

The Human Services Department (HSD) presents a synopsis of the top budget, legislative and policy issues and priorities with tribal impact in the programs and services delivered through the HSD Income Support Division, Child Support Division, Medical Assistance Division, and Behavioral Health Services Division for fiscal year July 1, 2022 to June 30th,2023. HSD continues its commitment to uphold the principles of the State-Tribal Collaboration Act of 2009 by building upon the priority of government to government relationship with the twenty-three tribes of New Mexico.

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Land Acknowledgement



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

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.

Executive Summary

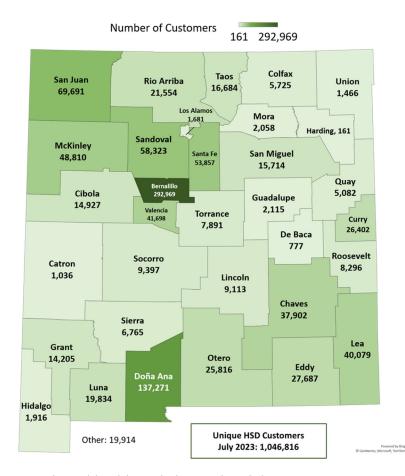
The mission of the Human Services Department (HSD) is to transform lives. Working with our partners, HSD designs and delivers innovative, high-quality health and human services that improve the security and promote independence for New Mexicans in their communities. HSD has four strategic goals that drive the agency's priorities:

- 1. **We help New Mexicans.** Our goal is to improve the value and range of services we provide to ensure that every qualified New Mexican receives timely and accurate benefits.
- 2. **We communicate effectively.** Our goal is to create effective, transparent communication to enhance the public trust.
- 3. We make access easier. Our goal is to successfully implement technology to give customers and staff the best and most convenient access to services and information.
- 4. We support each other. Our goal is to promote an environment of mutual respect, trust and open communication to grow and reach our professional goals.

As of July 2023, the New Mexico Human Services Department (HSD) serves 1,046, 816 New Mexicans through assistance programs and services such as Medicaid, the Supplemental Nutrition Assistance Program (SNAP), the Temporary Assistance for Needy Families (TANF) program, the Low-Income Home Energy Assistance Program (LIHEAP), behavioral health services, and child support services. HSD leads with a team approach designed to bring its divisions together with a primary focus on meeting the needs of its customers. Medicaid enrollment is beginning to decline as the federal flexibilities allowed during the COVID-19 pandemic have ended.

HSD has a 2023 Digital Data Book (see link below). Much of the data included

Unique HSD Customers, July 2023



in the book are summaries and maps of socioeconomic and health statistics, national data comparing New Mexico to other states, county level factsheets to identify areas of greatest need, and demographic and program data for various state agencies. The 2023 New Mexico Digital Databook can be found here:

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A Summary of HSD's Key Accomplishments in SFY2023



Medical Assistance Division (MAD)

- New Mexico Medicaid implemented a 10% reimbursement increase from July 1, 2022, to June 30, 2023, and a 5% reimbursement increase from July 1, 2023, to June 30, 2024, for providers of personal care services (PCS) and private duty nursing (PDN) under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit. The increase will help ensure that New Mexico has an adequate provider base and workforce to care for our eligible members under the age of 21.
- Reviewed Medicaid provider reimbursement levels to ensure access to high-quality care, attract and retain providers, and establish a methodology, process, and schedule for routine rate reviews.
- Effective February 1, 2023, New Mexico Medicaid covers all preventive services assigned moderate to substantial and all approved vaccines recommended by the Advisory Committee on Immunization Practices (ACIP), and their administration. The changes were made to comply with the Affordable Care Act.
- Effective January 1, 2023, changes were made to the Former Foster Care Children (FFCC) group. The change mandated that Medicaid eligibility for the FFCC group be allowed for individuals who age out of foster care from another state than where they currently live. New Mexico will continue to include individuals who aged out of foster care from another state prior to January 1, 2023 to have Medicaid eligibility through the 1115 Waiver.
- Community Transition Services Effective March 28, 2023 Medicaid increased the dollar amount limit for community transition services from \$3,500 to \$4,000 every five years. The funds are one time set up expenses for individuals transitioning from institutions into private residences in the community where they are responsible for their own living expenses.
- Provider Reimbursement- HSD reviewed Medicaid provider reimbursement levels to
 ensure access to high-quality care, attract and retain providers, and establish a
 methodology, process, and schedule for routine rate reviews.
- HSD submitted the 1115 waiver application with over 20 innovative initiatives to redesign and enhance healthcare delivery system.
- Environmental Modification Services Medicaid increased the dollar amount limit from \$5,000 to \$6,000 every five years for environmental modifications. These funds allow for

- the purchase and/or installation of equipment and physical adaptations to a member's residence that are necessary to ensure health, welfare, and safety of members, as well as enhance their level of independence.
- Home and Community Based Services Improvements Approved by CMS March 28, 2023. This Medicaid amendment increased the enrollment limit of the Community Benefit Program which provides services such as adult day health, assisted living, behavioral support consultation, and customized community supports.
- Telehealth During the COVID-19 pandemic, HSD authorized the use of telehealth for most behavioral health services. The results of expanded access to behavioral health services through telehealth have led to a 133% increase in utilization. All managed care organizations (MCOs) reported significant increases in telehealth services to all age groups, in urban, rural and frontier counties, and to all populations of serious mental illness (SMI), severe emotional disturbance (SED), and substance use disorder (SUD) clients. The type of telehealth service that experienced the largest increase by all MCO was psychotherapy with individuals and/or family members.
- CMS approved the Serious Mental Illness/Severe Emotional Disturbance (SMI/SED) implementation plan effective March 28, 2023. Covered services include short-term stays in acute inpatient psychiatric hospitals and residential treatment centers that qualify as institutes of mental disease (IMDs) for Medicaid eligible individuals who are primarily receiving treatment for SMI. It also includes those Medicaid recipients under age 21 who receive treatment services for SED furnished by qualified residential treatment programs.
- High Fidelity Wraparound (HFW) Intensive Care Coordination —On March 28, 2023, CMS approved HFW intensive care coordination which allows the state to provide a team of highly skilled planners and facilitators to create custom and tailored plans to help children with SED enrolled in either the managed care or Fee-For-Service (FFS) delivery systems. This benefit aims to assist children and their families reach beneficiary-centered success while remaining in their homes and communities.
- Healthcare Quality Surcharge leveraged \$86 million in federal Medicaid funds to improve NM nursing homes. Primary Care Council (HB 67, 2021) developed a new value-based Medicaid primary care payment model to support high-quality, equitable, primary care for all New Mexicans.
- The primary care residency program expansion (HB480, 2019) continues to support the development of physician and psychiatric residency programs including programs in Hobbs, Doña Ana, San Juan, and Santa Fe; helping to increase the workforce in the state.
- Reviewed Medicaid provider reimbursement levels to ensure access to high-quality care, attract and retain providers, and establish a methodology, process, and schedule for routine rate reviews. Reviewed Medicaid provider reimbursement levels to ensure access to high-quality care, attract and retain providers, and establish a methodology, process, and schedule for routine rate reviews.
- Effective beginning March 1, 2021, the Medical Assistance Division (MAD) began to reimburse all I.H.S. and Tribal 638 outpatient pharmacies at the OMB rate in the federal register. On July 5th, 2023, HSD Interim Secretary, Kari Armijo announced at the State-Tribal Leaders summit, MAD was able to demonstrate a full calendar year of reimbursement data. The Outpatient Pharmacy Reimbursement to I.H.S. and Tribal 638 healthcare facilities totaled \$605,825,280 for calendar year 2022.

Income Support Division (ISD)

HSD worked with the Affordable Connectivity Program, a Federal Communications Commission (FCC) program to lower the cost of broadband for eligible households, making internet more accessible. The \$14 billion Affordable Connectivity Program provides up to a \$30 discount per month toward internet service for eligible households and up to \$75 per month for qualifying households on tribal lands.

- As a result of the federal SNAP emergency allotments (EA) ending February 2023, HSD issued a \$50 SNAP supplement to all identified elderly/disabled SNAP cases March-June to mitigate the loss of the EAs. HSD efforts are to continue to provide access to funds for food banks to establish ongoing food box distributions and to provide ARPA funds to purchase food for communities.
- The Human Services Department (HSD) provided the option of getting electronic notices
 to customers about their benefits. It is an easy to way to view and receive important
 notices from HSD. The fastest and easiest way to renew benefits is by accessing
 YESNM account at www.yes.state.nm.us
 You can also check out our
 https://renew.hsd.nm.gov/partners-toolkit.
- Issued \$22 million in supplemental utility assistance payments to 120,266 lower-income households.
- Provided 4,741 lower-income households benefits up to \$1,500 in water and wastewater assistance.
- Provided Disaster SNAP to 1,996 New Mexicans (totaling \$446,309.00) affected by wildfires and partnered with community organizations to meet other needs (e.g., housing, medical supports).
- Increased TANF cash payments by 23%.
- Collaborated with Taxation and Revenue Department to distribute \$15 million in economic relief payments.
- Implemented transition bonus cash for individuals' transitioning from TANF.
- Supported aged/disabled adults with additional SNAP payments for 3 months during unwinding of the Public Health Emergency.
- Received approval for several US Food & Nutrition Services waivers reducing administrative burden for the unwinding of the Public Health Emergency (PHE).

Behavioral Health Services Division (BHSD)

- Launched new 988 Crisis Now system (HB2, 2022), a statewide coordinated care system, to reach New Mexicans in need of mental and behavioral health support.
- Significant statewide behavioral health workforce expansion from 2017 to 2022: 88.5% increase Medicaid Psychiatric Providers and a 103.9% increase Medicaid Core BH providers.
- Expanded access to 5 evidence-based practices for children in state custody by incentivizing providers to increase the availability of these services by utilizing an enhanced Medicaid rate. This was a collaboration among MAD, BHSD, CYFD, and the Behavioral Health Collaborative.
- BHSD received the Certified Behavioral Health Clinic (CCBHC) Planning Grant Award, allowing for FY24 planning.

Child Support Services Division (CSSD)

- CSSD entered into an agreement with Santa Ana Pueblo to enforce tribal court orders. The agreement was finalized in December 2022.
- Legislative bill, SB140 (2021) modernized the Child Support Program. This bill will will send additional \$7 million to New Mexico's children.
- CSSD received the 2022 Excellence Award from the Western Intergovernmental Child Support Engagement Council.
- CSSD implemented Families First Distribution and pass though in January 2023, allowing for more money to be disbursed to families rather than state and federal TANF recoveries.
- Child Support Services Division is now featured on YESNM website. This addition allows for the public to view their cases and make payments on-line.

Legislative Changes in 2023

The New Mexico Human Services Department (HSD) celebrated the passing of two agency bills to support New Mexico families receiving services through the Child Support Services Department.

- Child Support Schedule Changes-Senate bill 223 makes it possible for HSD to more efficiently update the child support schedule every four years through regulation which allows for public input and a public hearing.
- Medicaid as Mandatory Medical Child Support Senate bill 224 eliminates the \$5 monthly medical support order that was established and charged to parents if their child was receiving health care coverage by a public health plan, such as Medicaid or SCHIP.

The following legislative bills were supported by the New Mexico Human Services Department (HSD) and/or to be administered by the HSD:

- Rural Health Care Delivery Fund SB 7 Relating to rural health care providers creating a fund to provide grants to help with operation losses and start-up costs of rural health care providers or expand their health care services.
- Create Health Care Authority Department SB 16 Creation and renaming of the Human Services Department to the Health Care Authority The following offices will be housed under the Human Services Department Developmental Disabilities Supports Division, Department of Health Improvement and State benefits.
- General Appropriation Act of 2023 HB 2 This bill appropriates \$49,645,900 to the Medical Assistance Program of the Human Services Department for provider rate increases and includes funds to raise rates for primary care and maternal and child health services to 120% percent of Medicare rates or equivalent levels. The other portion of this bill appropriates \$23,595,200 for facility rate increases and includes funds to raise rates for rural hospitals, hospitals and nursing facilities up to 100% percent of Medicare rates.
- General Appropriation Act of 2023 HB 2- HB2 outlines the spending of the TANF Block Grant. For FY 24, HSD was appropriated \$10,000,000 from the TANF Block Grant to increase the TANF Monthly Cash Benefit. The Department is currently working on the percentage of the benefit increase. HB2 also appropriated \$3,000,000 to the Higher Education Department (HED) for their Adult Basic Education Program (ABE) and the

Integrated Educations and Training (IET) program. The programs intend to provide educational services to New Mexico adults. Students in our funded programs take courses toward a high school equivalency (HSE); improve their proficiency in English as a Second Language (ESL); improve their print literacy, digital literacy, and numeracy skills; participate in career pathway programs, including IET programs; and earn industry-recognized credentials.

• General Appropriation Act of 2023 HB2- is provided to expand services in the areas of supportive housing, individuals exiting detention/correctional facilities that require support services for re-entry into the community, and to expand 988 service components for mobile crisis teams. The funding is to support all beneficiaries, including Native Americans living in New Mexico. The following is funding available to New Mexico residents:

Linkages \$1,000.000.00
 988 Crisis Now Mobile Crisis \$1.428.300.00
 Comprehensive Re-entry \$2,500,000.00

Support Pilot Program

Total \$4,928,000.00

• Opioid Settlement Funding HB2: HB 2 appropriated BHSD \$6,500,000 to start-up and expand Certified Community-Based Health Clinics, housing assistance to help people affected with opioid use disorder, expand screening, brief intervention and referrals to treatment services, and to expand telehealth services for people affected with opioid use disorder.

CCBHC Startup & expansion \$1,500,000.00
 Housing assistance \$2,000,00.00
 Treatment program \$2,000,000.00
 Telehealth services \$1,000,000.00

Total: \$6,500.000.00

• General Appropriations Act of 2023 SB 192: SB 192 appropriated \$80,000 to HSD to administer a food program for Pre-Certified Victims of Human Trafficking (PCVHT). Currently individuals who are identified as PCVHT only receive cash assistance. The monies appropriated will provide these individuals supplement monies to purchase food.

Division Summaries and Updates for State Fiscal Year 2023

Medical Assistance Division (MAD)

http://www.hsd.state.nm.us

The New Mexico Medicaid program offers health coverage to New Mexicans, including children, pregnant women, adults, and individuals with disabilities. Respecting the fundamental right to self-determination in all aspects of life, including healthcare delivery, Native Americans may currently choose to receive their health care from the Fee-for-Service (FFS) program or any one of three Managed Care Organizations (MCOs) serving New Mexico.

- Blue Cross Blue Shield of New Mexico
- o Presbyterian Health Plan
- Western Sky Community Care

When comparing the number of Native Americans enrolled in the Centennial Care Managed Care Organizations (MCOs), all three MCOs saw an increase in Native American enrollment. The Fee for Service (FFS) Medicaid had a 5% decrease in enrollment for two consecutive years during the pandemic. This increase in MCO enrollment of Native Americans was noted during the pandemic and possibly due to members requiring extended care after discharge from an inpatient facility and the need for MCO benefits and care coordination for continued support.

Native Americans Currently Enrolled in Medicaid from June 2019 to June 2023

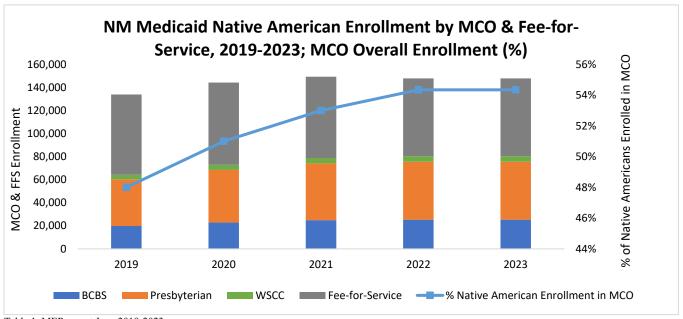


Table 1. MER report June 2019-2023

Initiatives in the 1115 Waiver Renewal Application (Turquoise Care)

HSD submitted a five-year renewal application for the state's Medicaid program to the U.S. Centers for Medicare & Medicaid Services (CMS) under the new Medicaid name Turquoise Care. The following proposed initiatives in the waiver are subject to review and approval by CMS before implementation. The renewal application has an effective date of January 1, 2024, through December 31, 2028. Initiatives include:

- Ensuring New Mexico children have continuous Medicaid coverage up to age six. The Human Services Department has asked CMS to approve continuous enrollment for children up to the age of six.
- Centennial Care Home Visiting (CHV) to expand access to home visiting programs to help families achieve healthy pregnancies and babies. During Centennial Care 2.0 MCO members in four counties were served by a Centennial Home Visiting (CHV) pilot program. Currently, this program is statewide and serves 299 families and is allocated to serve 1,500 in

2023 statewide. Tiwa Babies, a Taos Pueblo program is the only tribal CHV provider in the state. The program will continue the existing evidence-based early childhood home visiting delivery models. Tiwa Babies provides service to both Native American and non-Native American families.

- Long Term Services and Supports (LTSS) Enhancements. Expanding Home and Community Based (HCBS) Community Benefit enrollment opportunities through an additional 1000 waiver slots to help more New Mexicans maintain independence and personal choice versus services in an institutional setting. Over 32,000 members receive LTSS in their homes or community. New Mexico continues to lead the nation in spending more of its LTSS dollars to keep members in their homes and in community settings rather than institutional settings by
 - o Investing in a statewide system that connects healthcare providers and community organizations that supports health equity by improving access to care;
 - O Support health care providers through increased Medicaid reimbursement rates and a fund to help rural providers start up new services in their communities.
- Permanently allow State authorized relatives, guardians, and/or legally responsible individuals to render Community Benefit Personal Care Services (Community Benefit PCS) This authorized the state to support unpaid caregivers and ensure that individuals eligible for Home and Community Based Services (HCBS) get their needs met in the community. This approval under Turquoise Care will:
 - o Allow a wider pool of qualified providers;
 - o Strengthen the provision of supports in the community and;
 - o Modify provider qualification to ensure that relatives, guardians, and other legally responsible individuals can be justly compensated for their caregiving work;
- HSD is proposing to expand the availability of culturally competent, traditional healing benefits to all Native American members enrolled in managed care. HSD is proposing to expand the availability of traditional healing services in order to provide culturally appropriate Medicaid services to Native American members enrolled in managed care. HSD proposes to provide a \$500 budget per Native American member per year for traditional healing services provided by traditional healers.
- Providing Medicaid coverage to justice involved individuals 30 days prior to release. To support the justice-involved population, New Mexico is proposing to provide active Medicaid coverage and a targeted set of benefits 30 days prior to exiting incarceration for a defined high-needs population. This population includes incarcerated persons in state prisons, local jails, youth correctional facilities, DOH forensic unit state hospitals, tribal holding facilities, or tribal jails. The proposed benefits include enhanced care management and coordination, medication assisted treatment (MAT), and 30-day supplies of medications and durable medical equipment (DME), as appropriate. It is estimated that 7,500 people annually could benefit from this initiative.

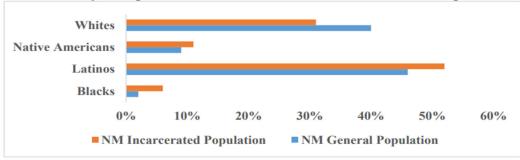


Figure 7. Race/Ethnicity Composition – NM Incarcerated versus General Population

Prison Policy Initiative (2021). New Mexico Profile. Retrieved from https://www.prisonpolicy.org/profiles/NM.html.

- Expanding access to supportive housing by providing safe and stable housing to individuals more at-risk of adverse health outcomes Under Turquoise Care, the Supportive Housing Program will continue providing pre-tenancy and tenancy support activities to members with SMI that are part of the Linkages Supportive Housing Program. HSD is proposing to expand these services to more members.
- Assisted Living and Nursing Facility Pilot HSD proposes to provide \$1 million through the Turquoise Care waiver to incentivize the growth of smaller, more community-based spaces in both nursing facilities (NFs) and assisted living facilities (ALFs) and to implement person-centered concepts through a quality incentive process to enhance living arrangements and care for members. The pilot would be comprised of two phases:
 - O Phase 1: (Demonstration Renewal Years 1-3) In year 1, funding would be made available through an application process to support NFs to smaller settings within an institutional environment allowing planning for implementation of person-centered concepts in care delivery in ALFs and NFs.
 - Phase 2: (Demonstration Renewal Years 4-5) would leverage the person-centered concepts and continued strategic planning to implement and evaluate conversion pilots to enhance physical spaces within NFs.

Room and Board for ALFs - HSD proposes to pilot Medicaid funding for room and board payments to ALFs for Medicaid members receiving the assisted living service through the community benefits package.

- HSD is proposing two new home delivered meals pilots. These pilots aim to serve community benefit members who are facing food insecurity that jeopardizes the member's ability to remain in a community-based setting and pregnant members with gestational diabetes.
- Medical Respite for Members Experiencing Homelessness HSD is seeking expenditure authority for medical respite for members experiencing homelessness after discharge from the hospital. The state proposes a medical respite pilot in Albuquerque, currently operated by Healthcare for the Homeless, a federally qualified health center (FQHC). Proposed services include care coordination, medical care on site, personal care services, and 24-hour staffing. The State's Medical Respite Pilot will fill a critical gap for members experiencing homelessness who are discharged from the hospital and need a safe and supportive space to heal off the street or in a shelter.

Table 11. Average Age at Death for People Experiencing Homelessness in New Mexico as Compared to General Population by Gender and Race and Ethnicity

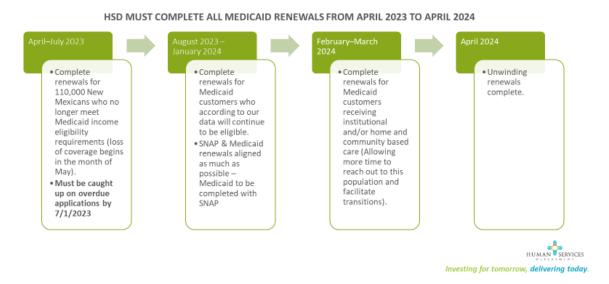
compared to central ropus	meron by Ge	muci umu ituee	tille Estillitud	
	White	Hispanic	Native American	Black/African American
Homeless Male	45.65	38.26	37.43	39.91
Overall Male	74.8	72.1	60.0	68.3
Homeless Female	39.28	33.55	35.32	34.75
Overall Female	80.5	75.4	64.5	72.1

2022 Point in Time Count Joint Albuquerque and Balance of State Report, New Mexico Coalition to End Homelessness, <u>2022 PIT Report</u> 6-8-22 DRAFT.docx (nmceh.org)

Medicaid Unwinding/Renew NM Renew New Mexico - Home (https://renew.hsd.nm.gov/)

HSD is engaged in planning activities related to the end of the federal PHE declaration in accordance with federal guidance. This work includes IT system planning, communications planning, and policy work to determine the best strategies for sunsetting the Medicaid Maintenance of Effort (MOE) and resuming normal recertification processing of Medicaid applications. New Mexico began "unwinding" the Medicaid MOE April 1, 2023 and will have 12 months to complete the unwinding process. Part of the unwinding will include restarting eligibility redeterminations for all Medicaid enrollees.

HSD UNWINDING TIMELINE



HSD is conducting a massive statewide public awareness and multimedia, multilingual campaign that includes direct communication to over one million customers to whom we are sending a turquoise envelope with their renewal application in the mail, direct mailers, text reminders, and text messages asking them to update their contact information with the department. Our multimedia campaign includes TV and radio commercials, billboards, transit, posters, flyers and outreach events in Tribal communities. The campaign will be conducted in English and Spanish. There will also be social media, radio and TV ads in Dine.

Below are examples of how HSD is managing the unwinding:

- All submitted Medicaid renewals will be processed. All new Medicaid applications will be honored back to the application date.
- Medicaid members who have submitted their renewal will remain enrolled in Medicaid until their case has been completely processed.
- HSD has onboarded and continues to onboard caseworkers and temporary staff to process Medicaid applications and renewals.
- States must make a good faith effort to contact a beneficiary using more than one modality or approach such as calls, text messages and emails prior to terminating enrollment whenever beneficiary mail is returned to the state agency in response to a redetermination of eligibility.
- If a case closes and the renewal packet is returned to HSD as undeliverable, HSD will attempt to contact the member within 30 days after the closure.
- New Mexico is following up on returned mail with text message reminders to renew.
- The first message requesting confirmation or update address goes out between the 1st and the 10th of the month prior to recertification.
- The second message reminding customers of recertification, goes out on the first of the month of recertification.
- The third message reminding customers that have not turned in a recertification by the 16th of the month of recertification.
- Turquoise colored envelopes will be utilized for all Medicaid, SNAP or Cash Assistance recertification/renewals.
- HSD will use a text message campaign for all households due to renew their Medicaid, SNAP or Cash Assistance reminding them they will be receiving their renewal in the mail and to submit their renewal.
- Cases that have not been renewed will begin closing May 1, 2023, except for cases with returned renewal packets. Those cases will be kept open until the Income Support Division can complete processing. For cases that close but have returned mail, further outreach will be conducted, and a renewal can be submitted. Renewals for everyone receiving Medicaid must be completed by the end of April 2024.

HSD anticipates a modest disenrollment of Native Americans at the end of the Public Health Emergency (PHE). Current information suggest between 6,000-7,000 Native American individuals are subject to disenrollment for financial reasons, across managed care and fee for service. The individuals that have been recognized as financially ineligible for full benefit Medicaid programs may qualify for subsidized healthcare coverage at *beWellnm*. HSD, *beWellnm* and the Office of Superintendent of Insurance (OSI) are working together closely to ensure a smooth transition of coverage for those who will no longer qualify for Medicaid. The Legislature authorized OSI to use funds from the Health Care Affordability Fund to provide premium relief to those transitioning from Medicaid who qualify for individual and family coverage on beWellnm.

The Health Care Affordability Fund will pay the first month's premium for enrollees who meet the following criteria:

• A state resident previously enrolled in Medicaid during the PHE and have been disenrolled because they no longer qualify.

- Individual must have household income under 400% of the Federal Poverty Level (FPL) to qualify.
- Individual must qualify for federal premium assistance. The premium relief will make it easier for individuals and families to transition to a new form of coverage.
- Once the individual qualifies for the assistance, the individual will have the first month's premium covered at no charge. In addition, individuals will have a 90-day grace period for payment in case payment cannot be made. All MCO's offer coverage on *beWellnm*, making insurance coverage transition easy.

Native American Technical Advisory Committee (NATAC)

The Native American Technical Advisory Committee (NATAC) which began in September 2012, is designed to give the Tribes, Pueblos, and Nations an opportunity to meet and discuss issues of mutual concern and interest on a quarterly basis. NATAC is comprised of appointees by Tribal leaders, Indian Health Service (IHS) and HSD representatives working on issues of common concern and policy making with the Medical Assistance Division (MAD), Behavioral Health Services Division (BHSD) and the Income Support Division (ISD). There are 12 tribes that have designated a representative for NATAC for FY23. HSD encourages the participation of all tribes at the NATAC meetings. If any tribe is interested, please contact any of the HSD Native American liaisons for information.

In FY23, NATAC members asked for more of an input into developing the agenda for each meeting. NATAC schedules a pre-meeting a couple of weeks prior to the NATAC meeting date to develop the agenda. We now have two new agenda items for each meeting – "Billable Services for Tribes" and "Community Health Representative (CHR) Billing". We continue to have Medicaid updates by the Medical Assistance Division Director, "Unwinding" updates on the Medicaid unwinding, and Kevin S updates. The following goals are established by the NATAC committee and continue to be a priority moving in FY23.

- **Goal 1:** Increase BH services for Native Americans including community-based services for adults and children.
- Goal 2: Increase Medicaid reimbursable provider types (e.g. case managers, community health representatives, care coordinators) and services for IHS and Tribal Clinics.
- Goal 3: Increase the number of long-term care options.
- Goal 4: Increase Native American enrollment in Medicaid.

HSD held four NATAC meetings in FY2023 on September 19, 2022, December 19, 2022, March 20, 2023 and June 26, 2023. The meeting minutes and agenda on the HSD website at Native American Technical Advisory Committee | New Mexico Human Services Department (state.nm.us)

Income Support Division (ISD)

<u>Income Support | New Mexico Human Services Department</u> (state.nm.us)

The mission of the Income Support Division (ISD) is to relieve, minimize or eliminate poverty and to make available certain services for eligible low-income individuals and families through

statewide programs of financial assistance, food assistance, employment assistance and training services.

The Human Services Department (HSD) also recognizes the importance of developing work readiness in the populations served through public assistance. To do this, HSD has developed programs geared towards the training and placement of individuals into career positions. To learn more about these programs, please visit the <u>Build Your Future</u> link at the Income Support Division website.

To better assist with new applications, recertifications, and be of service to the community, ISD has partnered and entered into agreements with the Pueblo of Zuni, Albuquerque Indian Health Service Unit, and Southwestern Indian Polytechnic Institute (SIPI) to have ISD out-stationed workers located at these sites to assist with applications for SNAP, General Assistance (GA), Temporary Assistance for Needy Families (TANF) and Medicaid. ISD is currently exploring other sites for out-stationed workers. If you are interested, please reach out to the tribal liaison for further questions.

Native American beneficiaries by program and residence July 1, 2022 to June 30, 2023

Tractive Timerican Denem	Medicaid	General	TANF	LIHEAP	SNAP
Tribal		Assistance			
Acoma	486		21	17	266
Alamo Navajo	1,696	1	3	4	1,191
Canoncito Navajo					
Checkerboard	4,184	5	37	35	3,379
Cochiti	97		2	3	53
Isleta	199	3	7	9	104
Jemez	359		11	2	211
Jicarilla Apache	342		10		226
Kewa	686		3	43	415
Laguna		2	14	1	348
Main Reservation	13,016	31	80	33	10,249
Mescalero	469	1	19	25	287
Nambe	40				26
Ohkay Owingeh	80		2	10	63
Other	126				78
Picuris	15		2	1	12
Pojoaque	11				10
Ramah Navajo	327			1	282
San Felipe	516		16	26	326
San Ildefonso	16		5		10
Sandia	10				5
Santa Ana	27		4	3	16
Santa Clara	96		1	2	31
Taos	123		4	4	79
Tesuque	14			2	6
Tohajiilee Navajo	139			2	141
Zia	96		5	1	44
Zuni	2,374	2	9	1	1,710
Total	26,191	45	255	225	19,568

Table 2: Native American ISD Program Participants for July 1, 2022 to June 30, 2023. LIHEAP counts are from October 1, 2022 to June 30, 2023. TANF counts only include cash assistance. Values are the number of unique recipients who have been approved for benefit issuance during the period. Retrieved from ASPEN July 6, 2023.

The Income Support Division Administers Federal Funds Under the Following Programs:

- The Supplemental Nutrition Assistance Program (SNAP) program provides monthly food security to approximately 490,551 New Mexicans, of which 147,628 are recipients with tribal affiliation. The Income Support Division (ISD) has improved the efficiency of processing new, renewal and emergency SNAP applications to meet the federal timeliness standard of 95 percent for all its 34 locations since Oct. 1, 2018. In FY 23, ISD's timeliness dropped below standards for two months due to the increased workflow due to the reinstatement of the recertification process. ISD quickly worked with the USDA Food and Nutrition Services to implement administrative flexibilities to ensure proper supports were implemented to maintain the timely issuance of SNAP benefits to eligible New Mexicans.
 - o The New Mexico Human Services Department added \$391 to families who received pandemic EBT cards to cover meals for public school students. More than 227,700 families got their P-EBT card reloaded with more money intended to cover food costs from the summer. In total, New Mexico sent \$89 million to families across the state.
 - As part of the American Rescue Plan funds, NM received over \$10 million in utility assistance for low income households on their heating and cooling costs. The money was sent directly to the utility companies for approved households.
 - The state legislature appropriated \$10 million in economic relief efforts during the 2022 legislative session for low income NM residents who experienced substantial economic and personal losses.
 - The Income Support Division (ISD) continues to work with our Federal SNAP partners to secure all available COVID waivers to extend Supplemental Nutrition Assistance Program (SNAP) renewals. To date, our federal partners extended all SNAP cases from 2020 through June 2023.

• SNAP Employment and Training Program (SNAP E&T)

The goal of the SNAP E&T program is to assist SNAP recipients to gain skills, receive training and experience that will increase their ability to obtain regular employment. By participating in the E&T program, individuals are offered support services to make completion of the E&T program a reality. The E&T program provides an assessment, development of an employment plan, training and support services to help participants prepare for, enter, and advance in the workplace. It is essential that the E&T program partners collaborate with other entities to expand services and offer support services statewide.

SNAP E&T is collaborating with HSD's ISD Tribal Liaison Shelly Begay and Medicaid Assistance Division (MAD) Liaison Theresa Belanger to provide services to tribal communities and rural areas. Over the last year, the E&T program staff and tribal liaisons met once a month to discuss and plan outreach in tribal communities.

The following are outreach and education events completed by the SNAP Employment and Training team. These events introduced the SNAP E&T programs and opportunities for collaboration with tribal communities:

- 1. Eight Northern Indian Pueblos Council, Inc, June 13, 2023
- 2. Pine Hill, June 23,2023
- 3. Native Americans Technical Advisory Committee, June 26, 2023
- 4. Taos Pueblo, June 27, 2023

• The Food Distribution Program on Indian Reservations (FDPIR)

The Food Distribution Program on Indian Reservations (FDPIR) provides USDA foods to income-eligible households living on/or near tribal lands. ISD has a partnership with the following tribal communities:

- o Eight Northern Indian Pueblos, Inc. Director, Perry Martinez
- o Five Sandoval Indian Pueblos Council, Inc. Director, Florence Calabaza.
- o The Pueblo of Zuni, Director Beatrice Panteah
- o The Pueblo of Acoma, Director Connie Martinez
- o Navajo Nation-Kirtland, Director Zonnie Owens
- o Navajo Nation-Crownpoint, Site Supervisor Timothy Murphey
- o Navajo Nation-Fort Defiance, Site Manager Gilbert Yazzie
- o Navajo-Nation-Teec Nos Pos, Site Supervisor Narbona Jim
- o Navajo Nation-Mexican Springs, Site Manager Beau Bitsie

Accomplishments for FDPIR include:

During FY23, ISD and FDPIR enhanced and streamlined the validation process for dual participants. ISD provided access to all FDPIR sites except for Navajo Nation. Navajo Nation's access is still being worked on.

• The Emergency Food Assistance Program (TEFAP)

TEFAP is a federal program that helps supplement the diets of low-income Americans by providing them with emergency food assistance at no cost.

The U.S. Department of Agriculture's Food and Nutrition Service (FNS) recently awarded \$924,895 to New Mexico Human Services Department (HSD). HSD will use funds to support the expansion of mobile distribution options, making critical freezing and cooling upgrades to keep foods fresh, and building new partnerships.

HSD will expand TEFAP Reach and Resiliency - Round one activities currently being carried out in partnership with four regional TEFAP partners (Roadrunner Food Bank, The Food Depot, The Community Pantry, and ECHO Inc.). This work focuses on establishing a sustainable mobile pantry or onsite pantry in specific remote, rural, and tribal communities that do not currently receive TEFAP foods. In round two, project efforts will be expanded to additional underserved areas.

Child Support Services Division (CSSD)

Child Support Overview | New Mexico Human Services | Department (state.nm.us)

CSSD administers the state and federal program to establish parentage, establish child and medical support orders, and enforce those orders. Its primary role is to maximize the collection of child support for all eligible New Mexico children. CSSD is required by federal and state law to provide free child support services to families receiving TANF and Medicaid. Families who are not receiving TANF or Medicaid may also apply to CSSD for services. In FY23, there were 59,148 families with child support cases in New Mexico, approximately 3,954 were Native American.

- CSSD Services for Tribes: CSSD provides child support services to Tribes, Nations and Pueblos across New Mexico by:
 - Establishing and enforcing child support orders through tribal courts based on the Tribe, Nation's or Pueblo's own laws and customs;
 - Registering tribal court orders in state district courts as appropriate (when a child lives off-reservation);
 - Registering state court orders in tribal courts when appropriate (when a child lives onreservation);
 - Submitting tribal court orders to other states for enforcement of child support court orders, requesting assistance from other states to establish paternity and support for tribal members;
 - o Providing services to custodial tribal members living on or off tribal lands –as long as the non-custodial parent lives off tribal lands.

• Tribal Collaboration

CSSD is in full support of Tribes, Nations and Pueblos interested in developing and operating their own Tribal Child Support IV-D Programs and provide technical assistance upon request. In 1993 CSSD entered into its first Joint Powers Agreement (JPA) with the Navajo Nation to operate the child support program, the first of its kind in the nation. This agreement is renewed annually and provides aid to the Navajo Nation IV-D program through services such as the use of the Child Support Enforcement System (CSES), the State Disbursement Unit (SDU), Information Technology, the Consolidated Customer Service Center (CCSC), and training.

There are two Tribal IV-D programs in New Mexico; the Mescalero Apache Tribe, and the Zuni Tribe. The State CSSD works with the Zuni and Mescalero tribes on cases, but no agreement is in place such as the one with the Navajo Nation.

In addition to the work with the Tribal IV-D programs, CSSD has Memorandum of Understanding (MOU) agreements with several Pueblos through program called the Native American Initiative (NAI). The NAI program provides a dedicated attorney that is licensed to practice in Zia, Acoma, Isleta, Laguna, and Santa Ana Pueblos. The agreement with Santa Ana Pueblo is the most recent, which was negotiated during SFY23, and finalized in December 2022. The CSSD attorney appears before the tribal court judges from these Pueblos regularly.

Tribal judges, court staff, and parties often call upon the CSSD attorney when questions arise regarding child support cases involving Tribal members and/or basic child support matters. CSSD also dedicates a Child Support Legal Assistance to 239 active cases for Zia, Acoma, Isleta, and Laguna Pueblos.

CSSD Native American Caseload by Tribe-State Fiscal Year 2023					
Acoma			Total Collections		
				SFY 2023	
Month	Cases	%Cases w/orders	Children		
Jun-23	70	88.6%	100	\$166,678.79	
Isleta Total Collections SFY 2023					
Month	Cases	%Cases w/orders	Children		
Jun-23	64	93.8%	107	\$138,420.93	
		Laguna		Total Collections	
				SFY 2023	
Month	Cases	%Cases w/orders	Children		
Jun-23	102	92.2%	158	\$240,979.58	
Zia				Total Collections	
SFY 2023				SFY 2023	
Month	Cases	%Cases w/orders	Children		
Jun-23	1	100%	1	\$1,160.85	
	CROWNPOINT Navajo Nation IV-D Total Collections				
				SFY 2023	
Month	Cases	%Cases w/orders	Children		
Jun-23	2306	42.6%	3771	\$963,214.96	
SHIPROCK Navajo Nation IV-D Total Collections					
		v		Total Collections	
		<u> </u>		SFY 2023	
Month	Cases	%Cases w/orders	Children		
Month Jun-23		%Cases w/orders 84.5%	Children 1,150		

SANTA ANA			Total Collections SFY 2023	
Month	Cases	%Cases w/orders	Children	
Jun-23	2	0%	2	\$0

Table 3: CSED Native American Caseload as of 2023

Behavioral Health Services Division (BHSD)

https://www.hsd.state.nm.us/about the department/behavioral health services division/

The Behavioral Health Services Division (BHSD) manages the adult behavioral health service system for the Human Services Department. The role of BHSD, as the Mental Health and Substance Abuse State authority for New Mexico is to address need, services, planning, monitoring and continuous quality across the state. In FY 23, BHSD employs a total of 54 staff positions with 13 current vacancies. BHSD focuses on strategies for mental health promotion, substance abuse prevention, and treatment for individuals in New Mexico.

BHSD works in partnership with the Medical Assistance Division (MAD) to oversee contracts with the Medicaid Managed Care Organizations (MCO) to ensure the provision of Medicaid behavioral health benefits. BHSD is actively engaged in projects that include collaboration with the Children, Youth, and Families Department (CYFD), the Department of Health (DOH), the Indian Affairs Department (IAD), the Department of Corrections (DOC), the Department of Veteran Services (DVS), and the Behavioral Health Planning Council (BHPC) inclusive of the local collaboratives, as well as providers and consumers within the state.

The Human Services Department (HSD) is a voting member of the New Mexico Behavioral Health Collaborative (BHC), thus BHSD collaborates with the BHC to establish policy and implement strategies to manage the behavioral health system in New Mexico. The BHC allows several state agencies and multiple resources across state government involved in behavioral health treatment, prevention, and recovery to work on improving mental/behavioral health services in New Mexico.

BHSD Services provided to Tribal Communities for State Fiscal Year 2023

988 and the Continuum of Care

The 988 Crisis Now system is designed to build a comprehensive response for mental health, substance use, and suicidal crises. Crisis Now integrates our state's two current 24/7 crisis call hubs with community mobile crisis outreach units and crisis receiving facilities, to connect all New Mexicans from the point of crisis to the appropriate level of care. BHSD, as the lead agency in this effort, created workgroups, including a Tribal workgroup consisting of tribal stakeholders across New Mexico to engage with 988 staff to obtain input, suggestions, and direction of a tribal prospective to implement 988 in New Mexico.

The BHSD partnered with ProtoCall to build and strengthen the New Mexico Crisis and Access Line (NMCAL). NMCAL is a robust call center that receives all calls made to 988 by New Mexicans. NMCAL went live on July 16, 2022. The BHSD, along with federal partners continue to monitor call volumes, type of calls received, and other metrics that help NMCAL and BHSD to continuously improve the system.

988 Tribal Specific Initiatives

• A tribal work group was created in FY22 to address the concerns surrounding 988 for Native Americans and tribal communities; the tribal workgroup continued to meet on an ongoing basis throughout FY'23. The tribal workgroup is led by the BHSD Native American liaison.

The tribal workgroup meets on a quarterly basis through a web-based platform. The purpose for creating the tribal workgroup is to strategize, collaborate and receive feedback from tribal communities on tribal efforts regarding 988. The tribal workgroup takes active steps to invite and engage representatives from multiple tribal behavioral health programs; tribal law enforcement, Albuquerque Area Southwest Tribal Epidemiology Center, Honoring Native Life, Bureau of Indian Affairs and additional tribal programs and organizations.

- On August 31, 2022, BHSD released a Request for Application (RFA) to tribal communities to fund a Native American call center. The amount of funding authorized for this RFA was \$200,000. The BHSD Native American liaison conducted a technical assistance call to help tribal programs understand the purpose of the RFA, funding eligibility and timeframes. The BHSD Native American liaison also introduced the RFA at a variety of tribal workgroup and stakeholder meetings, the Native American Technical Advisory Committee (NATAC) meeting, and the Native American subcommittee meetings. In each of these presentations, the liaison reviewed the RFA and answered questions presented by the audience.
- On November 7, 2022, BHSD hosted a tribal symposium to bring tribal communities together to engage and participate in a discussion about their own tribal community readiness and crisis response needs. The BHSD received recommendations from tribal communities present at the symposium on how to continue supporting Pueblos, Tribes and Nations in their efforts to implement 988. Throughout FY23, the Native American Liaison met with tribal communities to discuss opportunities for program resources to assist with capacity building, funding (federal and state) and technical assistance regarding 988.
- BHSD partners with Poston & Associates to provide Native American specific 988 marketing, education and outreach throughout the State of New Mexico. Poston & Associates is a Native American owned organization with staff representing tribal communities. Poston & Associates promotes 988 in tribal communities and at events heavily attended by Native Americans to increase awareness about 988. Events include health & wellness resource fairs hosted by tribal communities, the New Mexico State Boys and Girls High School Basketball Tournament, NM State Legislature, youth sponsored activities, the Gallup Inter-Tribal Ceremonial, the Santa Fe Indian Art Market, the Navajo Nation Fair, New Mexico State Fair, and many more.
- BHSD partnered and contracted with SBS Evaluation & Program Development Specialist, LLC (SBS) to conduct 988 and Crisis Response training in tribal communities. SBS has more than 20 years in working with state, federal and tribal communities. SBS provides two types of training, a 1-hour introductory training and a 4-hour training. The 1-hour training reviews components of the 988 Crisis Now Model; the 4-hour training is more intensive and discusses with tribal communities their capacity to implement a crisis response system.
- In addition to training conducted by SBS, BHSD staff also completed presentations on 988 and the Continuum of Care to tribal staff and tribal communities.

Current 988 Data

Native Americans experience deteriorating mental health during the pandemic and faced disproportionate barriers to accessing mental health care. The lower rates of mental illness and substance abuse disorder may be attributed to underdiagnosis of mental illness among Native Americans, a lack of culturally sensitive screening tools that detect mental illness or Native Americans are more likely to be labeled as disruptive or criminal compared other non-Indian populations or other structural barriers could have contributed to lower rates.

Between the months of July 2022 and May 2023, the graph below illustrates the different ethnic groups calling the 988 system of care. The top three ethnic groups include White, Hispanic and Native American.

988 CONNECTIONS: 7/16 - 5/31 Calls | Chats | Texts



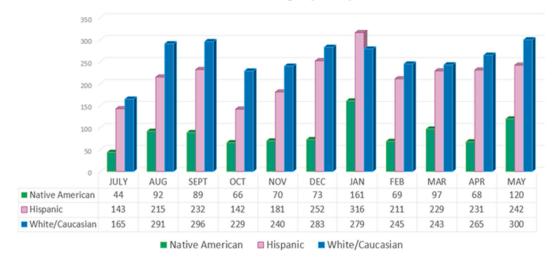
Total connections: 21,702

Total contacts with suicide involved: 8,065



988 CONNECTIONS: 7/16 - 5/31 **Ethnicity**

988 Connections Among Top 3 Reported Ethnicities in NM



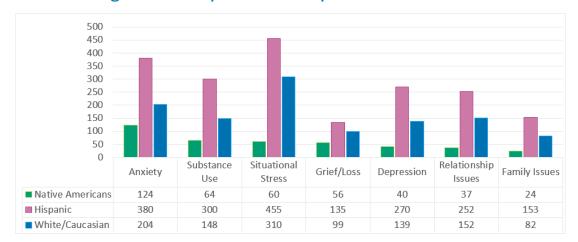
Source: (https://www.kff.org/racial-equity-and-health-policy/issue-brief/five-key-findings-on-mental-health-and-substance-use-disorders-byrace-ethnicity

In 2020 and 2021, (during the Covid-19 pandemic) the suicide mortality rate increased by 4% with the highest increases among American Indian/Alaskan Native people and Black people. (https://www.tfah.org/report-details/pain-in-the-nation-2023/). The suicide rate in men is highest among non-Hispanic American Indian/Alaskan Native men, followed non-Hispanic white men. Research also suggests that while women attempt suicide more often, men choose more lethal means of suicide. (https://www.verywellmind.com/men-and-suicide-2328492). The graph below compares the rates of suicide between men and women.

Between the months of July 2022 and May 2023, the top presenting problem disclosed by people calling 988 was suicide. Other top presenting problems are illustrated in the graph below.

PRESENTING PROBLEMS: 7/16 - 5/31Presenting Problems by Ethnicities reported in NM





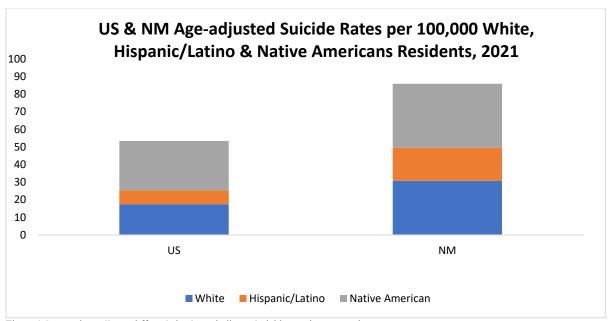


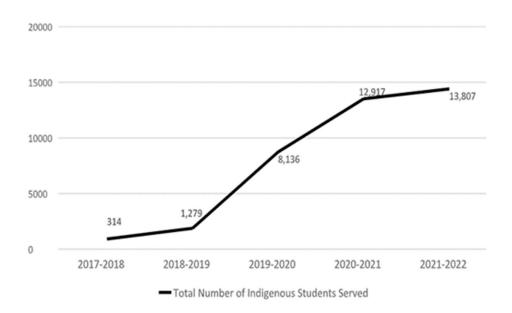
Figure 1 Source: https://www.kff.org/other/state-indicator/suicide-rate-by-race-and-ethnicity/?dataView=1¤tTimeframe=0&selectedDistributions=overall--white--black--hispanic--asian--american-indian-or-alaska-native&selectedRows=%7B%22states%22:%7B%22new-mex. NM Data for Asian and Black residents not available.

BHSD Programs Providing Services to Native Americans

The Office of Substance Abuse Prevention (OSAP) collaborates with tribal communities to address prevention initiatives for underage drinking, adult drinking and driving, prescription drug use, illicit drug use, PAX good behavior games, opioid overdose prevention and naloxone distribution and Tribal Law Enforcement Assisted Diversion (LEAD) program.

- OSAP funds 13 programs in 11 counties across the state; 3 programs are in two (2) tribal communities and one (1) school for Native American students. OSAP provides supportive funding to the Kewa Family Wellness Center (KWFC), Mescalero Prevention Program, and the Native American Community Academy (NACA). Each entity conducts an annual needs assessment to identify prevention priorities. Based on the outcome of the assessment, funded entities select from an OSAP approved evidence-based strategy list of activities to implement for a year. Throughout the year, OSAP works collaboratively with the funded programs and provides support and technical assistance as needed.
- OSAP PAX Good Behavior Game (GBG) is an evidence-based universal preventive intervention applied by teachers in the classroom. It consists of a set of research-based strategies with origins in behavioral science, neuroscience, and culturally responsive teaching that improve children's self-regulation. Teachers implement the program strategies as part of their daily routines. PAX GBG helps to build children's self-regulation resulting in improved focus and attention, improved test scores, reduced alcohol, reduced psychiatric disorders, and reduced suicide. PAX Good Behavior Game is sponsored by OSAP and is implemented in 28 tribal schools in New Mexico with high enrollment rates of Native American students. The PAX GBG outcomes found that the program is beneficial for students and parents in addressing historical trauma related to colonization and genocidal federal policies. It is found to reduce disruptive behaviors, hyperactivity, and emotional symptoms.

The graph below illustrates an increase of Indigenous/Native American students receiving the PAX Good Behavior Game services by schoolyear



- OSAP addresses the opioid crisis in tribal communities by providing opioid overdose prevention education, training and Narcan kit distribution. Opioid overdose prevention and harm reduction services are provided to all 23 New Mexico Pueblos, Tribes and Nations. The following 13 pueblos have participated in the Opioid Overdose Recognition and Response Trainings: Picuris, Taos, Ohkay Owingeh, Santa Clara, Pojoaque, Tesuque, San Ildefonso, Cochiti, Santo Domingo, San Felipe, Santa Ana, Acoma, and Zuni Pueblo. OSAP led a Native American media campaign titled "A Dose of Reality" about opioids featuring tribal centric materials like posters, radio ads, and videos on social media.
- OSAP continues to support Picuris Pueblo in the planning and development of the first New Mexico tribal specific Law Enforcement Assisted Diversion (LEAD) program. The LEAD is a pre-arrest diversion program, rooted in harm reduction, in which police officers divert individuals to intensive case management services in lieu of arrest for low-level nonviolent crimes driven by a substance use disorder and unmet behavioral health needs. In a LEAD program, prosecutors, public defenders, police officers, behavioral health and social service providers work together to create diversion criterion to addresses the needs of their community members, improve public safety, decrease drug overdose, and support a coordinated collaborative response to behavioral health disorders among the criminal justice, social service and public health systems in tribal and non-tribal jurisdictions in NM.

BHSD Housing Program

• The Linkages program- the Linkages program dedicates 10% of its rental assistance housing vouchers for Native American clients. In FY23, the Linkages program received \$4.3 million in funding to support housing services in New Mexico. This is a \$500K increase from FY'22.

• The Set Aside Housing Program includes special needs units *set aside* for eligible individuals whereby BHSD contracts with a local lead agency to screen for eligibility criteria. BHSD contracts with Zuni and Acoma Pueblo Housing Authorities for local lead agency services.

The Native American Services Program

The program offers state general funding for providers to develop and implement programs to help improve the quality of and access to behavioral health services to the Native American population. This grant has increased from \$277k in FY22 to \$600K in FY23. The grant encourages agencies to provide culturally appropriate healing and diverse services to Native American consumers and the public at large.

The Veteran Services Program

The program budgets \$760k in state general funds to support services rendered to veterans. Each provider is required to provide services to Native American populations throughout the state. Services include emergency housing, case management, job training and placement, and retreats focused on treating the mental and behavioral health of veterans. In FY23, BHSD funded 7 veteran services programs throughout the state to provide direct service provisions to veterans requesting assistance.

Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual +(LGBTQIA+)

The program is available to individuals' providing education and a safe space for LGBTQIA+. Available to individuals is the Trevor hotline dedicated to youth for support and resources. This program is available in Gallup and Farmington.

Comprehensive Community Support Services (CCSS)

CCSS provides services for adults and children with Serious Mental Illness (SMI) or Severe Emotional Disturbance (SED) diagnoses, moderate to severe substance use disorder (SUD), co-occurring disorders, or an eligible recipient with a diagnosis that does not meet the criteria for SMI, but for whom time-limited CCSS would support their recovery and resiliency process. CCSS identifies and addresses the barriers that impede independent functioning in the community. CCSS is designed to be provided mainly in the community to support resiliency and recovery by skill building, coaching, and coordinating. CCSS is an in-person service and provided in the community.

 CCSS is provided statewide in 25 counties where there are high populations of Native Americans: Socorro, Valencia, Catron, Sierra, Bernalillo, Sandoval, San Miguel, Mora, Torrance, Taos, Santa Fe, San Juan, Lincoln, Luna, Otero, Eddy, McKinley, Cibola, Rio Arriba, Union, Colfax, Guadalupe, Dona Ana, Grant and Hidalgo. Currently there are approximately 58 provider agencies statewide.

State Opioid Treatment Authorities (SOTA)

- Opioid Treatment Providers (OTP) and Medication Assisted Treatment (MAT). There are currently 13 OTP clinics in Albuquerque metro area that serve urban Native Americans who wish to engage in methadone maintenance treatment and counseling program.
- Community Reinforcement Approach and Family Training (CRAFT) is a newly added service to the BHSD. It is designed to teach people how to use effective counseling

techniques in their own homes to promote positive changes. The CRAFT project funds four pilot projects, one in each quadrant of the state, with one reserved to serve a Native American community. Each pilot project does have ties to the Native American population in NM and have been provided completed instructor trainings. The pilot is in the following communities: Gallup, NM – Four Corners Detox Recovery Center; Santa Ana Pueblo – Santa Ana Tribal Court system; Santa Fe, NM - Tewa Roots Society; and San Ildefonso Pueblo – Behavioral Health system.

The Office of Peer Support and Engagement (OPRE)

OPRE provides formalized peer support and practical assistance to people who have or are receiving services to help regain control over their lives in their own unique recovery process. OPRE is committed to working with tribal communities to readily process applications for Peer Support Worker Certification. In FY23, OPRE trained to certify 43 Native American individuals to become Certified Peer Support Workers (CPSWs).

• OPRE provides outreach and education in tribal communities to bolster Native American participation and interest to become a CPSW. In April 2023, BHSD/OPRE attended the Native American Training Institute (NATI) Summit to provide a presentation about the program. Attendance to this training allowed OPRE to increase and enhance its relationships with existing and new tribal partners across New Mexico. Also, in the month of April 2023, OPRE held its 5th Annual Peer Summit in Gallup, New Mexico. In attendance to the summit were tribal leaders and dignitaries such as the Navajo Nation Vice President, Zuni Pueblo councilmembers and other local tribal leaders. Tribal leaders were provided an opportunity to open the summit with an invocation and commentary of the history and uniqueness of tribes and their relationship to New Mexico.

Adult Accredited Residential Treatment Centers (AARTC)

AARTC are facilities funded by the BHSD to provide diagnostic and therapeutic services in inpatient and outpatient facilities. AARTC's can be found in McKinley and San Juan County where there are high populations of Native Americans. AARTC is a service provided to members over the age of 18 identified to have a substance use disorder. AARTC facilities must be accredited by an established recognized accreditation organization such as the Joint Commission (JC), the Commission on Accreditation of Rehabilitation Facilities (CARF), or the Council on Accreditation (COA). Services provided by an AARTC are reimbursable by Medicaid. There are three AARTC's providing services specifically to Native Americans: Four Corners Recovery Center, Hoy Recovery and Cenikor. Four Corners Recovery Center expanded their services to support the Gallup area where they provide treatment services including detox, residential, telehealth, sober living and outpatient. Hoy Recovery services in Velarde provides detox and residential services with a 20% clientele of Native Americans, male and female combined. Cenikor is located in Farmington and has a 39.2% Native American client population comprised of Navajo, Ute, Jicarilla Apache and some Pueblo tribal members.

Reach, Intervene, Support, & Engage (RISE)

Rise is an investment to develop behavioral health treatment services for those experiencing incarceration and transition services before or upon returning to the community. RISE began as a pilot program in response to a legislative mandate. In FY21 BHSD received \$1.5M in additional funding, for a total appropriation of \$4 million to maintain operations and expand the project to

other counties. As of FY23, there are nine counties participating. Of these nine programs, Lincoln and Socorro counties engage cultural activities specific to neighboring tribal communities. The other seven provide indirect cultural support through referrals, outreach and/or education.

Agency Efforts to Implement the State-Tribal Consultation, Collaboration and Communication Policy

In 2009 Senate Bill 196 was signed into law, enacting the State-Tribal Collaboration Act, also known as STCA. It is a statutory commitment by New Mexico State government to work with Tribes, Nations and Pueblos on a government-to-government basis on issues of mutual concern. HSD developed its own State-Tribal Consultation, Collaboration and Communication Policy that aligns with Indian Affairs Department and Senate Bill 196. Through this policy, HSD seeks to improve partnerships and communication with New Mexico tribes.

HSD is mandated under STCA to notify the Tribes of policy changes that could have an impact on their communities, as well as Native American beneficiaries in New Mexico, whether these changes are under Medicaid, SNAP, TANF, LIHEAP or Behavioral Health Services. In FY23 the Human Services Department held several tribal listening sessions on Medicaid, SNAP, 988 implementations, and the 1115 Waiver renewal. ISD and MAD sent out written tribal notifications to tribal leaders and announced the listening sessions and welcomed any opportunities to host a formal tribal consultation.

The Indian Affairs Department (IAD) provides ongoing training on the New Mexico State Tribal Collaboration Act and the State-Tribal Consultation, Collaboration, and Communication Policy to department Native American liaisons. The Native American liaisons in turn provide training to their departments. In the past year the State Personnel Office (SPO) launched a new training tool called "Building Cultural Equity with Native Nations". This training continues to be a training in high demand and offered throughout the year. Additionally, HSD implemented a new hire orientation to all new employees. The Office of the Secretary Native American liaison provides a presentation to new staff to bring cultural awareness and the importance of protocol and etiquette when working with the 23 Tribes, Nations and Pueblos of New Mexico. Included in the training is a discussion on the tribal landscape of the original peoples of NM and the importance of cultural sensitivity and engagement with tribes.

To view a list of tribal notifications that have been sent out in FY23, click on the following link: https://www.hsd.state.nm.us/providers/written-tribal-consultations/

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STCA Report Closing Statement and Signature

The Human Services Department hereby respectfully submits its State-Tribal Collaboration (STCA) Report for Fiscal Year 2023 to the Department of Indian Affairs:

DocuSigned by:	
kari armijo	7/28/2023
Kari Armijo, Interim Cabinet Secretary	Date
New Mexico Human Services Department	