Legislative Finance Committee Hearing

October 23, 2018

Lynn Gallagher, Cabinet Secretary
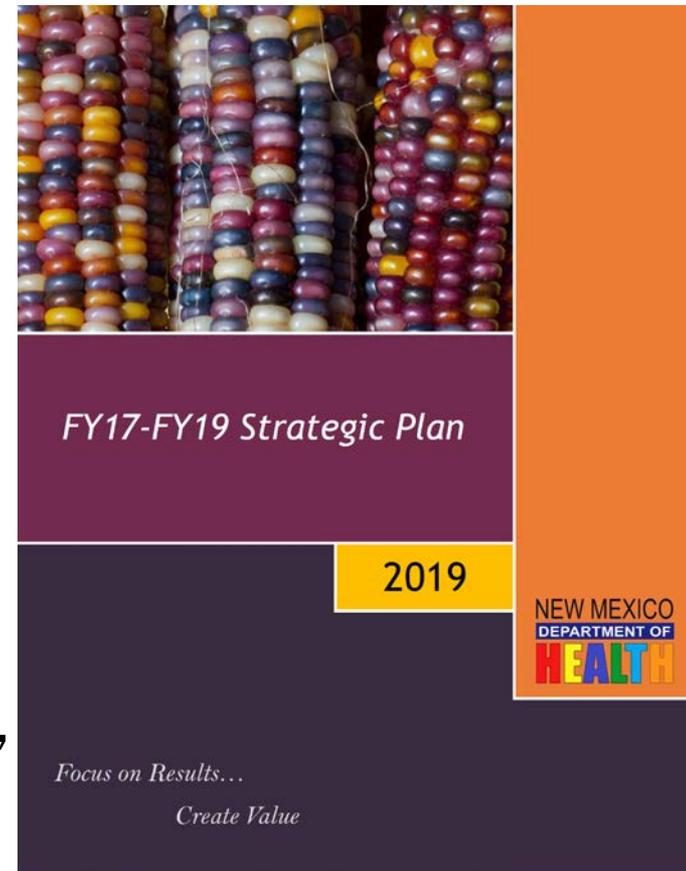
NEW MEXICO DEPARTMENT OF HEALTH

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Los Lunas Community Program
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Internal Audit

Budget/Grants

Financial Accounting/General Accounting

Scientific Laboratory
Lixia Liu

Health Facility Licensing and Certification
Joseph Foxhood

Public Health
Lynn Carroll

Epidemiology & Response
Michael Landen

Office of Policy and Accountability
Vacant

Office of Border Health

Office of Health Equity

Tribal Liaison

Policy, Performance and Accreditation

Lynn Gallagher, Cabinet Secretary
August 2017

PHAB

ACCREDITED HEALTH DEPARTMENT
PUBLIC HEALTH ACCREDITATION BOARD
*Advancing public health performance*

Department of Health FY17-FY19 Strategic Plan

- Updated annually

- Identifies agency priorities and guiding principles

- Emphasis on improving outcomes in 4 key areas:
  - Births to teens
  - Diabetes
  - Obesity
  - Substance misuse (alcohol, tobacco, illicit and prescription drugs)

FY17-FY19 Strategic Plan

2019

NEW MEXICO
DEPARTMENT OF
HEALTH

Focus on Results…

Create Value

NMDOH Strategic Planning Roadmap
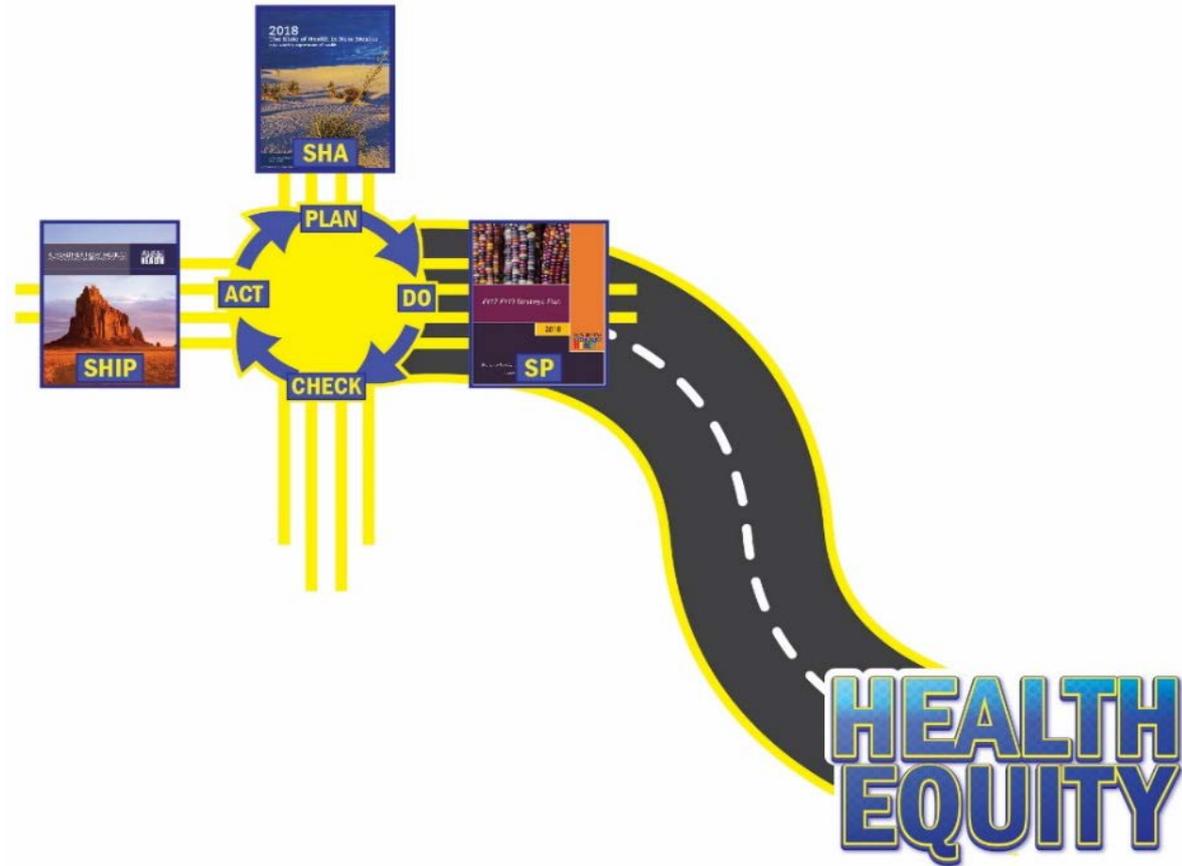
NMDOH Website Redesign

- Enhanced Navigation
- Quick Link to NMDOH Strategic Plan (and Performance Management Scorecard)

NMDOH Clear Impact
Results Scorecard

				Time Period	Actual Value	Target Value	Current Trend
⊖ **P**	Public: FY18 Q4		P003: Epidemiology Response Division (FY18) 📄				
⊕ PM	Public: FY18 Q4		P003: Percent of vital records customers who are satisfied with the service they received	FY 2018	99.6%	95.0%	↗ 2
⊕ PM	Public: FY18 Q4		P003: Percent of retail pharmacies that dispense naloxone	FY 2018	72.6%	55.0%	↗ 4
⊕ PM	Public: FY18 Q4		P003: Percent of county and tribal health councils that include in their plans evidence-based strategies to reduce alcohol-related harms	FY 2018	11.0%	6.0%	→ 2
⊕ PM	Public: FY18 Q4		P003: Number of health care providers who have received training in the use of the STEADI fall prevention toolkit	FY 2018	190	175	↘ 1
⊕ PM	Public: FY18 Q4		P003: Percent of NM hospitals certified for stroke care	FY 2018	16.2%	16.3%	↗ 2
⊕ PM	Public: FY18 Q4		P003: Number of New Mexicans who have completed an evidence-based or evidence-supported sexual assault primary prevention program	FY 2018	7,470	3,800	↗ 5
⊕ PM	Public: FY18 Q4		P003: Number of community members trained in evidence-based suicide prevention practices	FY 2018	222	100	↗ 2
⊕ PM	Public: FY18 Q4		P003: Percentage of the New Mexico population served during mass distribution of antibiotics and/or vaccinations through public/private partnerships in the event of a public health emergency	FY 2018	14.7%	15.0%	↗ 1
⊕ PM	Public: FY18 Q4		P003: Percent of New Mexico adults aged 65 years and older who have ever received a pneumococcal vaccination	2016	72.6%	75.0%	↘ 1

Results Scorecard vs. LFC Report Card

PUBLIC HEALTH DIVISION

		Time Period	Actual Value	Target Value	Current Trend
P · Public: FY17-Q2 · P002: Public Health Division					
PM · Public: FY17-Q2 · P002: Percent of participants in National Diabetes Prevention Program that were referred by a health care provider through the agency-sponsored referral system		—	—	—	—
PM · Public: FY17-Q2 · P002: Percent of children in Healthy Kids, Healthy Communities (HKHC) with increased opportunities for healthy eating in public elementary schools		2015	88%	—	↗ 2
PM · Public: FY17-Q2 · P002: Percent of WIC recipients that initiate breastfeeding		FY 2016	81.4%	82.0%	↗ 2
PM · Public: FY17-Q2 · P002: Number of high school youth trained in the Evolvement youth engagement program to implement tobacco projects in their school/community		2016	329#	—	→ 0
PM · Public: FY17-Q2 · P002: Percent of QUIT NOW enrollees who successfully quit using tobacco at 7-month follow-up		2016	32.5%	33.0%	↗ 1
PM · Public: FY17-Q2 · P002: Percent of female NMDOH public health office family planning clients ages 15-19 who were provided a most or moderately effective contraceptive		FY 2016	59.6%	66.0%	↗ 1

Budget: $163,391.3   **FTE:** 863

Measure	FY15 Actual	FY16 Actual	FY17 Target	FY17 Actual	Rating
Females aged fifteen to seventeen seen in public health offices given effective contraceptives	55%	56%	≥66%	65%	Y
Quit Now enrollees who successfully quit using tobacco at seven month follow-up	31%	33%	33%	34%	G
Teens aged fifteen to seventeen receiving services at clinics funded by the family planning program	1,334	1,405	3,616	3,715	G
High school youth trained to implement tobacco projects in their school or community	New	New	Baseline	356	
Program Rating					G

NMDOH Performance Measure Trends

Health status indicators trending strongly in the desired direction:

- Youth tobacco use

- Teen births

- Opioid overdose deaths (NM's rate has flattened in an era of increasing rates)

Related Performance Measures:

- Youth engagement (Evolvement Program)

- Teen pregnancy prevention education (NMDOH appears to be doing poorly here) and access to effective contraceptives (doing better here)

- Naloxone distribution by pharmacies

- Overlapping opioid and benzodiazepine prescriptions (new for FY19)

CDC Opioid Overdose Prevention Funding

Annually approximately $2.5 million

- Funds overdose prevention staff at DOH
- Community overdose prevention contracts
- Staff and infrastructure for the Prescription Monitoring Program at the Board of Pharmacy
- Staff and toxicology testing at the Office of the Medical Investigator
- Prescriber education
- Naloxone training for law enforcement

For September 1, 2018 – August 30, 2019 an additional $4 million

- Emergency department based secondary prevention programs
- Overdose prevention staff for Corrections Department and drug courts
- Overdose prevention staff at Department of Health
- Emergency department overdose prevention training
- Public perception surveys of prescription opioid risks

FY20 Budget Overview

FY20 Appropriation Request

Revenue

General Fund	309,712.4
Other Transfers	35,937.9
Federal Funds	107,674.2
Other State Funds	110,090.4
Fund Balance	0.0
Total	**563,414.9**

- Opioid Grant funding
- Revenue enhancements
- Vital records and DHI – Additional PS&EB funding
- Accreditation requirements
- DDW provider rate and service level increases
- DDW - Jackson Disengagement expenses
- FIT provider rate increases
- Restoration of IT budget

FY20 Base Increase Requests

Program Area	Purpose	FY20 Base Increase (BI)	
		GF	Other
Administration	Restoration of budget for Information Technology positions consolidated in FY17 and support other staffing needs	1,700.0	
Epidemiology & Response	Improve staffing in Vital Records	150.0	
Facilities Management	Replacement of medical equipment, beds, support items	250.0	
Developmental Disabilities Support	Sustain current client level Staffing at Dental Clinic Jackson Disengagement efforts FIT Program - increase in children served Provider rate increase Rate adjustment for DDW providers	4,000.0 113.5 3,000.0 1,400.0 5,100.0 1,600.0	
Health Certification, Licensing & Oversight (DHI)	Ensure adequate staffing to meet statutory and regulatory obligations.	250.0	250.0
TOTAL		17,563.5	250.0

17813.5

General Fund Appropriation Trend
FY16-FY20

	FY16 OpBud	FY17 OpBud	FY18 OpBud	FY19 OpBud	FY20 Request
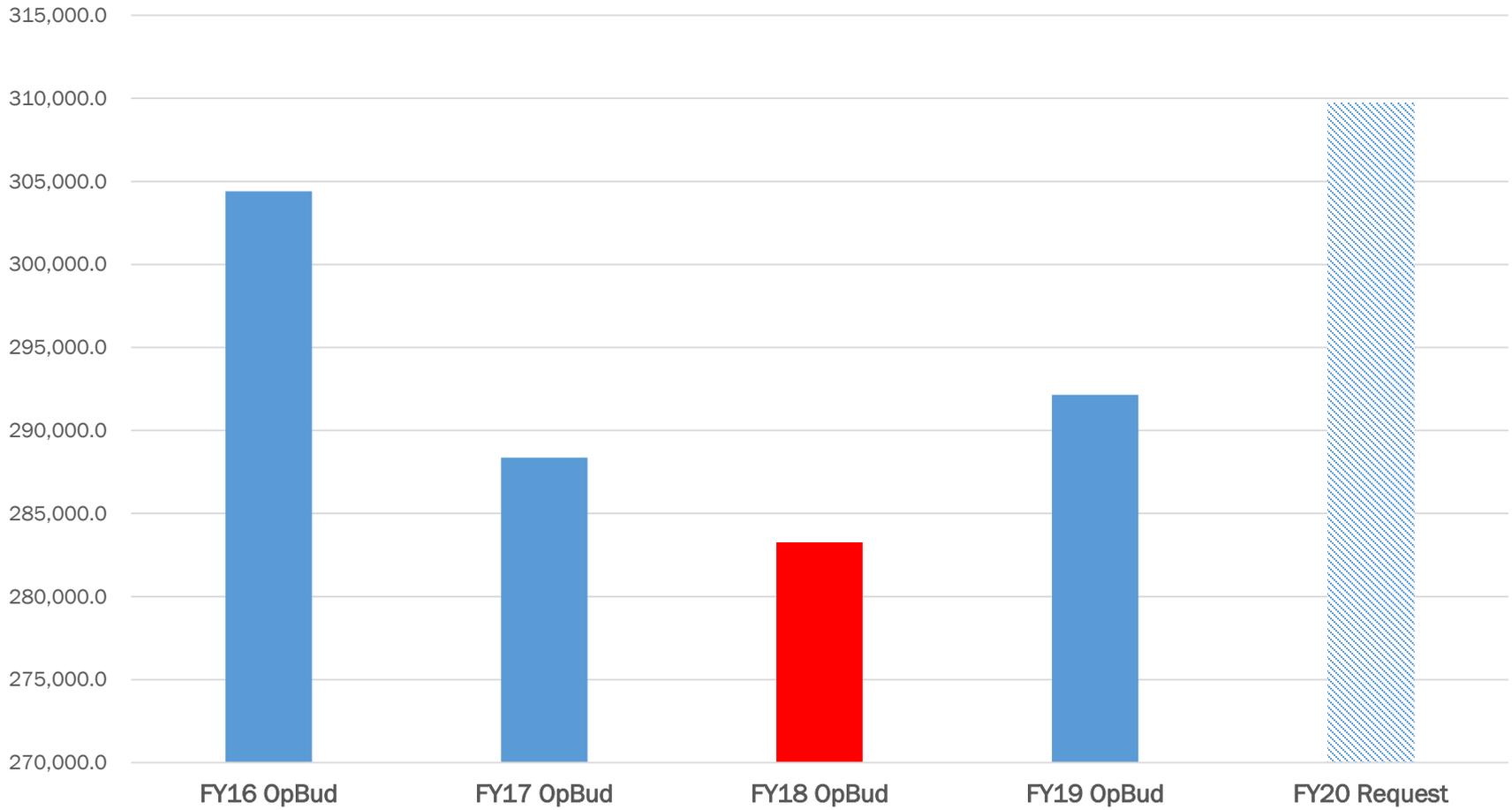
Public Health Division
FY18 Year End Performance

- FY18 PM: Percent of children in Healthy Kids, Healthy Communities (HKHC) with increased opportunities for healthy eating in public elementary schools

- Outcome: We ended the year at 89% (better than the target)

- PHD's overall expenses for FY18 were $162m.

Public Health Division FY19 Key Initiatives

- Train high school students to lead tobacco control efforts and projects within their schools and communities

  - *PM:* Number of high school youth trained in the Evolvement youth engagement program to implement tobacco projects in their school/community

  - *Why this matters:* Smoking is the leading cause of preventable death and 90% of adult smokers start before age 18.

- Increase the percent of contraceptive-seeking teens that choose effective methods

  - *PM:* Percent of female clients ages 15-19 seen in NMDOH public health offices who are provided most or moderately effective contraceptives

  - *Why this matters:* The use of most- or moderately effective contraceptives by young women reduces teen pregnancies.

Epidemiology and Response Division FY18 Year End Performance

- FY18 PM: Number of overlapping opioid and benzodiazepine prescriptions

- Outcome: Decreased by 19%

- ERD's overall expenses for FY18 were $28.2m

Epidemiology and Response Division FY19 Key Initiatives

- Improve health status in NM by focusing on 7 health status indicators (one example is the cardiovascular death rate)

- Break ground on a new vital records building in Santa Fe

- Use emergency department syndromic surveillance data to improve health status
  - Relevant health status indicators: older adult falls; drug overdose death; suicide; pneumonia and influenza deaths

Scientific Laboratory
FY18 Year End Performance

- FY18 PM: Percent of samples tested for etiological pathogens of communicable diseases and other threatening illnesses (including Zika, Plague, and Rabies) that are analyzed within predefined turnaround times.

- Outcome: We ended the year at 98 % comparing to 96.5% in FY17.

- SLD's overall expenses for FY18 were $11.7m

Scientific Laboratory FY19 Key Initiatives

- Expanding staff cross-training
  - PM: Number of staff in each section that are able to perform multiple tasks/tests.
  - Why this matters: To assure operation coverage and improve staff's skill set.

- Enhancing testing capability to detect multidrug resistant bacteria.
  - PM: Number of tests is validated and implemented, number of samples is screened and detected for multidrug resistance.
  - Why this matters: This capability will allow to define the baseline of drug resistant bacteria, to detect potential hotspots of newly emerging multidrug resistant bacteria in NM.

Developmental Disabilities Supports FY18 Year End Performance

- FY18 PM: Number of individuals receiving developmental disabilities waiver services

- Action plan:
  - Along with HSD, analyze utilization and expenditure data to determine if attrition and new allocations can be funded.
  - Building capacity in provider community

- Outcome: People Enrolled
  - DDW/Mi Via = 4,767(3,306/1,460)
    - (Budget/Actuals = **$102,216,300/$107,516,151**)
  - Medically Fragile = 272
    - (Budget/Actuals = **$1,400,000/$1,461,319**)

Developmental Disabilities Supports FY19 Key Initiatives

- Initiative 1
  - PM: Percent of adults receiving community inclusion services through the DD Waiver who receive employment services.
  - Why this matters: Nationally, individuals with I/DD experience greater levels of unemployment, under-employment, low wages, and poverty compared to individuals without disabilities.

- Initiative 2
  - PM: Number of individuals on the DD Waiver waiting list.
  - Why this matters: The DD Waiver program is designed to provide services to allow individuals with I/DD to live as independently as possible. The capacity of the program depends on combined state and Medicaid funding. This measure is important in gauging and responding to the need for services.
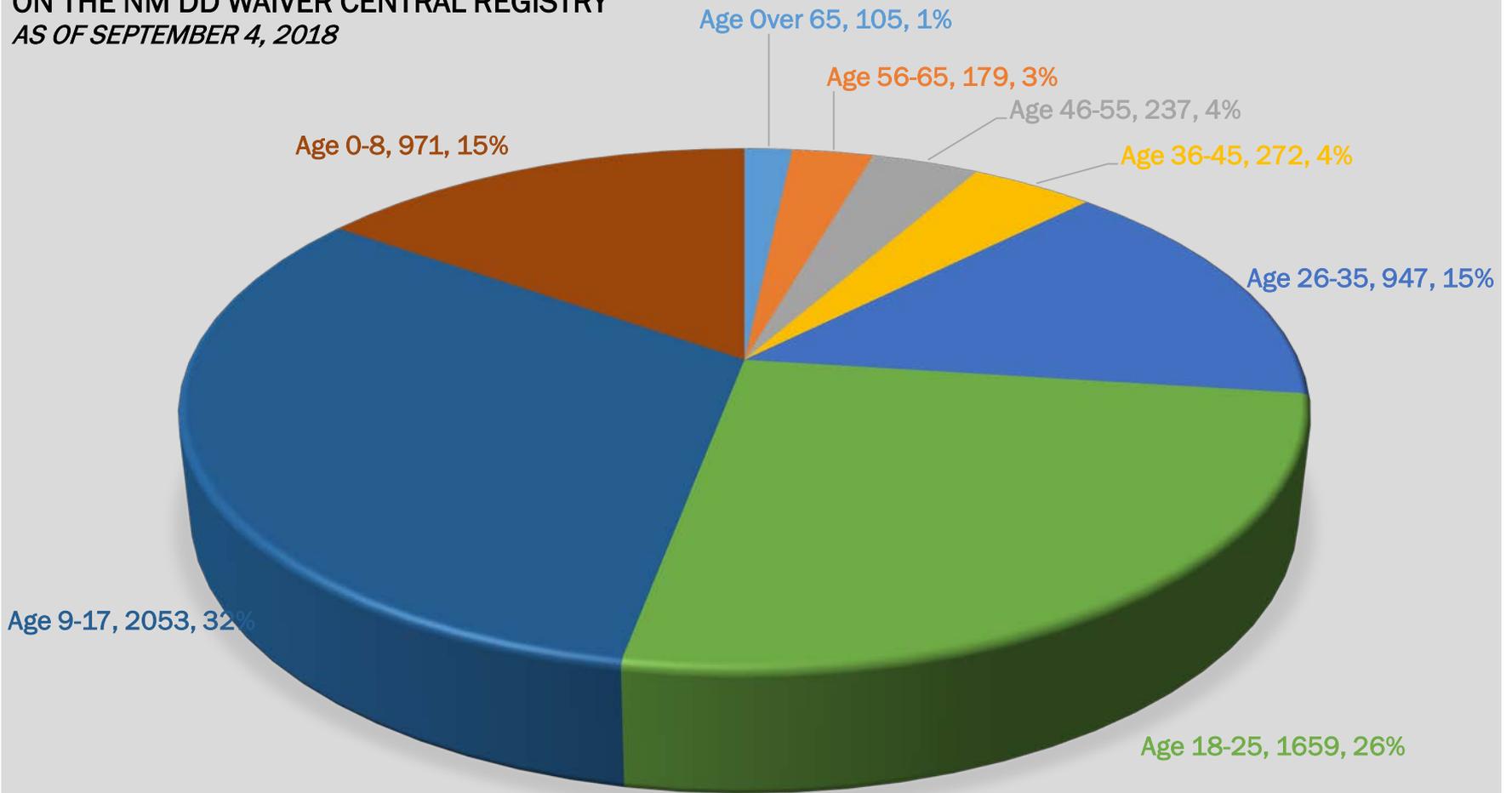
Developmental Disabilities Supports DDW Central Registry Update

- As of 10/01/18: Central registry contained 6,394 people. Waiting list contained 4,563 people.

- House Bill 2 appropriated $2 million to put 80 people from the waiting list into DDW/Mi Via services
  - 10 slots for expedited allocations
  - 70 slots for regular allocations

- In April 2018, DDSD conducted allocation fairs in each region throughout the state

- As of 10/12/18, DDSD has put 38 of 80 people into service

- In FY19, DDSD will replace people that leave the program through attrition.

AGE BREAKDOWN OF INDIVIDUALS
ON THE NM DD WAIVER CENTRAL REGISTRY
AS OF SEPTEMBER 4, 2018

Age Over 65, 105, 1%

Age 56-65, 179, 3%

Age 46-55, 237, 4%

Age 36-45, 272, 4%

Age 26-35, 947, 15%

Age 0-8, 971, 15%

Age 9-17, 2053, 32%

Age 18-25, 1659, 26%

Division of Health Improvement 2018 Year End Performance

- **Calendar Year 2017 PM**: Abuse rate for DD Waiver and Mi Via Waiver clients

- **2017 target**: 8% or lower.

- **Actual rate in 2017**: 7.2%

- **2018 Partial Year Outcome**: 4.4%
  - The abuse rate for the past 12 months (July 1, 2017 – June 30, 2018 is trending downward to 4.4%

- DHI overall expenses in FY18 were $11.43m

Division of Health Improvement FY19 Key Initiatives

- Percent of NM nursing home residents receiving or screened for pneumococcal and influenza immunizations; improper use of antipsychotics
  - Improving these rates demonstrates that educational efforts and partnerships are successful in reducing these preventable conditions
  - Improving these rates may also indicate more complete and accurate use of the MDS – the resident assessment tool provided by CMS.

- Using CMP Grants for Quality Improvement in Nursing Homes
  - By partnering with CMS, the NM Healthcare Association and nursing homes in New Mexico; nursing homes can access civil monetary penalty CMP funds for grants to provide training and other quality improvement projects that improve the quality of care and health outcomes of residents, making them safer places to live.

Facilities Management Division
FY18 Year End Performance
Turquoise Lodge Hospital (TLH)

Performance Measure:

TLH Detox Occupancy Rate
- Hospital Occupancy Rate is calculated as the average daily census divided by the number of staffed, licensed, hospital beds.
- The US average occupancy rate for a nonfederal short term special hospital with services available to the public is 63%, and the New Mexico average is 56% (CDC, 2013)
- FY18 Target: 85%
- Outcome: 86% average occupancy rate demonstrates performance that is better than the best.

FY18 QUARTERLY RESULTS (Detox Occupancy Rate)

Q1 = 87%	Q3 = 87%
Q2 = 85%	Q4 = 86%

Turquoise Lodge Hospital expenditures for FY18 were: $6.81m
64% is spent on Detox services

Why this matters: **Drug and alcohol use treatment is a DOH priority**
Due to the severity of substance use issues in New Mexico, providing medical detox is a critical function to help prevent related deaths. The impact to citizens is tremendous; it not only affects those patients who require medical detox but also family members, employers and community members.

Facilities Management Division
FY19 Key Initiatives
New Mexico Rehabilitation Center (NMRC)
Safe Opioid Prescribing/Administering

- Patient population admitted to the inpatient medical rehab unit have been identified as high risk for dependence on pharmacological opioid pain medications.

- NMRC's plan and goal is to effectively treat and manage pain by reducing the amount of prescribed opioids
  - Realistic expectations are developed for the degree, duration, and reduction of pain.
  - Education is provided on safe use.
  - Pain reduction interventions are being done with use of non-pharmacological/non-opioid medications.

- Improvements in quality and safety of Pain Assessment and Management
  - Data on pain assessment and management, to include types of interventions and effectiveness, is being collected and measured.

Facilities Management Division
FY19 Key Initiatives
Increasing Substance Use Treatment Resources to New Mexicans

Turquoise Lodge Hospital (TLH)

- Moving to Gibson Medical Center December 2018.

New Mexico Rehabilitation Center (NMRC)

- Added a 28-day residential inpatient treatment on July 1, 2018.

- A 3-tier system of care assists in positive sobriety and outcomes for patients needing inpatient medical detox, residential inpatient treatment 28-day program, and intensive outpatient programming.

- Implementation of an Adult Drug Court, in coordination with Chaves County 5th Judicial District to start on November 1, 2018.

Medical Cannabis Program FY18 Year End Performance

- FY18 PM: Approve or deny a completed patient application in 30 days.

- FY18 Target: 98%

- Action plan: Implement an operating change to print patient registry cards the same day an application is administratively approved.

- Outcome: MCP approved or denied 99% of completed applications within 30 days.

- Expenses in FY18 were $2.89m (self-sustaining division with no General Funds).

Medical Cannabis Program FY19 Key Initiatives

- Exploring opportunities for acceptance of online applications.
  - *PM*: Percent of completed patient applications approved/denied within 30 days.
  - *Why this matters*: In FY19, the Medical Cannabis Program is continuing to work with a project manager to explore options for software systems to allow patients to apply for MCP electronically.

Thank you!

Check out the NMDOH Results Scorecard here:

http://nmhealth.org/go/scorecard