





NAVIGATING THE FUTURE OF HEALTHCARE TOGETHER JUNE 1, 2023

DEPUTY SECRETARY ALEX CASTILLO SMITH

INVESTING FOR TOMORROW, DELIVERING TODAY.

BEFORE WE START...

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

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



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



TOPICS FOR TODAY

- Housekeeping
- HSD needs you!
 - Medicaid
 - Behavioral health
 - Primary Care
 - Supporting the workforce
 - Public Health Emergency Unwinding



Alex Castillo Smith

Deputy Secretary

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HED LOAN REPAYMENT PROGRAM



- Provides eligible applicants with up to \$25,000 in student loan forgiveness.
- Gov. Lujan Grisham approved a record \$14.6 M for the program, a \$13 M increase.
- Recipients must commit to practicing in health professional shortage area for min. of 2 years.
- Apply today:
 https://hed.nm.gov/financial-aid/loan-repayment-aid/loan-repayment-professional-aid/services



MISSION

To transform lives. Working with our partners, we design and deliver innovative, high quality health and human services that improve the security and promote independence for New Mexicans in their communities.

GOALS



We help NEW MEXICANS

1. Improve the value and range of services we provide to ensure that every qualified New Mexican receives timely and accurate benefits.



We communicate EFFECTIVELY

2. Create effective, transparent communication to enhance the public trust.



We make access EASIER

Successfully implement technology to give customers and staff the best and most convenient access to services and information.



We support EACH OTHER

4. Promote an environment of mutual respect, trust and open communication to grow and reach our professional goals.

Overall Vulnerability

NEW MEXICO HAS THE HIGHEST DEGREE OF SOCIAL VULNERABILITY IN THE U.S.

Status

Socioeconomic

Household Composition & Disability

Minority Status & Language

Housing & Transportation **Below Poverty**

Unemployed

Income

No High School Diploma

Aged 65 or Older

Aged 17 or Younger

Older than Age 5 with a Disability

Single-Parent Households

Minority

Speak English "Less than Well"

Multi-Unit Structures

Mobile Homes

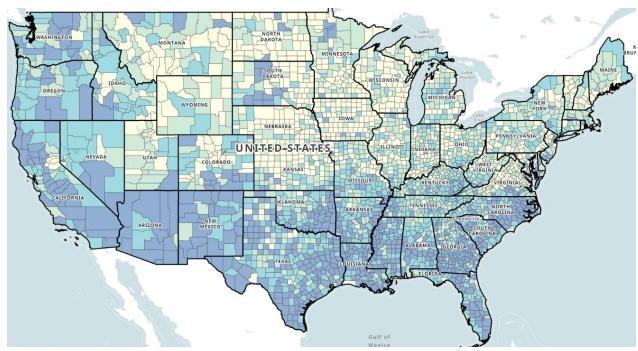
Crowding

No Vehicle

Group Quarters

U.S. Social Vulnerability by County, 2020

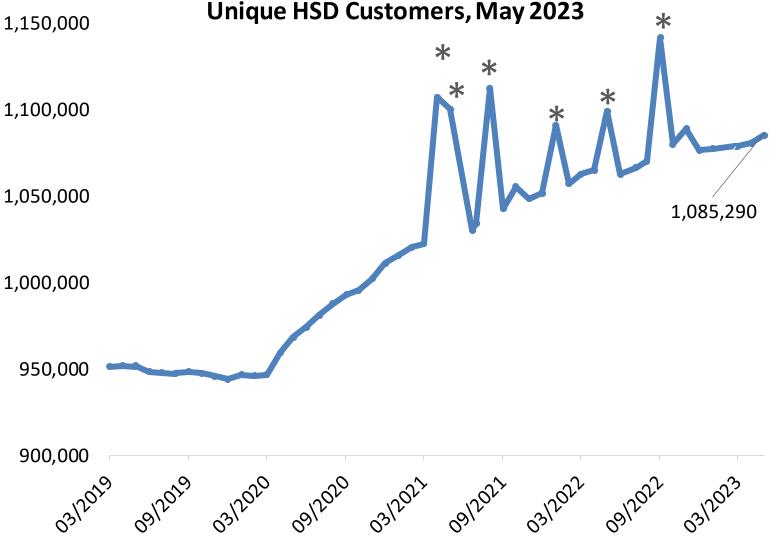
Darker color shows higher vulnerability



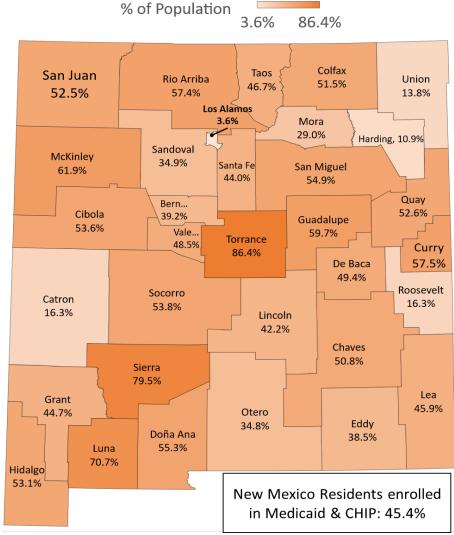
Source: https://www.atsdr.cdc.gov/placeandhealth/svi/index.html



HSD SERVES 51% OF NEW MEXICANS



Medicaid & CHIP Recipients as a Percentage of Population by County, June 2022



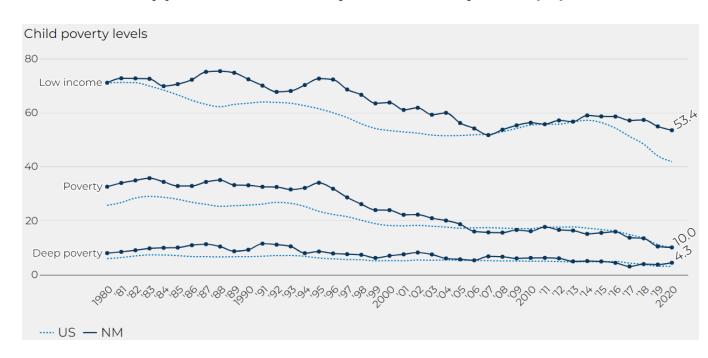
*Months with a Pandemic EBT Payment

Investing for tomorrow, delivering today.

EXPANDED SAFETY NET DRIVES SHARP DROP IN CHILD POVERTY

- U.S. child poverty fell by 59% from 1993 to 2019- in every state, including NM (from 31.5% in 1993 to 10% in 2020).
- Many factors contribute to decrease, including lower unemployment, increased labor force participation, and growth of minimum wages.
- Expansion of government aid significant.
 - In 1993, safety net programs cut child poverty by 9%.
 - By 2019, poverty level reduced by 44%, removing 6.5 M children from poverty.
- More than 8 M children remain in poverty, and Black and Hispanic/Latino children ~3x as likely as white children to be lower-income.

U.S. & N.M. Trends in Child Poverty Rates Measured by Supplemental Poverty Measure, by level (%)



Source: https://www.childtrends.org/publications/state-level-data-for-understanding-child-poverty



HSD'S SOCIAL IMPACT: NM BENEFITS FROM MODERN AND RESPONSIVE SOCIAL SAFETY NET

HSD's Programs have had the following social impact:

519,631,238 meals provided to New Mexicans through Supplemental Nutrition Assistance Program (SNAP) over the last 12 months



last updated: 5/18/2023

989,199 individuals provided the ability to visit a doctor, afford medication and immunizations through Medicaid in April 2023



20,258 homes heated and cooled for New Mexico families through Low Income Energy Assistance Program (LIHEAP) in Federal Fiscal Year 2023



8,265 families provided shelter and necessities through Temporary Assistance for Needy Families (TANF) in April 2023



\$124.35* per month on average through child support to help kids be happy and healthy over the last 12 months

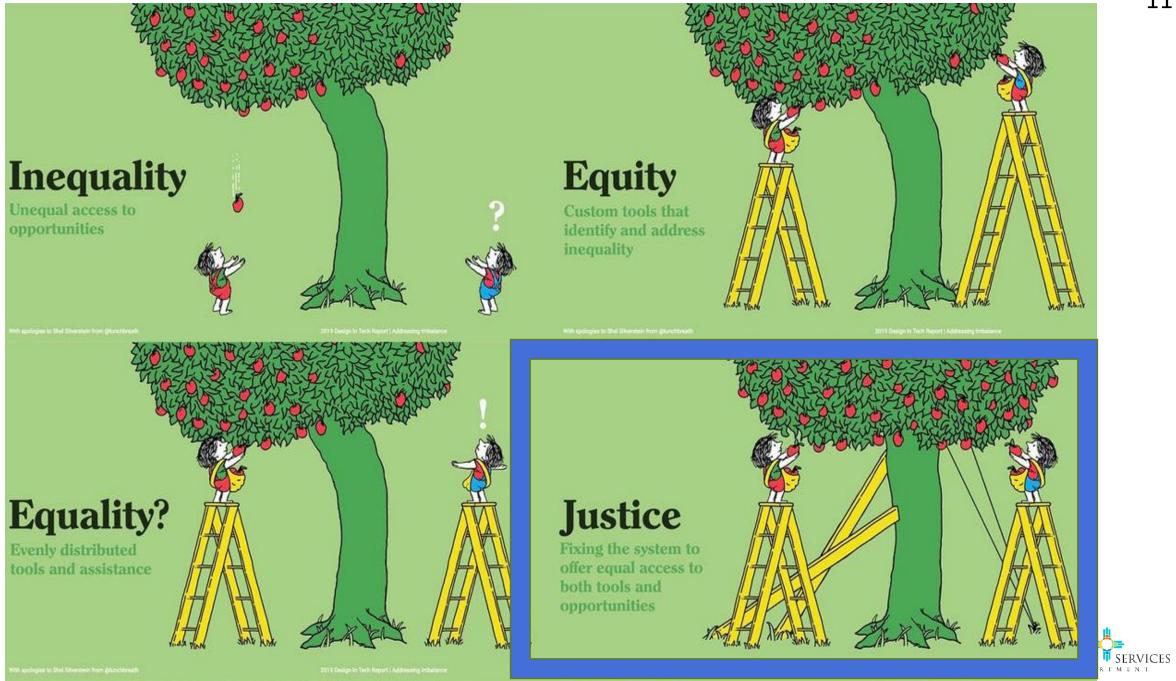


216,488 New Mexico adults supported by Behavioral Health programs and services** from July 2021-June 2022



*collections include current support and arrears debt to the custodial parent and/or the state.

**BH services include those covered through Medicaid and other sources (federal and general funds). The total is affected by a 3 month claim lag and therefore this measure is updated quarterly.



STRUCTURAL DETERMINANTS VS SOCIAL DETERMINANTS

- Social Determinants
 - = circumstances in which people are born, grow, live, learn, work, and age.
 - Shaped by <u>structures</u> beyond control of individuals.
- Structural Determinants = "root causes" that shape quality of Social Determinants we experience.
 - Includes political and government, economic, geographic and social constructs that affect wealth, living and working conditions, education and health.



WE NEED YOU! HOW CAN YOU BECOME STRUCTURALLY INFORMED IN YOUR PRACTICE?

Recognize Structures Develop the Language

Articulate
Cultural
Formulations in
Structural Terms

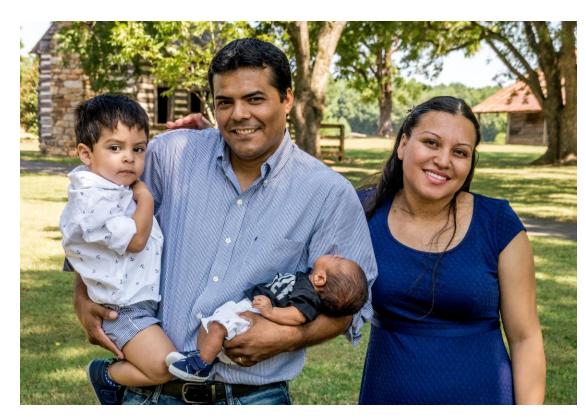
Observe and Imagine Structural Interventions

Implement Structural Interventions



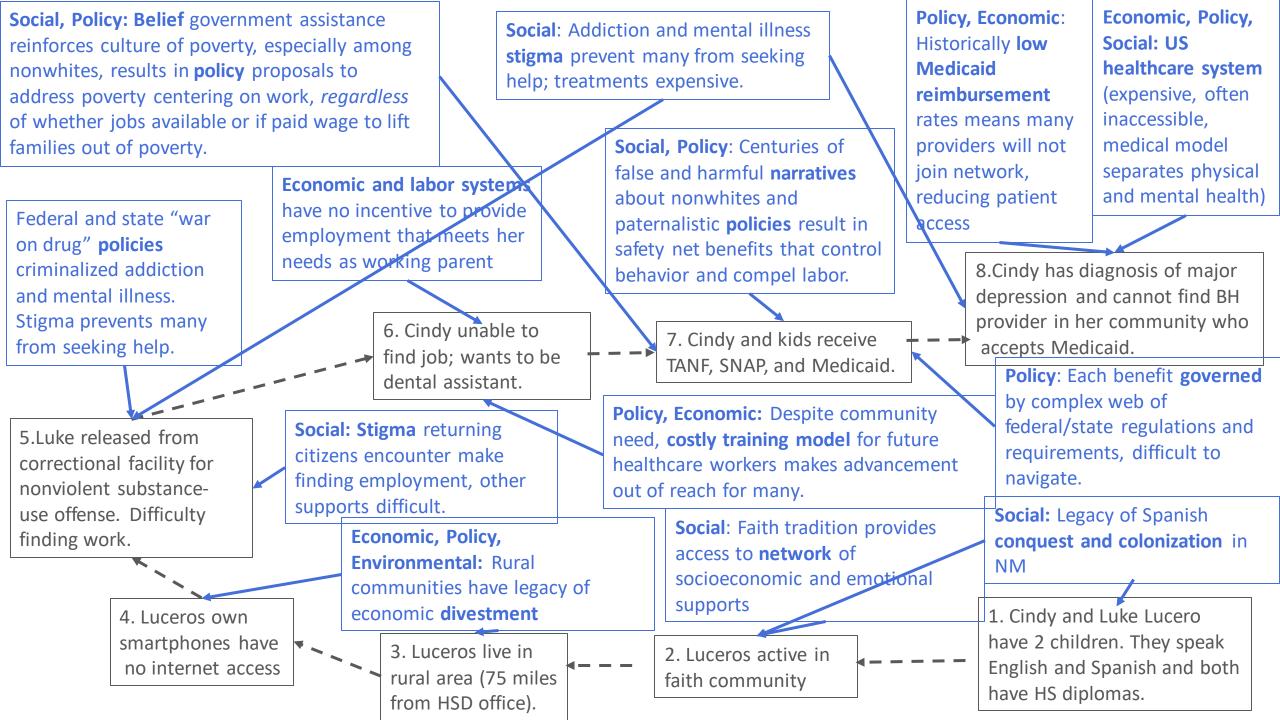
LUCERO FAMILY*

- Parents Cindy and Luke have 2 children. They speak English and Spanish. Quick learners, eager to provide for their family, and active in faith community. Enjoy spending time outdoors.
- Both have HS diplomas. Cindy worked in service industry and Luke in construction.
- Live in a rural area (75 miles from nearest HSD office).
- They own smartphones- have no other internet access.
- Luke recently released from correctional facility for a nonviolent substance-use related offense.
- Cindy unable to find consistent employment; she wants to become a dental assistant.
- Cindy and kids receive TANF, SNAP, and Medicaid benefits.
- Cindy has a diagnosis of major depression and cannot find a BH provider in her community who accepts Medicaid.



* To protect confidentiality, the case is a composite of several HSD customers.





UNPRECEDENTED INCREASE IN MEDICAID REIMBURSEMENT

- HSD's FY24 budget will include funding required to raise primary care, behavioral health, and maternal/child health rates to nearly 120% of Medicare.
- All other rates raised nearly to 100% of Medicare.
- These rate increases:
 - Increase access to highquality care.
 - Attract and retain providers.

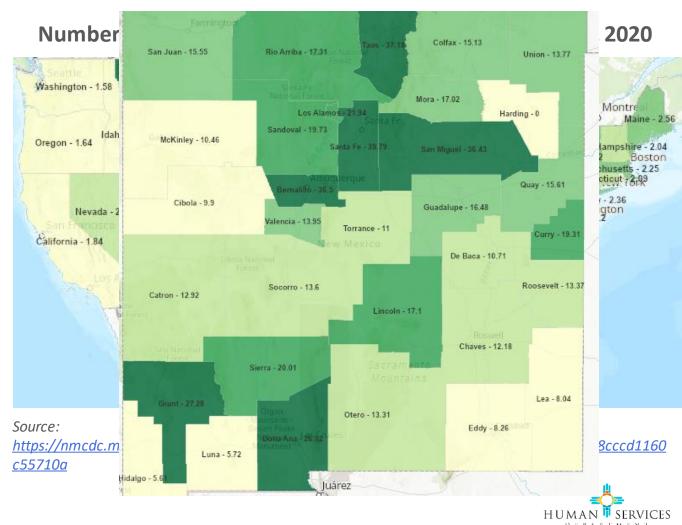
Service Area	Service Subgroup				100% of Medicare Rates (110% for Targeted Services)			100% of Medicare Rates (120% for Targeted Services)		
		CY2019 Total MC Expenditures			Total Estimated Impact of Rate Increases	Estimated % Impact of Rate Increases		otal Estimated mpact of Rate Increases	Estimated % Impact of Rate Increases	
Home & Community Based Services	1115 Waiver Community Benefit	\$	430,703,514			8%	\$	35,969,973	8%	
		\$	12,988,872	_		1%	\$	156,768	1%	
	All Home & Community Based Services	\$	443,692,386	\$	\$ 36,126,741	8%	\$	36,126,741	8%	
	Evaluation & Management	1 \$	187,668,701	T o	\$ 65,260,886	35%	1 \$	88,254,485	47%	
	Surgery	1 \$	18,113,356	_		14%	1 \$	4,089,415	23%	
Physician & Other Practitioners	Radiology/Laboratory/Pathology	\$	24.857.097			17%	\$	6,996,358	28%	
	Medicine	\$	26,162,965		, , , , , , , , , , , , , , , , , , , ,	34%	\$	11.863.217	45%	
	Anesthesia	\$	7,862,495		,,	28%	\$	3,095,844	39%	
	All Physician & Other Practitioners	\$	264,664,613	_		31%	\$	114,299,319	43%	
	Other HCPCS	\$	30,210,086			22%	\$	6,547,833	22%	
	Non-Emergency Medical Transportation	\$	44,833,119	_		18%	\$	8,058,976	18%	
HCPCS Level II	Physician Administered Drugs	\$	25,985,467	_		0%	\$	825	0%	
1101 33 23.3	Emergency Medical Transportation	\$,,	_	-, ,-	42%	\$	15,411,342	42%	
	Durable Medical Equipment	\$	16,537,401		,	5%	\$	868,895	5%	
	All HCPCS Level II	\$	154,203,201	\$	\$ 30,887,872	20%	\$	30,887,872	20%	
	Maternity-Related	\$	29,895,501	\$	\$ 6,721,854	22%	\$	9,171,793	31%	
	Child Health and EPSDT	\$	32,500,972	_		31%	\$	13,376,507	41%	
Maternal & Child Health	Newborn-Related Care	\$	12.722.237		,,	16%	\$	3,329,377	26%	
Waterial & Crine Fleam.	Family Planning	\$	10,545,158	_	, , , , , , , , ,	34%	\$	3,927,440	37%	
	All Maternal & Child Health	\$	85,663,868			26%	\$	29,805,117	35%	
	Other Behavioral Health	\$	117,941,505			17%	\$	29,691,743	25%	
Behavioral Health	Opioid Treatment Program	\$	25,293,012			0%	\$	16,468	0%	
Dellaviorar ricaiu i	Applied Behavioral Analysis	\$	19,529,167	_	, , , , , , , , , , , , , , , , , , , ,	11%	\$	2,234,984	11%	
	All Behavioral Health	\$	162,763,684	\$	\$ 21,905,009	13%	\$	31,943,195	20%	
Dental	Diagnostic/Preventive/Other	\$	71.047.347	\$	\$ 11,053,847	16%	\$	11,053,847	16%	
	Orthodontics	\$	11,202,940	_		5%	\$	554.061	5%	
	All Dental	\$	82,250,287	_		14%	\$	11,607,907	14%	
·			, , , , , , , , , , , , , , , , , , ,	Ė					, ,	
All Professional Services	All Service Subgroups	\$	1,193,238,039	\$	\$ 206,185,114	17%	\$	254,670,151	21%	
Services Not in Top 20 Codes	All Service Subgroups	\$	250.223.539	ģ	\$ 43.237.281	17%	\$	53,404,655	21%	
Medicare Crossover Claims	All Service Subgroups	\$	15,713,678	_	, . , .	66%	\$	10,406,349	66%	
		\$					\$			
Total Medical Expenses	All Service Subgroups	Þ	1,459,175,256			18%	Ť	318,481,155	22%	
Non-Medical Expenses				\$			\$	57,225,732		
Total Computable Cost				\$	\$ 306,515,620		\$	375,706,888		
FFP	Non-Targeted				77.71%			77.71%		
Total State General Fund	Targeted	$\overline{}$		\$	\$ 68,322,332	$\overline{}$	\$	83,745,065		



WE NEED YOU! APPLY FOR THE RURAL HEALTHCARE DELIVERY FUND

- \$80M appropriated to HSD for FYs24-26
- Fund provides start-up grant funding for new or expanded services in rural NM counties.
- HSD will request Letters of Interest via SurveyMonkey from providers beginning June 9.
- HSD will release RFA in September.
- HSD will notify funding recipients in December 2023, with funds released early 2024.

Core Mental Health Professionals Full-Time Equivalent, 2020



MEDICAID TURQUOISE CARE GOALS

Vision: Every New Mexico Medicaid member has high-quality, well-integrated, person-centered care to achieve their personally defined health and wellness goals.

Goal 1

Build a New Mexico health care delivery system where every Medicaid member has a dedicated health care team that is accessible for both preventive and emergency care that supports the whole person — their physical, behavioral, and social drivers of health.



Goal 2

Strengthen the New Mexico health care delivery system through the expansion and implementation of innovative payment reforms and value-based initiatives.



Goal 3

Identify groups that have been historically and intentionally disenfranchised and address health disparities through strategic program changes to enable an equitable chance at living healthy lives.





NEW MEDICAID TURQUOISE CARE BENEFITS



- Continuous enrollment for children 0-6
- Medicaid services for high-need justice involved members 30 days prior to release
- Home-delivered meals pilot program
- Medical respite for members experiencing homelessness
- Closed-loop referral service

NEW MEXICO PRIMARY CARE COUNCIL MISSION

Revolutionize primary care into InterProfessional, sustainable teams delivering high-quality, accessible, equitable health care across New Mexico through partnerships with patients, families, and communities.

VISION

By 2026, New Mexico will exemplify same-day access to high-quality, equitable primary care for all persons, families, and communities.

Health Equity



GOALS



Payment Strategies

Develop and drive investments in health equity to improve the health of New Mexicans.

Health Technology

Develop and drive health information technology improvements and investments that make high quality primary care seamless and easy for Primary Care Interprofessional Teams, patients, families, and communities.

Develop and make recommendations regarding sustainable payment models and strategies to achieve high quality and equitable primary care for all New Mexicans.

Workforce Sustainability

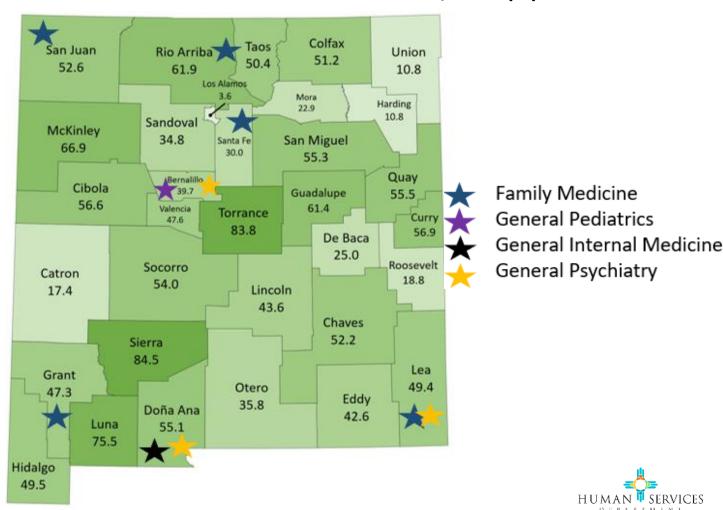
Create a sustainable workforce, financial model, and budget to support our mission and secure necessary state and federal funding.

WE NEED YOU! SUPPORT PRIMARY CARE RESIDENCY

EXPANSION

- Over a 5-year period, starting in 2019, accredited primary care residencies expected to grow, from 8 to 16 (100%) increase).
- Number of primary care residents in training will increase from 142 to 264 (86% increase) during this 5-year period.
- Number of graduates each year will grow from 48 to 82, a 71% increase.
- Residencies continue to be developed in counties with (and near to) high numbers of Medicaid customers.
 - HSD wants to see an expansion of FQHC-led residencies. Please step up and support; funding is available!

PC Residencies Under Development as of 11/2022 & County Residents Enrolled in Medicaid as of 11/2021 (%)





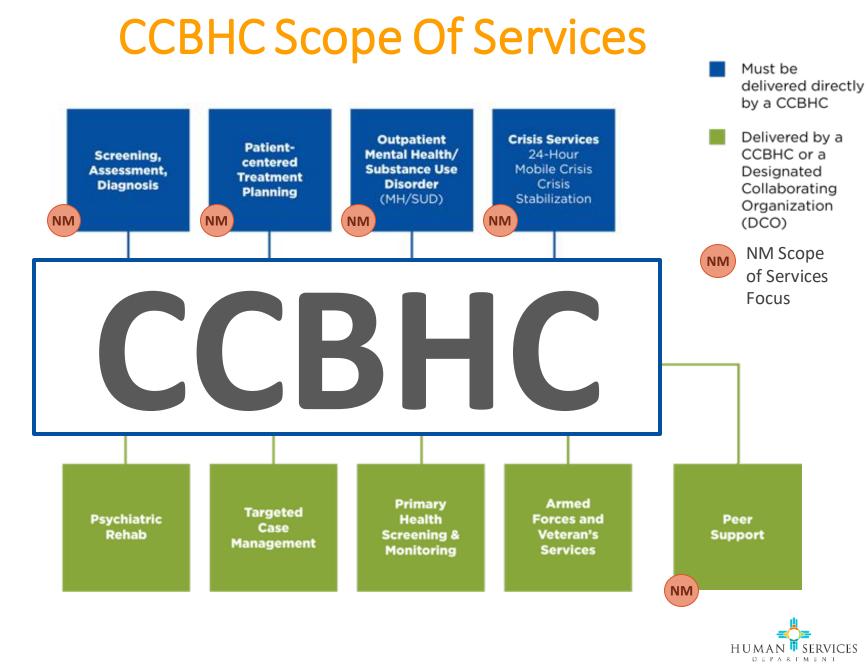


A behavioral health response for a behavioral health crisis



CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINICS (CCBHCs)

- HSD received a CCBHC federal planning grant.
- CCBHCs ensure
 access to
 coordinated
 comprehensive
 behavioral health.
- CCBHCs must
 provide care
 coordination across
 behavioral health,
 physical health, and
 social services.

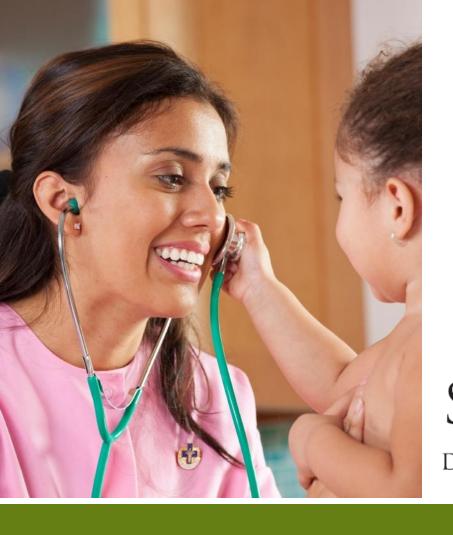


It's Time to Renew NM

- Renew NM provides resources and information to HSD customers and community partners about how and when to renew Medicaid & SNAP benefits.
- 3 important steps to remember:
 - Update your contact info.
 - Look for your Turquoise envelope.
 - Submit your renewal.

RENEW.HSD.NM.GOV









QUESTIONS

INVESTING FOR TOMORROW, DELIVERING TODAY.