterans and those that the BHSD supports? Ms. Howley noted that all agencies working on housing are aware of the different programs and refer to the best resources;
- did the HSD provide any funding for Oxford House? Cynthia Melugin, senior policy analyst, BHSD, HSD, said that the BHSD did provide funding for five houses; so far only two have opened. No further funding will be available until Oxford House has fulfilled its original obligation;
- is \$600 sufficient for the move-in assistance program, given that residents likely do not have much in the way of discretionary funds? Consuelo Pena, deputy director of finance, BHSD, HSD, noted that the HSD receives \$250,000 for the program, so \$600 per person is the most the department believed it could offer; and
- are there opportunities for leveraging to increase the overall amount of funding for the program? The services provided through the BHSD are funded by the General Fund.

Recommendation for Endorsement: Emergency Behavioral Health Evaluations (.215844.3)

Representative James R.J. Strickler testified that the bill is not yet ready for an endorsement recommendation.

John Caldwell, constituent, provided background information about his brother, a retired member of the United States Air Force who has schizophrenia and has had psychotic breaks on two separate occasions in which he would have died had his brother not intervened. He asserted that there is a gap in New Mexico law that prevents entry into a personal residence under circumstances such as those experienced by his brother. He stated that Lorette Enochs, an attorney practiced in mental health issues, researched how other states have dealt with this issue and discovered that most other states include a provision in state law similar to the one being proposed by Representative Strickler. He asserted that the events with his brother led to the development of this bill, which is intended to provide for the detention and transport of certain persons with emergency mental health needs and to allow entry into structures in certain circumstances.

Subcommittee members had questions and made comments in the following areas:

- a member asked if Disability Rights New Mexico (DRNM) supports the bill. Representative Strickler said that he is working with DRNM and is trying to reach a consensus, which is why the bill is not yet being presented for endorsement;
- a recommendation was made to leave individuals with developmental disabilities out of the bill;
- thanks were expressed for presenting the bill to allow review and comment prior to introduction;

- a member suggested that there will always be different perspectives between law enforcement and the general public on the best way to intervene in crisis situations; and
- a suggestion was made that support be sought from not only DRNM but also from the Behavioral Rights Association, the attorney general and others.

Public Comment

Nat Dean, traumatic brain injury survivor and disability rights advocate, noted that pets and therapy animals are protected in supportive housing environments. She noted that hospitals are not obligated to accommodate pets, but animal shelters can provide temporary care for these animals. She noted that the United States Department of Housing and Urban Development's 811 funding is available to augment state general funds. She noted that the Brain Injury Services Fund is also available to help with housing costs.

Jim Jackson, disability advocate, noted that it is refreshing to hear so many initiatives now being supported in the field of behavioral health, especially in the area of non-medical help. He identified issues that are associated with Representative Strickler's legislative proposal, including the central issue that there is a potential for harm to those entering the dwelling as well as to the person needing help. He appreciates the willingness of the representative to work with DRNM.

Ellen Pinnes, DRNM, echoed Mr. Jackson's comments. She also noted that although the Anti-Donation Clause of the Constitution of New Mexico prohibits a legislative appropriation to nongovernmental entities, there is another section of law that she believes is the more appropriate citation that prevents an appropriation directly to a nongovernmental entity.

Adjournment

There being no further business, the meeting adjourned at 3:38 p.m.