

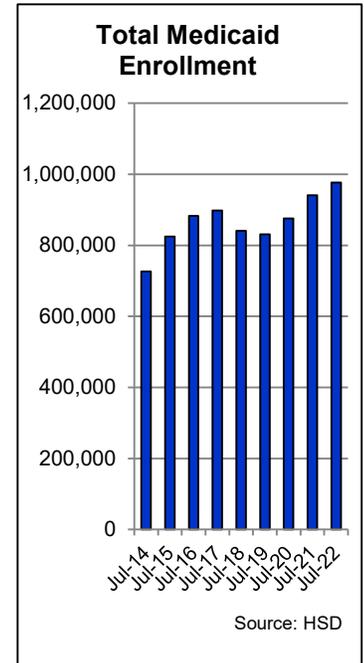
ACTION PLAN

Submitted by agency?	Yes
Timeline assigned?	No
Responsibility assigned?	No

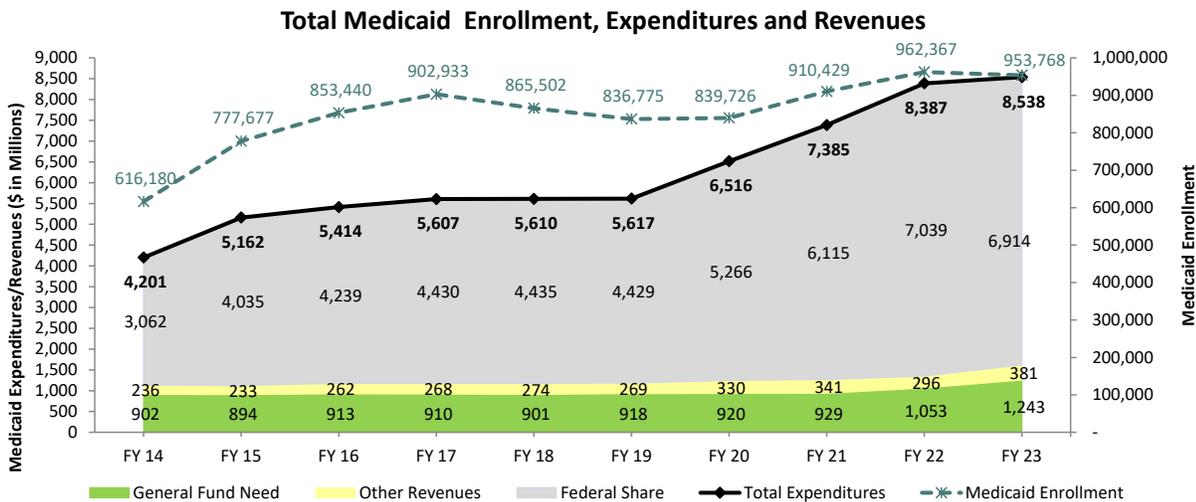
The Human Services Department’s Medicaid Program enrolls almost 50 percent of New Mexicans, making it the largest per capita Medicaid Program in the country. The Medicaid Program also represents approximately 14 percent of the state’s general fund spending. Quarterly data for Medicaid is not consistently reported because of a lag in data from the reporting period, making it difficult to monitor performance outcomes. For the fourth quarter, several of the Medicaid Program’s performance measures are pending data because the program receives reporting on June 30 for annual Healthcare Effectiveness Data and Information Set (HEDIS) data. Where data is available, Medicaid’s performance appears to be lagging behind the targets, concerning for a program of this size and import. HSD reports performance is improving on certain Medicaid performance measures when compared with the same time period last year.

Medicaid managed care organizations (MCOs) receive per member per month (PMPM) payments for most Medicaid enrollees regardless if they access services. Notably, utilization rates appear well below the projected levels on which the PMPM rates were built, resulting in the Medical Assistance Division capturing financial recoupments from the MCOs. Network adequacy must be ensured to enable Medicaid clients to have access to services funded through the MCOs.

Labor force participation is needed at all levels in the state. However, the Income Support Division’s (ISD) Temporary Assistance for Needy Families (TANF) Program reported 0.8 percent out of a targeted 37 percent of TANF recipients were ineligible for cash assistance due to work-related income. The Workforce Solutions Department is tasked with assisting TANF participants with workforce and educational opportunities. ISD and the Child Support Enforcement Division’s performance both lagged behind targeted levels for FY22.



Pandemic-Related Enrollment and Funds. The public health emergency (PHE), federal policy, and workforce participation greatly impact the Medicaid program’s enrollment, utilization, costs, and outcomes. In 2020, the Families

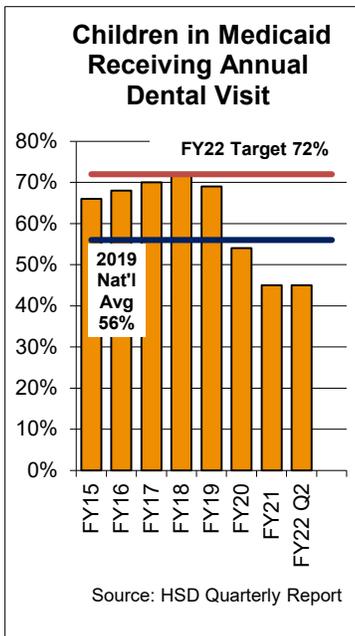


The Office of Superintendent of Insurance (OSI) implemented network adequacy compliance reporting requirements for commercial health insurance beginning January 1, 2022. OSI also implemented more rigorous standards for existing network adequacy compliance reporting.

Medicaid MCOs should be required to comply with OSI regulations for network adequacy

The Medicaid caseload in June 2022 was 968,763 individuals, a 4.2 percent increase over a year ago. The count of Medicaid recipients increased by 1,765, or 0.2 percent, over May 2022.

In June 2022, 385,538 children were on Medicaid, an increase of 4,851 children, or 1.3 percent, over June 2021. However, the number of children on Medicaid decreased by 549 members, down 0.1 percent, from May 2022 to June 2022.



First Coronavirus Response Act included a 6.2 percent increase in the federal Medicaid matching rate. States receiving the increase are required to continue Medicaid eligibility for any individuals enrolled during the public health emergency which extends through December 2022, unless the individual voluntarily terminates eligibility or is no longer a resident of the state. During the PHE between March 2020 and March 2022, Medicaid enrolled over 160 thousand new members, for a total approaching 970 thousand.

Medical Assistance Division

The Medicaid Program received a red rating for the fourth quarter based on reported performance not meeting targeted levels on multiple measures, including infant and maternal health. The program did not report fourth quarter data for HEDIS performance measures highlighted in the report card and is expected to report annual HEDIS performance measure data in the first quarter of FY23. The Medical Assistance Division (MAD) reports it is working with MCOs to ensure every qualified New Mexican receives timely and accurate benefits.

For the third quarter, a reported 7.6 percent out of a targeted 88 percent of children received one or more well-child primary care visits. HSD reports this rate is based on HEDIS technical specifications which applies a member’s continuous enrollment specification for the measurement year and does not align with the state fiscal year quarterly reporting. No data was reported for this HEDIS performance measure for the fourth quarter, but with almost 8,000 children added to Medicaid during the federally declared public health emergency, it is critical to have quarterly performance data that monitors the health outcomes for children on Medicaid.

The performance measure, “infants in Medicaid managed care who had six or more well-child visits with a primary care physician during their first 15 months” is a measure HSD uses to track performance and issue penalties for noncompliance. However, fourth quarter data was not provided for this measure. HSD added the well-child measure as a Medicaid MCO tracking measure in FY22 and requested MCOs provide detailed action plans with their quarterly performance measures. MCO strategies to improve well-child visits include increasing outreach calls; instituting value-based contracts with providers; creating a reward program for well-child visit compliance; offering assistance with scheduling appointments and transportation; and implementing a member texting campaign.

Home Visiting. Participation in the Centennial Home Visiting Program (CHV) remains low despite federal and Medicaid funding for the program. CHV was established in 2020, provides in-home services to young children, children with special health care needs, and to the parents and primary caregivers of those children. The CHV’s goals are to improve maternal and child health, promote child development and school readiness, encourage positive parenting, and connect families to support in their communities. MAD requires the prenatal and postpartum performance measures and each MCO is expected to meet the target of 64.8 percent.

Budget: \$6,351,758.6 FTE: 215.5

	FY20 Actual	FY21 Actual	FY22 Target	FY22 Actual	Rating
Infants in Medicaid managed care who had six or more well-child visits with a primary care physician during their first 15 months*	52%	51%	N/A	No Report	R
Children and youth in Medicaid managed care who had one or more well-child visits with a primary care physician during the measurement year*	33%	39.5%	88%	No Report	R
Children ages 2 to 21 enrolled in Medicaid managed care who had at least one dental visit during the measurement year	54%	56%	72%	No Report	R
Hospital readmissions for children ages 2 to 17 within 30 days of discharge	4.9%	6.7%	<5%	6.8%	R
Hospital readmissions for adults 18 and over within 30 days of discharge	9.3%	8.9%	<8%	8.9%	R
Emergency room use categorized as non-emergent per one thousand Medicaid member months	61%	50%	50%	53%	R
Newborns with Medicaid whose mothers received a prenatal care visit in the first trimester or within 42 days of enrollment in the managed care organization*	72%	70%	83%	No Report	R
Medicaid managed care members ages 18 through 75 with diabetes, types 1 and 2, whose HbA1c was >9 percent during the measurement year*	54%	53%	86%	No Report	R
Program Rating	Y	Y			R

The Supplemental Nutrition Assistance Program (SNAP) caseload in June 2022 was 240,950, an 11.3 percent decrease from a year ago, and a decrease of 6,156 cases, or 2.5 percent, below May.

The Temporary Assistance for Needy Families (TANF) caseload was 10,735 in June 2022, a decrease of 11 percent from a year ago, and a decrease of 205 cases, or 1.9 percent, below May.

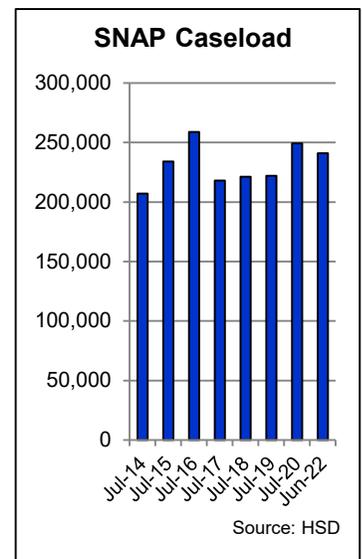
*Measures are Healthcare Effectiveness Data and Information Set (HEDIS) measures, which represent a tool used by more than 90 percent of America's health plans to measure performance on important dimensions of care and service. The most recent unaudited data available includes the last quarters of FY21 and the first quarters of FY22. The data for HEDIS measures is preliminary and will be finalized in June 2022.

Income Support Division

The Income Support Division's (ISD) Temporary Assistance for Needy Families (TANF) and Supplemental Nutrition Assistance Program (SNAP) caseloads rose over the previous year but began declining at the end of FY22. The performance measure, "TANF recipient's ineligible for cash assistance due to work-related income," reflects adults whose new employment income exceeded TANF guidelines. Despite unemployment substantially declining in New Mexico, less than 1 percent of TANF recipients were ineligible for cash assistance due to work-related income.

The Workforce Solutions Department (WSD) is partnering with ISD to establish employment placements for TANF Career Link Program and Wage Subsidy Program participants. WSD started a campaign called "Ready NM" with access to training, education and employment resources that can assist TANF participants.

HSD reports WSD implemented an internal case management process to utilize its employment services staff and workforce connection online system (WCOS) to directly connect TANF participants to available employment and training opportunities throughout the state. TANF participants identified as job ready are referred to employment services staff who assist in WCOS registration, resume writing, interview preparation and applying for jobs via WCOS. TANF



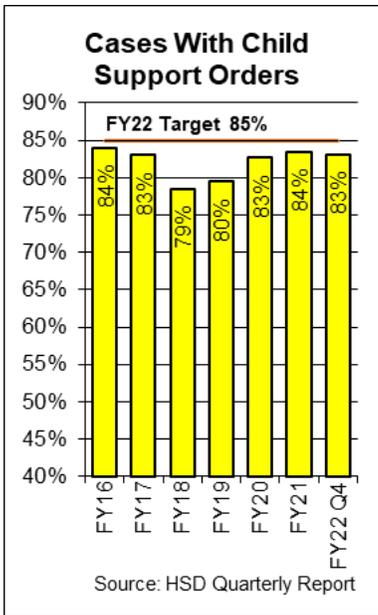
participants who are working with WSD also have direct access to programs offered by other partners such as the Division of Vocational Rehabilitation, Higher Education Department, and other local community partners enhancing opportunities for employment and education for TANF participants.

Budget: \$1,080,047.7 **FTE:** 1,133

		FY21 Actual	FY22 Target	FY22 Actual	Rating
Regular Supplemental Nutrition Assistance Program cases meeting the federally required measure of timeliness of 30 days	98.8%	98.6%	96%	89%	R
Expedited Supplemental Nutrition Assistance Program cases meeting federally required measure of timeliness of seven days	98.8%	98.5%	98%	75.5%	R
Temporary Assistance for Needy Families recipients ineligible for cash assistance due to work-related income	14.1%	7.6%	37%	0.8%	R
Two-parent recipients of Temporary Assistance for Needy Families meeting federally required work requirements	28.2%	3.5%	52%	2.9%	R
All families receiving Temporary Assistance for Needy Families meeting federally required work requirements	24.3%	4.2%	37%	2.8%	R
Program Rating		Y	R	R	R

Child Support Enforcement Division

The Child Support Enforcement Division (CSED) is engaged in modernizing the program to set accurate child support obligations based on the noncustodial parent’s ability to pay; increasing consistent, on-time payments to families; moving nonpaying cases to paying status; improving child support collections; and incorporating technological advances and evidence-based standards that support good customer service and cost-effective management practices. These modernization efforts were tested in pilot offices and have since been implemented statewide beginning in February 2022. CSED expected performance to improve with these efforts; however, performance for all FY22 CSED performance metrics fell somewhat short of targeted levels.



CSED reported child support collections totaled \$130.3 million and did not meet the FY22 target of \$145 million for the year. The decrease in collections began in September 2021 when many non-custodial parents lost unemployment benefits, which were being collected as part of wage withholding payments. The shortfall continued despite an increase in payments due to federal and state tax interceptions in the third quarter. During the 2021 Legislature, statutory changes were made to assist CSED with setting orders based on new guidelines and reviewing cases for possible modifications for right-sized court orders that the non-custodial parents can pay on a more consistent basis. Implementation of those changes began in July 2021 and early data is showing promise for FY23 performance.

Total dollars collected per dollars expended is a federal fiscal year performance measure and no data was yet reported at the close of FY22. CSED expected to see a drop in this measure due to several IT expenditures for modernization projects,

the largest of which is the Child Support Enforcement System mainframe platform project, which was implemented in February 2022.

Budget: \$32,794.2 FTE: 370

	FY20 Actual	FY21 Actual	FY22 Target	FY22 Actual	Rating
Noncustodial parents paying support per total cases with support orders	51.7%	55.7%	58%	52.4%	R
Total child support enforcement collections, in millions	\$156.1	\$147.4	\$145	\$130.3	R
Child support owed that is collected	58.7%	60.9%	60%	57.6%	R
Cases with support orders	83.2%	83.5%	85%	83.1%	R
Total dollars collected per dollars expended	\$3.44	\$2.90	\$4.00	No Report	R
Average child support collected per child	NEW	NEW	N/A	\$127.92	Y
Program Rating	R	Y			R

Note: Children with paternity acknowledged or adjudicated are reported in the federal fiscal year.