



*Investing for tomorrow, delivering today.*

# State Fiscal Year 2024 Budget Request

Legislative Finance Committee

December 12, 2022

# Before we start...

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

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



Los Alamos Main Hill Overlook  
Photo courtesy of NMDOH employee, Andrea Cunningham

# Mission

To ensure health equity, we work with our partners to promote health and well-being, and improve health outcomes for all people in New Mexico.

## Goals



**1. We expand equitable access** to services for all New Mexicans



**2. We ensure safety** in New Mexico healthcare environments



**3. We improve health status** for all New Mexicans



**4. We support each other** by promoting an environment of mutual respect, trust, open communication, and needed resources for staff to serve New Mexicans and to grow and reach their professional goals

# Agenda

- Review of DOH's SFY24 Budget Request
  - Agency Budget Request Summary
  - Agency Budget Priorities
- Agency highlights
- Closing

# Presenters



**David R. Scrase, MD, MHSA**  
Cabinet Secretary (Acting)  
[david.scrase@hsd.nm.gov](mailto:david.scrase@hsd.nm.gov)  
505-316-5422



**Marlene Velasquez**  
Administrative Services Division Director (Acting)  
[marlene.velasquez@doh.nm.gov](mailto:marlene.velasquez@doh.nm.gov)  
505-469-4789



*Investing for tomorrow, delivering today.*

# SFY24 Summary Budget Request

# SFY24 DOH Budget Request: Agency Rollup

(thousands)

	FY21 Actuals	FY22 Est. Actuals	FY23 OPBUD	FY24 REQUEST	\$ DIFFERENCE FY23-24	% Difference FY23-24
General Fund	302,271.3	315,917.3	353,222.3	393,000.2	39,777.90	11%
Other Transfers	96,183.3	288,623.5	44,112.0	46,427.2	2315.2	5%
Federal Revenue	151,842.7	262,635.3	235,356.2	187,059.9	(48,296.3)	-20%
Other Revenue	113,479.6	105,770.3	139,125.7	144,728.8	5,603.1	4%
Fund Balance	264.1	215.7	0.0	0.0	0.0	0%

<b>GRAND TOTAL</b>	<b>664,041.0</b>	<b>973,162.1</b>	<b>771,816.2</b>	<b>771,216.1</b>	<b>(600.1)</b>	<b>0%</b>
--------------------	------------------	------------------	------------------	------------------	----------------	-----------

200 - PS&EB	237,214.1	235,675.6	290,551.8	304,054.4	13,502.6	5%
300 - Contracts	121,498.7	377,918.8	166,101.5	140,122.6	(25,978.9)	-16%
400 - Other	155,828.4	157,138.5	157,842.2	158,018.4	176.2	0%
500 - OF Uses	112,417.4	43,287.9	157,320.7	169,020.7	11,700.0	0%

<b>GRAND TOTAL</b>	<b>626,958.6</b>	<b>814,020.8</b>	<b>771,816.2</b>	<b>771,216.1</b>	<b>(600.1)</b>	<b>0%</b>
--------------------	------------------	------------------	------------------	------------------	----------------	-----------

Permanent	2,716.5	2,652.0	2,751.0	2,654.5
Term	1,021.0	1,116.5	1,043.5	1,227.5
Temporary	15.0	14.0	16.0	2.0

Vacancy Rates as of 11/30/21	
# vacant positions	1151.0
% positions vacant	30.0%

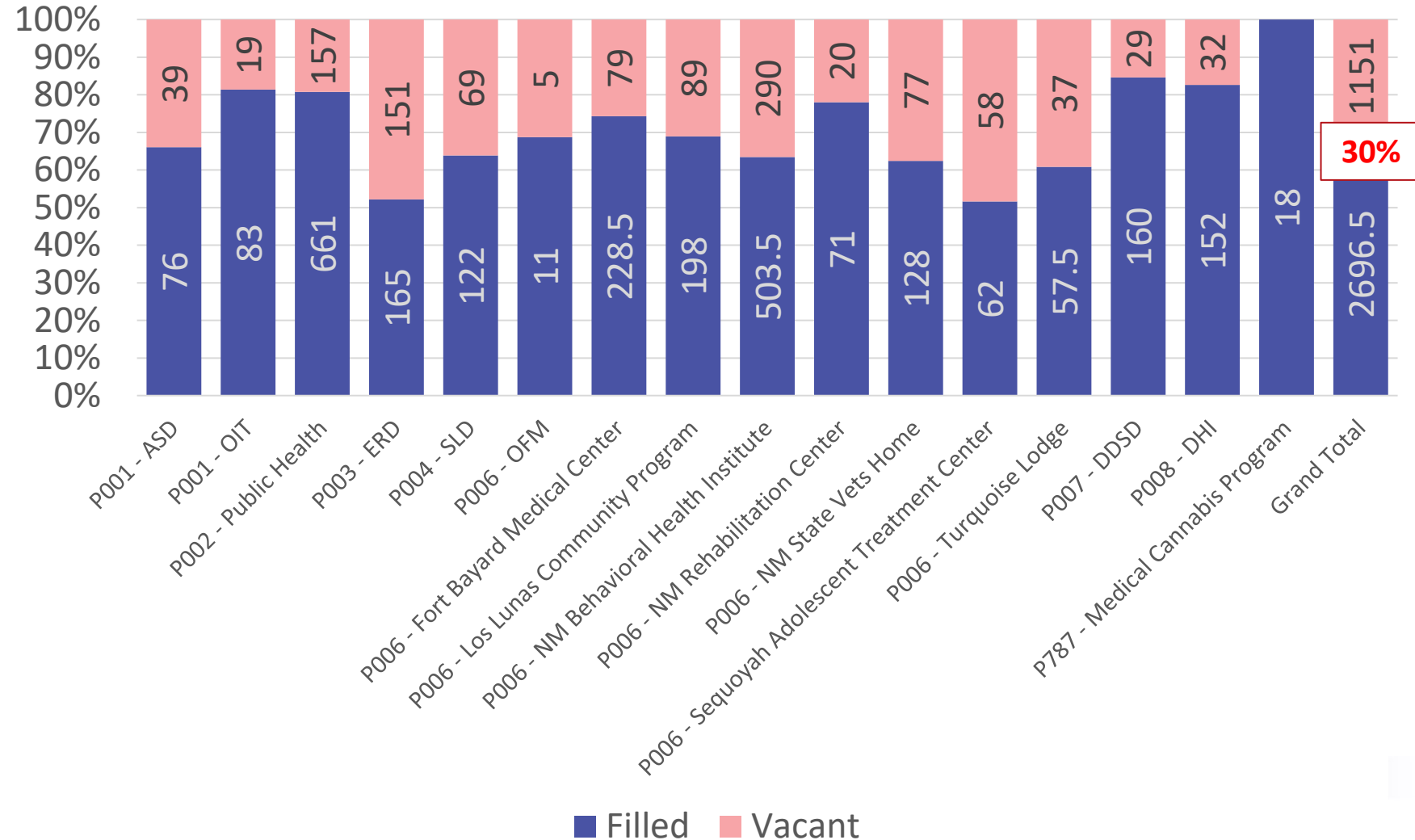
<b>Total FTE</b>	<b>3,752.5</b>	<b>3,782.5</b>	<b>3,810.5</b>	<b>3,900.0</b>
------------------	----------------	----------------	----------------	----------------

# DOH is working to reduce agency-wide vacancies

DOH is taking the following actions to reduce vacancies:

- Reclassifying vacant positions for new hires instead of the more time consuming new position creation.
- Conducting more frequent rapid hire events.
- Placing job advertisements on social media and job search platforms.
- Conducting job studies to put employees into higher payband classifications.

Filled vs. Vacant Positions, by Division or Facility, 11/30/22



# SFY24 DOH Budget Request Summary: Sources

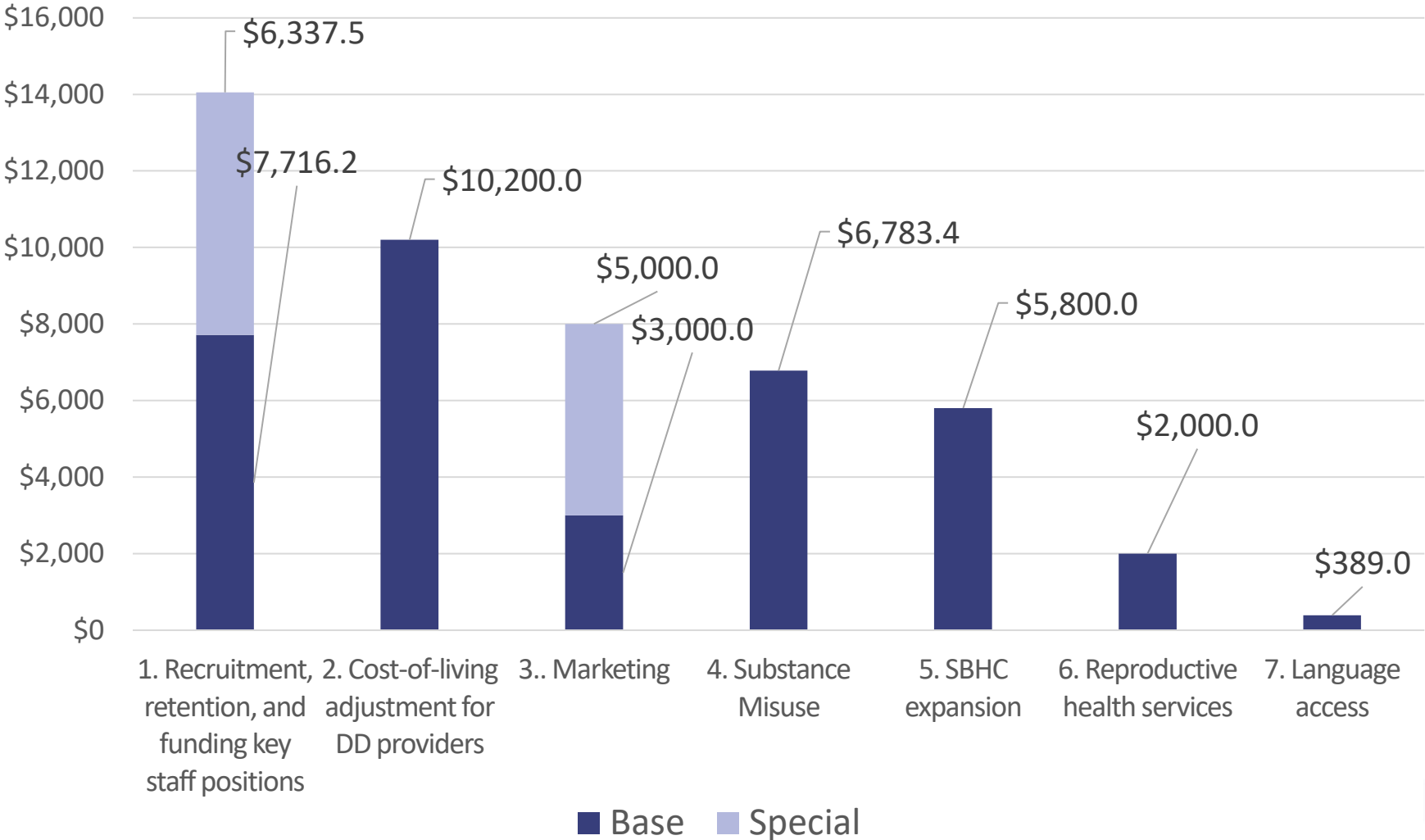
	SFY23 OpBud	% of OpBud	SFY24 Request	% of Request	\$ Change	% Change
General Fund	\$353,222.3	46%	\$393,000.2	51%	\$39,777.9	11%
Transfers	\$44,112.0	6%	\$46,427.2	6%	\$2,315.2	5%
Federal	\$235,356.2	30%	\$187,059.9	24%	(\$48,296.3)	-21%
Other	\$139,125.7	18%	\$144,728.8	19%	\$5,603.1	4%
Total	\$771,816.2		\$771,216.1		(\$600.1)	0%



# SFY24 DOH Budget Request Priorities

- 1. Recruitment, retention, and funding for key staff positions
- 2. Rate increases for providers who care for people with developmental disabilities
- 3. Marketing
- 4. Substance misuse prevention
- 5. School-Based Health Center expansion
- 6. Family planning/women's reproductive health services
- 7. Language access

SFY24 Priority Increase Requests (in thousands)



# Priority 1: Recruitment, retention, and funding for key staff positions

Program Area	Description of Base Increase Request	Requests (in thousands)		New FTE	200	300	400	500	Total
		Type	Amount						
001-Administrative Services Division	<b>Workforce recruitment and retention (ITSD):</b> Hire and retain a skilled workforce to allow ITSD staff to perform their functions with more precision and expediency, which will result in better services for New Mexicans.	Special	4,922.4		4,922.4				<b>4,922.4</b>
006-Facilities Management	<b>Key staff positions (Facilities personnel cost increases):</b> Cover personnel cost increases that have occurred the past several years.	Base Increase	3,000.0		3,000.0				<b>3,000.0</b>
008-Health Certification, Licensing & Oversight (DHI)	<b>Key staff positions (DHI License Only Expertise):</b> Provide regulatory oversight for 238 Assisted Living Facilities, 6 Crisis Triage Centers and approximately 60 boarding homes in New Mexico.	Base Increase	1,627.3	17.0	1,350.8		679.5		<b>1,627.3</b>
006-Facilities Management	<b>Workforce recruitment and retention (Facilities direct care staff salary increases):</b> 10% increase for a total of 281 filled direct care positions.	Special	1,415.1		1,415.1				<b>1,415.1</b>
002-Public Health Division	<b>Key staff positions (PHD Community Health Workers):</b> Reduce vacancy rate by 17.0 FTE to increase technical assistance and training for CHWs maintain current CHW workforce in our public health offices.	Base Increase	943.0		893.0	50.0			<b>943.0</b>
001-Administrative Services Division	<b>Finance/procurement workforce recruitment and retention:</b> Add 7.0 FTE to the procurement section to improve service provision to New Mexicans and Federal grant utilization, as well as decrease overtime, staff turnover, and procurement violations.	Base Increase	901.5	7.0	895.5		42.0		<b>901.5</b>
008-Health Certification, Licensing & Oversight (DHI)	<b>Key staff positions (DHI Individual Quality Review):</b> Reduce vacancy rate by 12.0 FTE by funding existing positions that were transferred to DHI without funding 8 years ago.	Base Increase	506.7						<b>506.7</b>
008-Health Certification, Licensing & Oversight (DHI)	<b>Key staff positions (DHI Caregivers Criminal History Screening):</b> Reduce vacancy rate by funding existing positions, as well as reclassify 9.0 existing positions.	Base Increase	276.7		276.7				<b>276.7</b>
006-Facilities Management	<b>Key staff positions (CNA recruitment pilot):</b> Establish an in-house Certified Nurse Aid (CNA) Program that will provide training at Ft. Bayard Medical Center to address the national and state shortage in CNAs.	Base Increase	250.0		135.0		115.0		<b>250.0</b>
003-Epidemiology and Response Division	<b>Key staff positions (ERD Vital Records):</b> Reduce the vacancy rate for 2.0 FTE, as well as procure supplies for operations.	Base Increase	211.0		116.0		95.0		<b>211.0</b>
		<b>Totals</b>	<b>14,053.7</b>	<b>24.0</b>	<b>13,004.5</b>	<b>50.0</b>	<b>931.5</b>	<b>0.0</b>	<b>14,053.7</b>

# IT workforce and retention is key for NMDOH to serve New Mexicans

- NMDOH IT Services Division (ITSD) is responsible for the information technology infrastructure (servers, network, applications and systems) NMDOH relies on to provide care and support to vulnerable New Mexicans.
- ITSD has struggled to fill critical vacancies with an appropriately skilled workforce and continues to lose existing workforce members due to the inability to train them on new technologies the Department could leverage to provide better systems.
- Even if ITSD was fully staffed at its current budgeted number of positions (103), we will be at a 2.5% ratio IT staff: Total staff which is below the average 3.8% for local and state government.
- A \$4,922.4 (special) state general fund will allow NMDOH ITSD to:
  - Reduce the vacancy rate by 31 full-time positions.
  - Reclassify four (4) critical positions.
  - Adjust the salary of 49 positions.
  - Provide needed training to enhance employee technical skills.
  - Perform their functions with more precision and expediency, which will result in better health services for all New Mexicans.

	Gartner's Recommended Levels for State & Local Governments	NMDOH Actual Levels
IT Expending	\$24,600.0	\$7,100.0
IT Annual Budget	\$42,500.0	\$0.0
IT Staffing Level	152 FTE	70 FTE

State	Total Employees	IT Staff	Ratio
Nebraska	4,481	343	7.6%
Mississippi	1,608	116	7.2%
Nevada	1,500	96	6.4%
Kansas	1,350	53	3.9%
New Mexico	4,000	70	1.7%



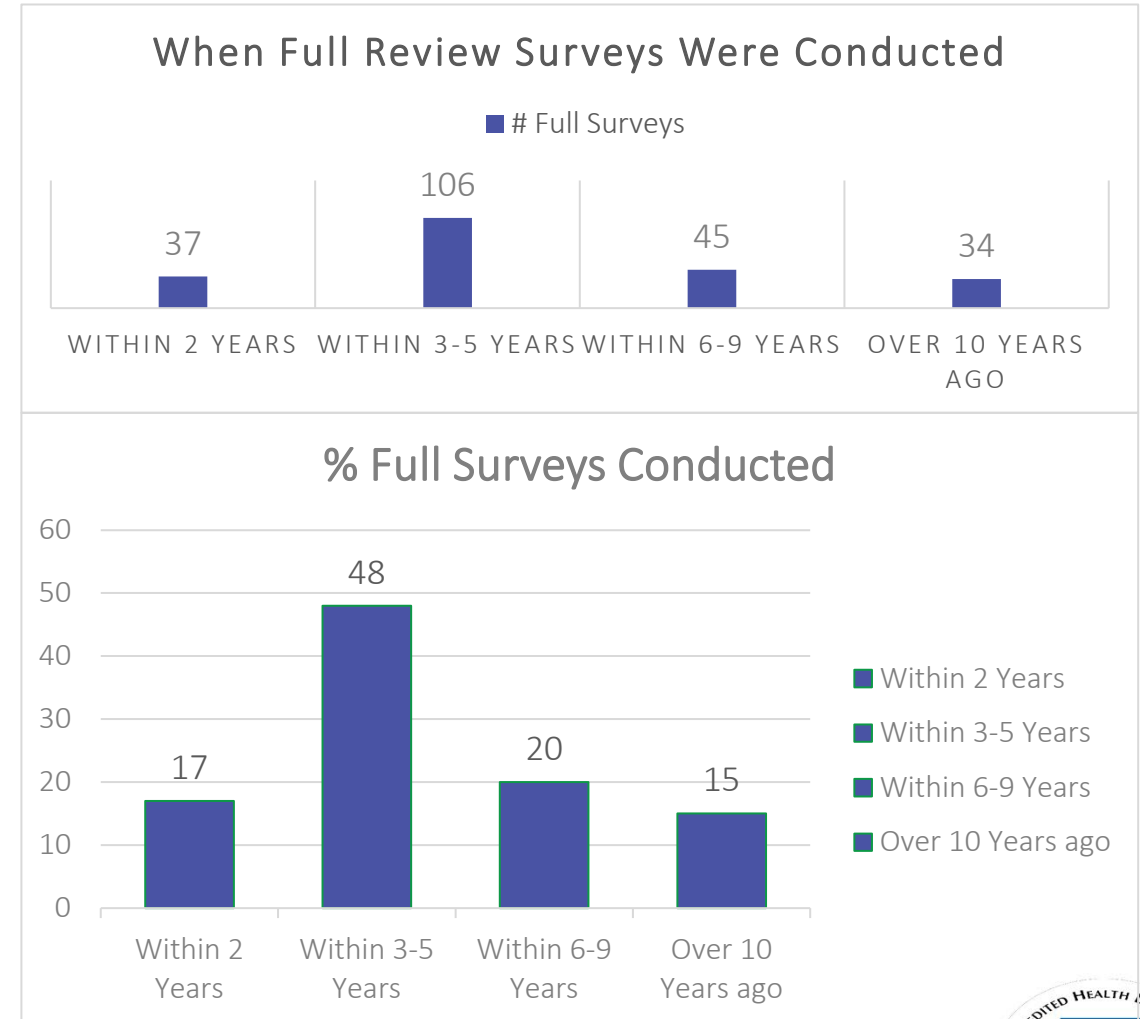
Note: dollars in in thousands

*Investing for tomorrow, delivering today.*



# NM licensed only healthcare facilities will receive timely complaint investigations through creation of license only expertise

- A survey includes a thorough investigation: reviewing records, making observations, interviewing residents/staff/family etc., and writing the survey report.
- Without regular interval scheduled surveys to verify compliance with state regulations, Assisted Living Facility oversight is dependent upon complaint assignments.
- **\$1,627.3 in state general fund** will allow NMDOH to:
  - Conduct Full Onsite Surveys at minimum every 30 months, regardless of a complaint.
  - Provide timely oversight and ensure the delivery of quality care to over 6,000 New Mexican's residing in these facility types.



Note: dollars in in thousands

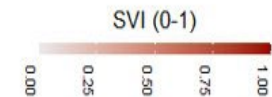
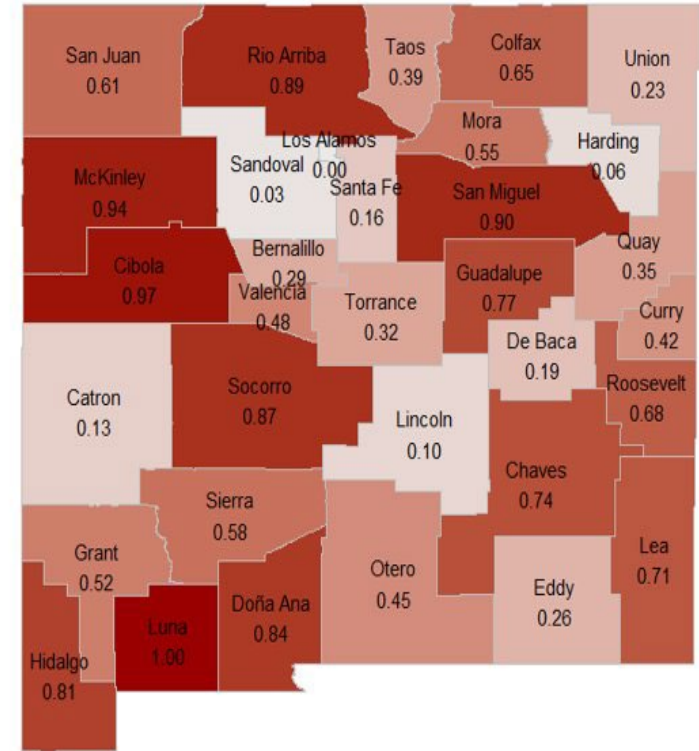
*Investing for tomorrow, delivering today.*

1190 S. St. Francis Drive • Santa Fe, NM 87505 • Phone: 505-827-2613 • Fax: 505-827-2530 • nmhealth.org

# Community Health Workers: The future of health equity <sup>13</sup>

- Compared to other states, New Mexico ranks:
  - #36 in access and affordability
  - #34 in prevention and treatment
  - #39 in healthy lives
- 20 NM counties (60.6%) have a Social Vulnerability Index score of 0.4 or higher – indicating poverty, lack of access to transportation, and crowded housing in these communities, which often pose barriers for individuals to access healthcare.
- Community Health Workers (CHWs) are trusted members of their community who are familiar with local healthcare resources and serve as a bridge between NM’s healthcare system and New Mexicans.
- Since 2019, NMDOH CHWs have brought over 15,000 New Mexicans into Public Health Offices for harm reduction, WIC, Senior Farmers Market, and immunization services.
- **\$943.0 in state general fund** will allow NMDOH to:
  - Decrease the vacancy rate by 17.0 CHW FTEs,
  - Develop statewide CHW training, and
  - Perform outreach for education, advocacy, and social support to impact the lives of 60,000 New Mexicans who have the highest medical needs.

Social Vulnerability Index  
New Mexico



Due to an error in U.S. Department of Health and Human Services' 2018 estimates no value is provided for Rio Arriba, this map uses the 2016 value for that county

# Workforce recruitment and retention is essential to NMDOH making improvements in finance and procurement processes

- NMDOH is facing chronic procurement challenges that delay procurement, service provision, and Federal grant utilization.
- NMDOH has determined that the root cause is insufficient human resources to process our 852 contracts and 7,180 purchase orders (over 30% of which are Federally funded).
- \$901.5 in state general fund will allow NMDOH to:
  - Add additional 7.0 FTE to procurement section.
  - Improve staff retention and enhance training.

Ratio Comparison	NMDOH Ratio	HSD Ratio
Total staff to finance/ procurement staff	719 : 10 72 : 1	679 : 40 17 : 1 (4.25 x more staff)
Number of FY22 contracts to finance/procurement staff	426 : 25 17 : 1 (12.1 x more contracts)	57 : 40 1.4 : 1
Number of FY22 purchase orders to finance/ procurement staff	718 : 5 144 : 1 (11 x more contracts)	313 : 24 13 : 1

## Priority 2: Rate increases for providers who care for people with developmental disabilities

Program Area	Description of Base Increase Request	Requests (in thousands)		New FTE	200	300	400	500	Total
		Type	Amount						
007-Developmental Disabilities Support Division	<b>Rate increase for providers who care for people with developmental disabilities:</b> Cost-of-living adjustment based on the CMS required 2019 rate study rates and an increase in the CPI-U.	Special	10,200.0					10,200.0	<b>10,200.0</b>
		<b>TOTALS</b>							

# Supported living challenges: recruitment and retention

<b>Total</b>	<b>1</b>	<b>3</b>	<b>2</b>
Open	0	3	1
Closed	2	1	1
<b>Percentage Closed</b>	<b>100%</b>	<b>25%</b>	<b>50%</b>
	Cibola	McKinley	San Juan
Northwest			

<b>Total</b>	<b>26</b>	<b>14</b>	<b>8</b>	<b>12</b>
Open	5	2	1	1
Closed	20	13	8	12
<b>Percentage Closed</b>	<b>80%</b>	<b>87%</b>	<b>89%</b>	<b>93%</b>
	Bernalillo	Sandoval	Valencia	Torrance
Metro				

<b>Total</b>	<b>0</b>	<b>13</b>	<b>2</b>	<b>0</b>	<b>4</b>	<b>3</b>	<b>0</b>	<b>0</b>
Open	0	9	3	0	3	2	0	0
Closed	0	5	0	0	1	1	0	0
<b>Percentage Closed</b>	<b>100%</b>	<b>36%</b>	<b>0%</b>	<b>100%</b>	<b>25%</b>	<b>33%</b>	<b>100%</b>	<b>100%</b>
	Catron	Dona Ana	Grant	Hidalgo	Luna	Otero	Sierra	Socorro
Southwest								

<b>Total</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>2</b>	<b>2</b>	<b>1</b>	<b>1</b>
Open	1	0	0	1	0	2	2	0	0
Closed	0	0	1	2	1	0	0	1	1
<b>Percentage Closed</b>	<b>0%</b>	<b>100%</b>	<b>100%</b>	<b>66%</b>	<b>100%</b>	<b>0%</b>	<b>0%</b>	<b>100%</b>	<b>100%</b>
	Colfax	Harding	Los Alamos	Mora	Rio Arriba	San Miguel	Santa Fe	Taos	Union
Northeast									

<b>Total</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>
Open	1	1	0	1	0	1	1	0	0
Closed	1	0	0	0	0	0	0	1	1
<b>Percentage Closed</b>	<b>50%</b>	<b>0%</b>	<b>100%</b>	<b>0%</b>	<b>100%</b>	<b>0%</b>	<b>0%</b>	<b>100%</b>	<b>100%</b>
	Chaves	Curry	De Baca	Eddy	Guadalupe	Lea	Lincoln	Quay	Roosevelt
Southeast									



**RED= 75% Not Accepting New Clients**  
**YELLOW= 25% - 75% Not accepting New Clients**  
**GREEN= Accepting New Clients**



# Base budget request: \$10,215.0 for provider rates

	State Share	Federal Share	Fund Balance	Total	4.50%
FY24 Projection	\$ 163,851.0	\$ 643,091.0	\$ 41,948.0	\$ 848,891.0	\$ 38,200.0
STATE					\$ 10,215.0
FEDERAL					\$ 27,985.0



**Return on Investment = \$2.7 : \$1**

*Investing for tomorrow, delivering today.*

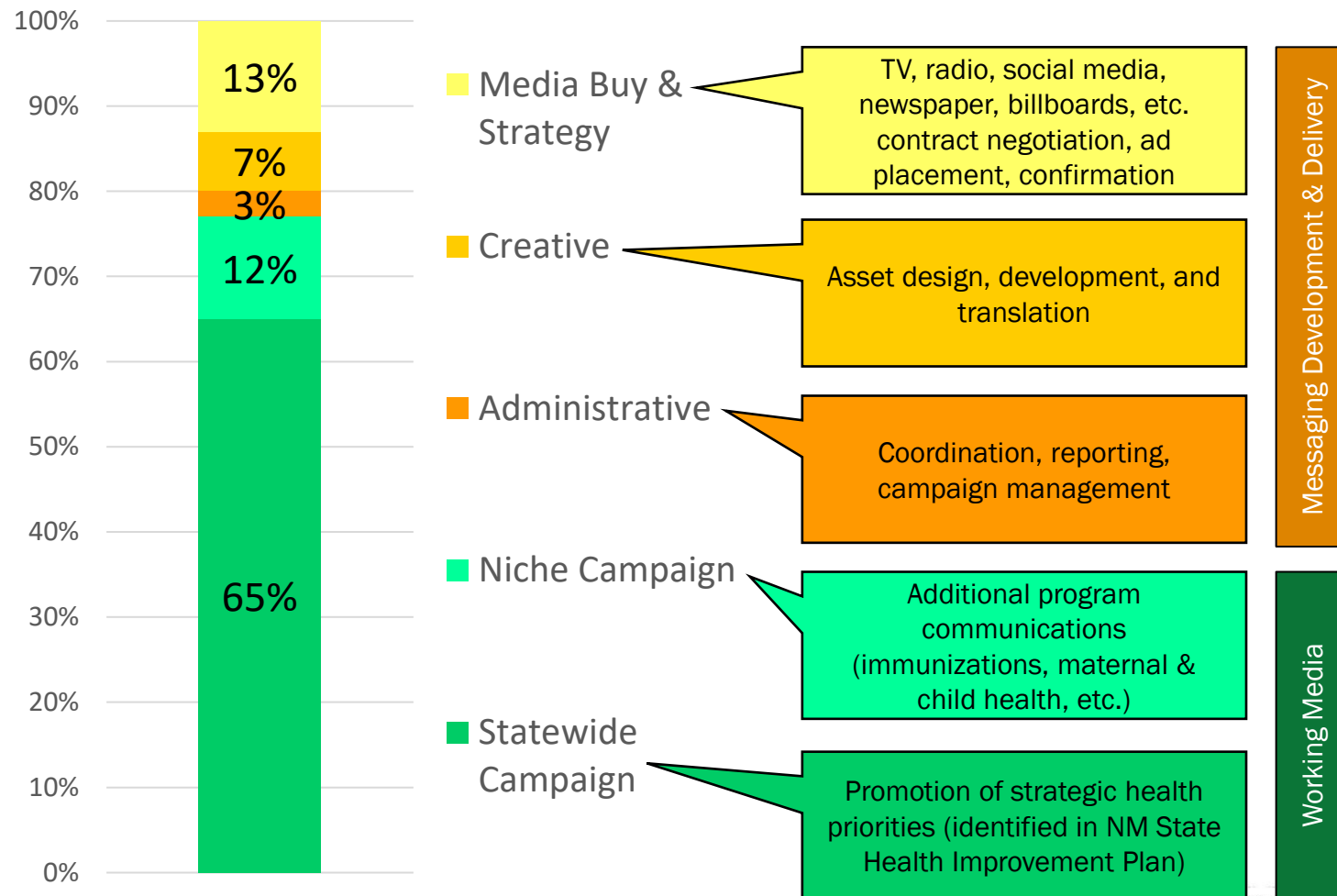
## Priority 3: Marketing

Program Area	Description of Base Increase Request	Requests (in thousands)		New FTE	200	300	400	500	Total
		Type	Amount						
001-Administrative Services Division	<b>Marketing:</b> Develop new multi-media advertising campaigns to advertise DOH facilities, programs, and services for New Mexicans.	1. Base Increase	3,000.0			3,000.0			<b>3,000.0</b>
		2. Special	5,000.0			5,000.0			<b>5,000.0</b>
		<b>TOTALS</b>	<b>8,000.0</b>			<b>8,000.0</b>			<b>8,000.0</b>

# Bridging gap between NMDOH services and clients through marketing

- In February 2022, the Governor's office requested that NMDOH establish a Marketing Division based on a new awareness of the value of marketing and its ability to incite action, as seen in the pandemic.
- The COVID-19 vaccine marketing campaign's success shows that strategic, effective marketing bridges the gap between NMDOH's services and clients.
- \$8,000.0 in state general fund (\$3,000.0 base increase, \$5,000.0 special) will allow NMDOH to:
  - Build a magnetic brand and deploy proven models for success to statewide health priorities.
- Nearly \$0.80 on every dollar will work to amplify carefully crafted messages that reach our target audience in the right places at the right time.

Breakdown of FY24 DOH Marketing Budget Request



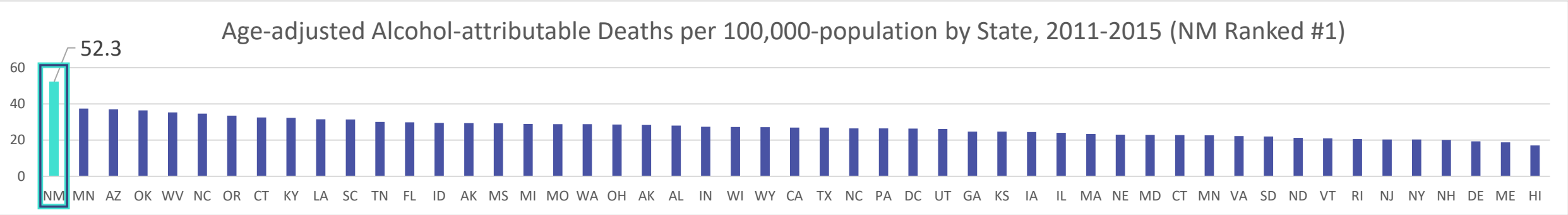
Note: dollars in in thousands

*Investing for tomorrow, delivering today.*

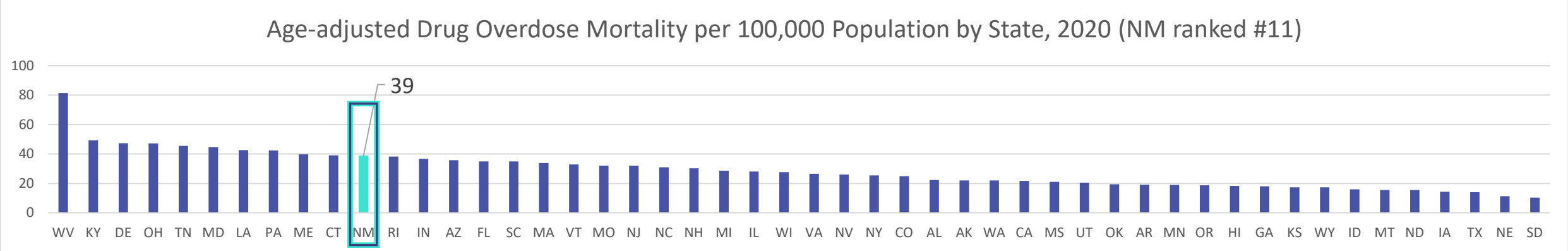


# Priority 4: Substance misuse prevention

Program Area	Description of Base Increase Request	Requests (in thousands)		New FTE	200	300	400	500	Total
		Type	Amount						
002-Public Health Division	<b>Substance misuse prevention (alcohol):</b> Develop a cross-divisional multi-specialty Office of Alcohol Prevention to reduce alcohol related deaths in New Mexico.	Base Increase	5,000.0		255.0	4,345.0	400.0		<b>5,000.0</b>
002-Public Health Division	<b>Medication assisted treatment expansion:</b> Introduce Medication Assisted Treatment (MAT) services in additional rural DOH Public Health Offices to rural statewide to address opioid overdose trends in New Mexico.	Base Increase	1,783.4	3.5	424.1	1,264.3	95.0		<b>1,783.4</b>
		<b>Totals</b>	<b>6,783.4</b>	<b>3.5</b>	<b>679.1</b>	<b>5,609.3</b>	<b>495.0</b>		<b>6,783.4</b>



[Deaths and Years of Potential Life Lost From Excessive Alcohol Use — United States, 2011–2015 | MMWR \(cdc.gov\)](#)

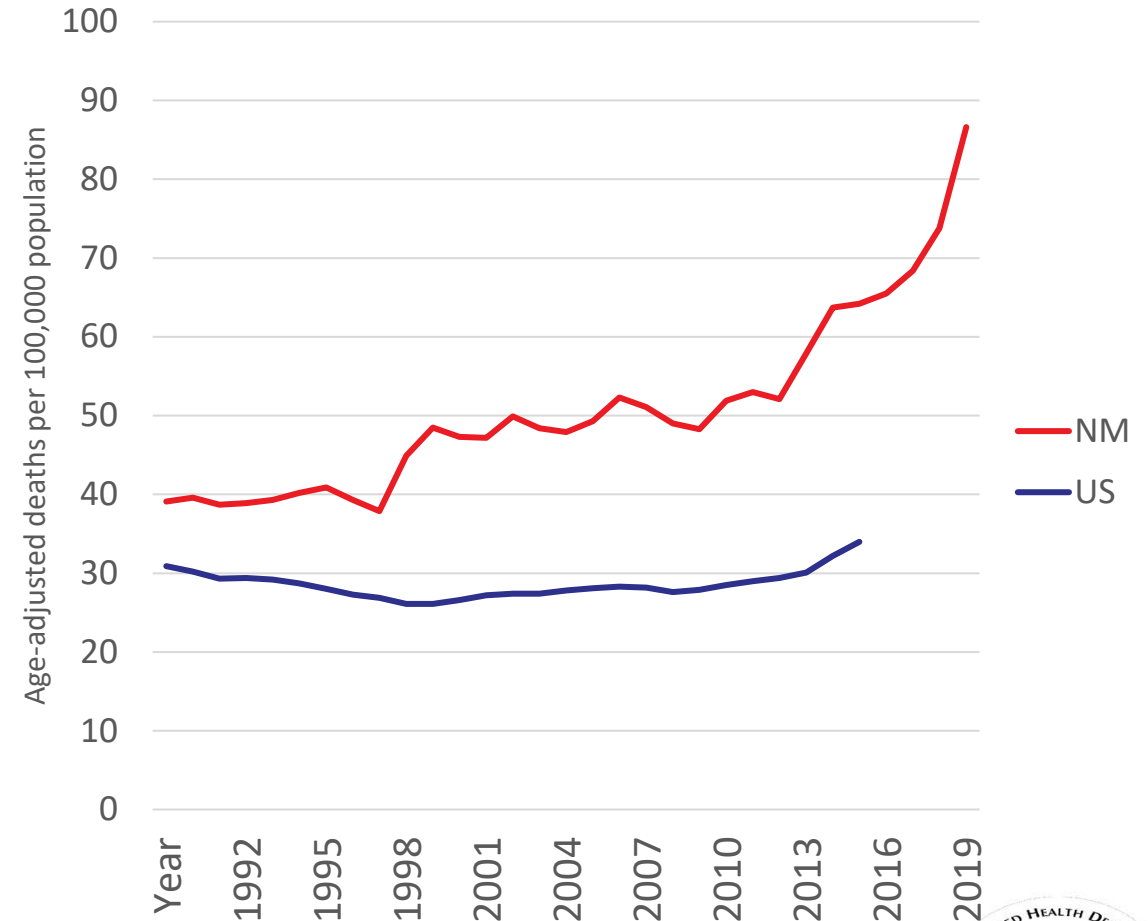


[2020 Drug Overdose Death Rates | Drug Overdose | CDC Injury Center](#)

# Establishing an Alcohol Misuse Prevention Office at NMDOH

- Excessive alcohol use is a leading cause of preventable death in the US. New Mexico has the highest rate of alcohol related death rate of any state in the U.S., and these rates are increasing in both NM and the US.
- On average, five people in New Mexico die every day due to alcohol-related causes. 275,000 New Mexicans binge drink. 73,000 residents could benefit from treatment to reduce their alcohol consumption are not getting it.
- \$5,000.0 in state general fund will allow NMDOH to establish an Office of Alcohol Prevention that will use the following strategies for excessive alcohol use that could prevent over 12,000 new cases of alcohol dependence a year:
  - Increase the percentage of New Mexicans who have a Screening and Brief Intervention (SBIRT) for alcohol use and access to counseling and medication-assisted treatment as needed.
  - Continue interagency workgroup and expand to a multi-sector tribal, and community taskforce to coordinate efforts to reduce alcohol related mortality.
  - Decrease alcohol consumption in counties with the highest alcohol related mortality to support the development and implementation policies and plans that addresses alcohol-related mortality in these counties.
  - Increase the number of county and tribal councils that implement evidence-based strategies to reduce problem drinking.

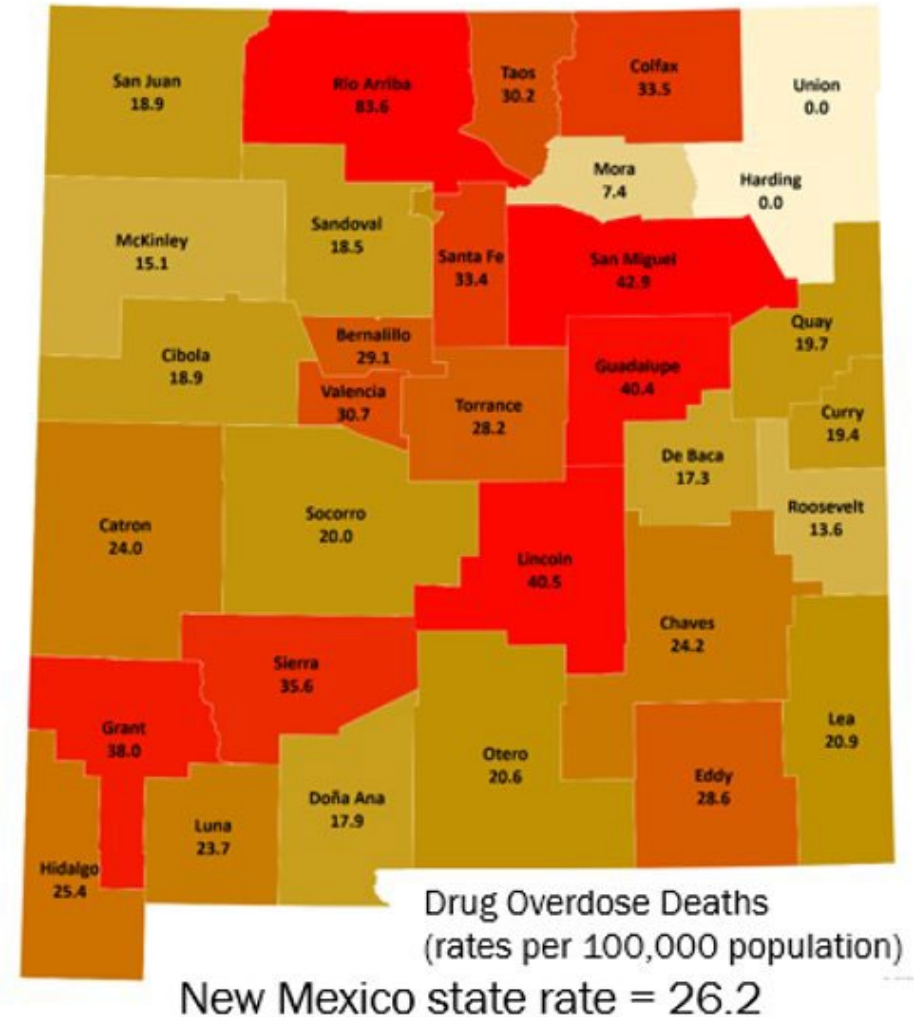
Alcohol-related Deaths by Year, New Mexico, 1990 to 2020



# Expanding Medication Assisted Treatment

- As per the CDC, New Mexico ranks high in Drug Overdose Mortality and the overdose trends continue to increase in many areas of rural NM.
- NM's current Drug Overdose Death rate per 100,000 population is 26.2 compared to 21.2 in the US (2019).
- There has been an 81% increase in deaths due to fentanyl (a synthetic opioid), which has accelerated during the COVID Pandemic.
- Increasing access to these services where it is currently limited/nonexistent will reduce overdose death rates.
- **\$1,783.4 in state general fund** will allow NMDOH to:
  - Expand DOH's capacity to perform harm reduction outreach and medication assisted treatment for opioid substance misuse.
  - Invest in existing programs with the intent of expansion to other parts of the state.

Drug Overdose Death Rates by NM County, 2019



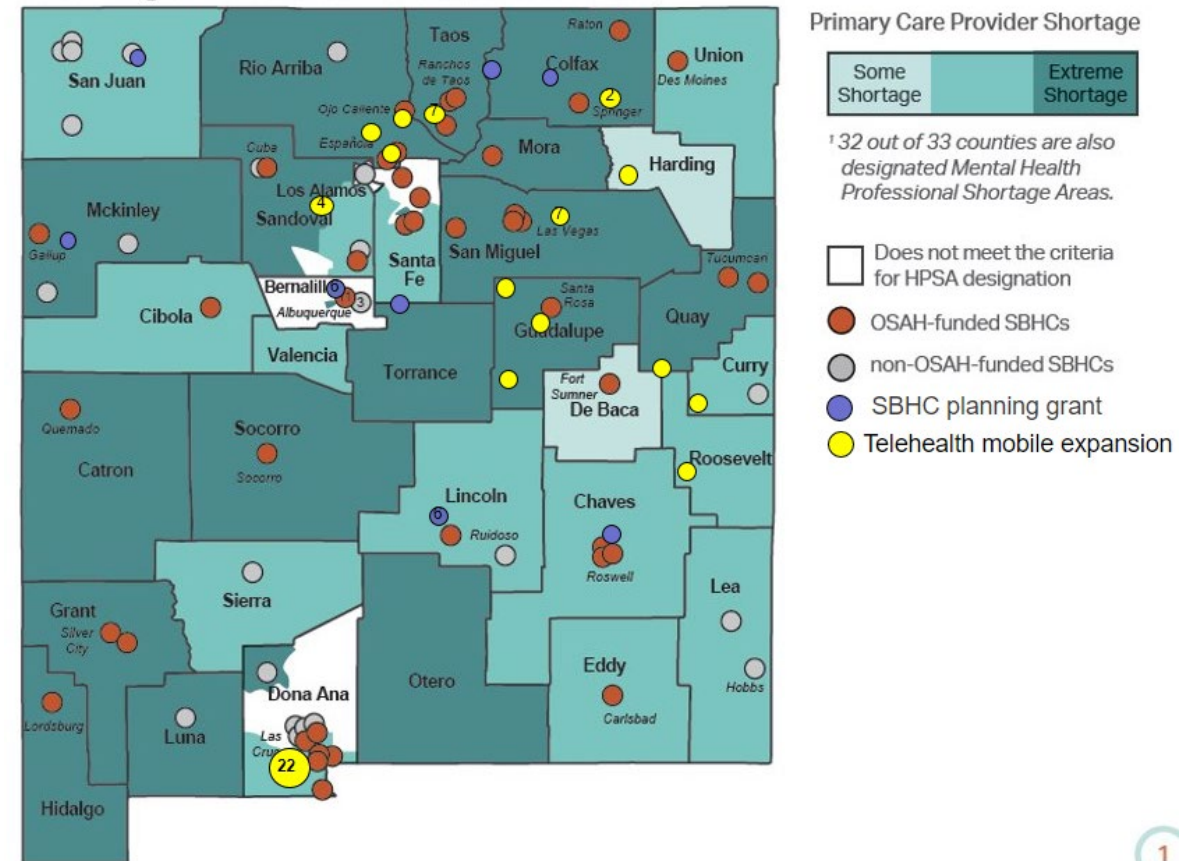
## Priority 5: School-Based Health Center (SBHC) expansion

Program Area	Description of Base Increase Request	Requests (in thousands)		New FTE	200	300	400	500	Total
		Type	Amount						
002-Public Health Division	<b>School-Based Health Center (SBHC) expansion:</b> Support DOH's School-Based Health Center (SBHC) program and increase access to primary care and behavioral health care for 25,073 students in 70 rural and tribal community schools.	Base increase	5,800.0	3.0	323.8	5,401.2	75.0		<b>5,800.0</b>
		<b>TOTALS</b>							

# Increasing NM youth's access to healthcare through School-Based Health Center expansion

- In NM, School-based Health Centers (SBHCs):
  - Increase access to both primary care and behavioral health care for students, including suicide prevention and SUD screening;
  - Improve continuity of care through sponsorships with local health care organizations; and
  - Increase seat time at school for students and at work for parents.
- Over the past 15 years, budget cuts have resulted in closing SBHCs or reducing services. From 2006 to present, DOH's FTE dedicated to SBHC efforts has decreased from 8.0 to 1.2.
- \$5,800.0 in state general fund** will allow NMDOH to:
  - Expand hours and services in existing SBHCs.
  - Fund two expansion projects to increase SBHC access for approximately 22,000 students:
    - 13 new locations working on SBHC planning with NM Association of School-based Health Centers.
    - Initiative with Governor's office to deliver integrated services (primary care and behavioral health) via telehealth and mobile units to approximately 59 additional rural schools.
  - Increase DOH's Office of School and Adolescent Health (OSAH) SBHC program by 3.0 additional FTE.

Providing Care in Underserved Communities <sup>1</sup>





## Priority 6: Family planning/women's reproductive health services

Program Area	Description of Base Increase Request	Requests (in thousands)		New FTE	200	300	400	500	Total
		Type	Amount						
002-Public Health Division	<b>Family planning/women's reproductive health services:</b> Replace reductions in Federal funds to maintain current family planning services.	Base increase	2,000.0		1,700.0		300.0		<b>2,000.0</b>
		<b>TOTALS</b>							

# Family Planning Program Federal Funding has been Reduced and should be Supplemented by State General Fund

- Currently, the Family Planning Program funds clinical services and educational programming throughout the State of New Mexico.
- Clinical services are provided to over 10,000 clients each year, in 44 of the 52 public health offices across the state and in 15 FQHCs/SBHCs.
- Educational programming is provided to over 400 teenagers (both middle school and high school aged youth) in areas of high-risk for teen pregnancy across the State (Santa Fe County, Rio Arriba County, Valencia County, Eddy County, and Luna County).
- Recent federal funding was reduced from \$5,446.6 to \$3,169.0.
- **\$2,000.0 in state general fund** will allow NMDOH to:
  - Maintain family planning services at current baseline.

FY22 Family Planning Budget	
Source	Amount
Federal (Title X Grant)	\$5,446.6
State (State General Funds)	\$710.7
Other (Includes Title V and PREP)	\$981.8
Program Income (Medicaid/Fee Revenue)	\$800.5
<b>TOTAL</b>	<b>\$7,939.6</b>

FY23 Family Planning Budget	
Source	Amount
Federal (Title X Grant)	\$3,169.0
State (State General Funds)	\$710.7
Other (Includes Title V and PREP)	\$981.8
Program Income (Medicaid/Fee Revenue)	\$800.5
<b>TOTAL</b>	<b>\$5,662.0</b>

Note: dollars in in thousands

*Investing for tomorrow, delivering today.*

1190 S. St. Francis Drive • Santa Fe, NM 87505 • Phone: 505-827-2613 • Fax: 505-827-2530 • nmhealth.org



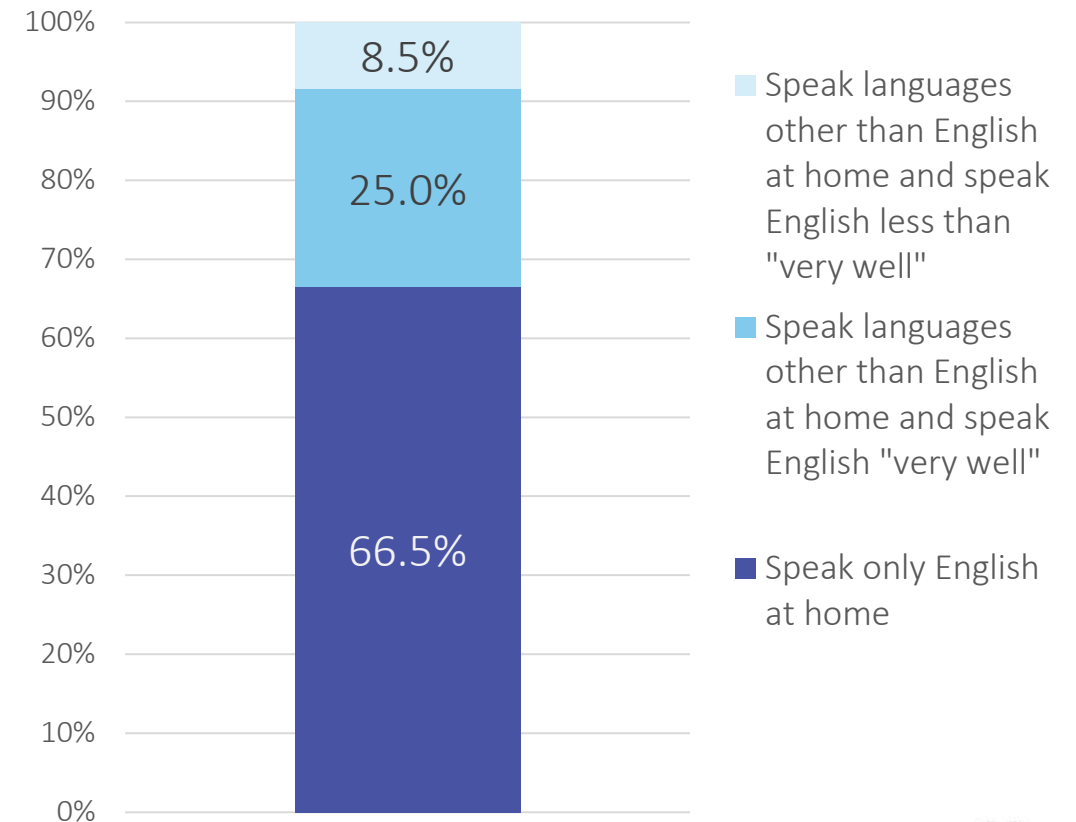
## Priority 7: Language access

Program Area	Description of Base Increase Request	Requests (in thousands)		New FTE	200	300	400	500	Total
		Type	Amount						
001-Administrative Services Division	<b>Language access:</b> Establish a Language Access Program that will implement evidence-based language access training and guidance throughout DOH and materials in plain language with multiple languages.	Base Increase	389.0	3.0	371.0		18.0		<b>389.0</b>
		<b>TOTALS</b>							

# A language access program is an evidence-based approach to increasing health equity

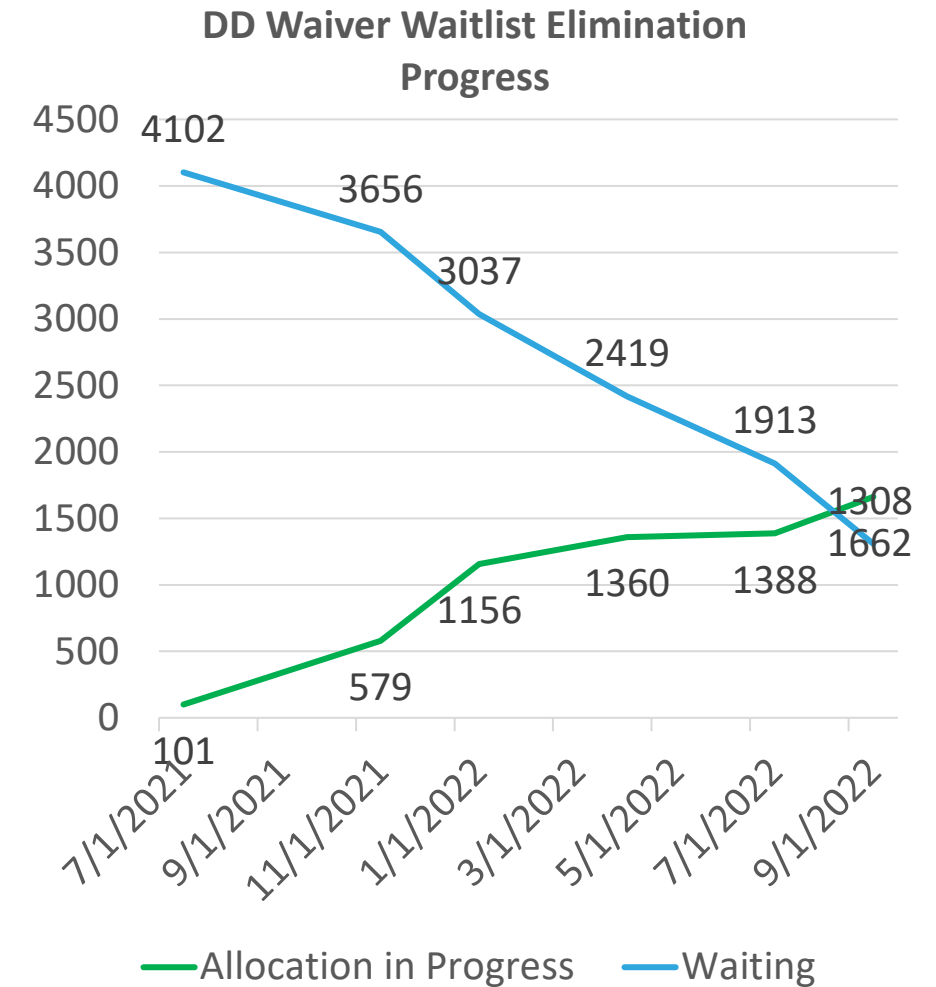
- 661,320 New Mexicans (31%) speak a language other than English at home.
- Language access in public health builds trust in communities to engage the government entities that serve them.
- **\$389.0 in state general fund** will allow NMDOH to:
  - Establish a Language Access Program:
    - Language Access Coordinator, Program Evaluator, and 2 Certified Spanish Translators/Interpreters (Note: All other language needs will be contracted out and 1 Spanish Translator/Interpreter is already funded)
  - Ensure evidence-based language access at NMDOH and in communities we serve through professional translation and interpretation services.
  - Provide evidence-based language access training and guidance throughout NMDOH.
  - Create materials in plain language with multiple languages released simultaneously to increase health equity
  - Comply with federal law and state law (HB 22) through assessment, planning, and reporting to the Governor's Office and Legislature.

Language Spoke at Home for Population 5 years and Over in New Mexico



# Recent Legislative Investments in Developmental Disabilities and Healthcare Licensing have paid good dividends. 29

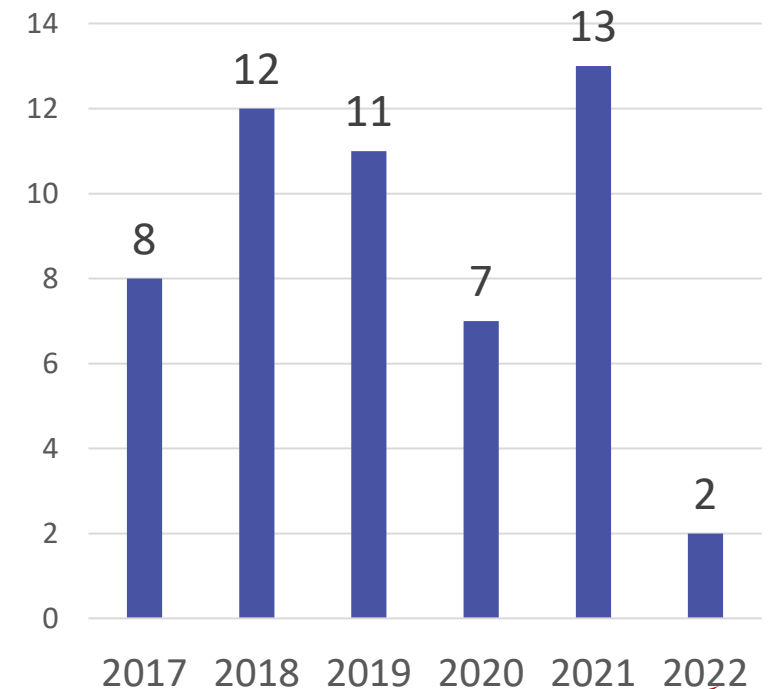
- In April 2022, the 30+ year Jackson lawsuit was dismissed.
- 1,308 individuals moved off the DD waiver waitlist and into services (waitlist reduced 84% in the last 12 months), and 100% of those on waitlist will be invited into program services by 1/17/2023. ►
- In January 2023, DDSD emergency room diversion program will launch, increasing access to emergency care for individuals on a DD waiver.
- Despite not being fully funded, the Division of Health Improvement (DHI):
  - Achieved Federal survey and complaint workload for acute and continuing care for nursing facilities.
  - Completed over 1,100 citations in 68 nursing homes.
  - Met investigation and survey measure for DD waiver recipients.
  - Conducted site visits for 96 potential boarding home locations.
  - Maintained a staff turnover rate of <11%.



# Recent Legislative Investments in Public Health and State Lab have paid good dividends.

- Scientific Laboratory Division's Toxicology Bureau seeing early signs of retention following reclassification appropriation in July 2022. ►
- In July 2022, NM WIC became the first WIC program in the nation to implement a mobile payment process for a Farmers Market Program.
- NM WIC enrolled 4250 new participants from SNAP referrals, averaging approximately 150 additional participants per week in 2022.
- In December 2022, Family Connects home visiting program launched in collaboration with ECECD.

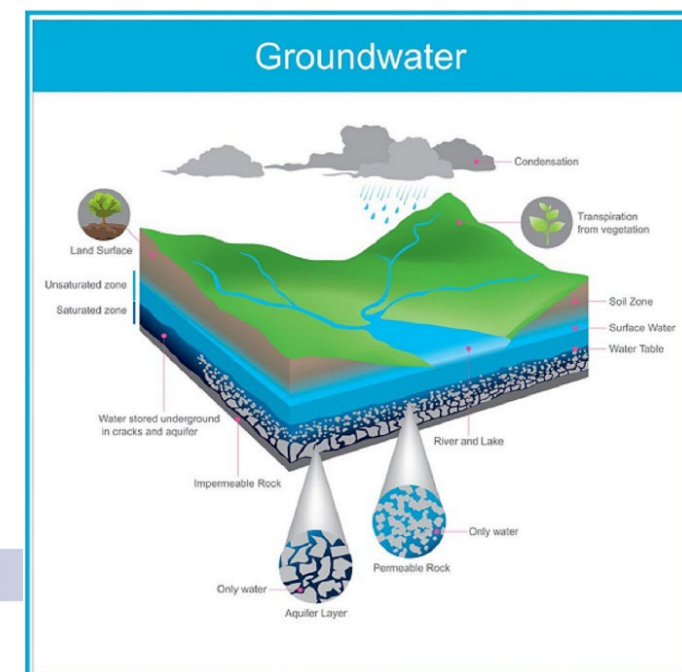
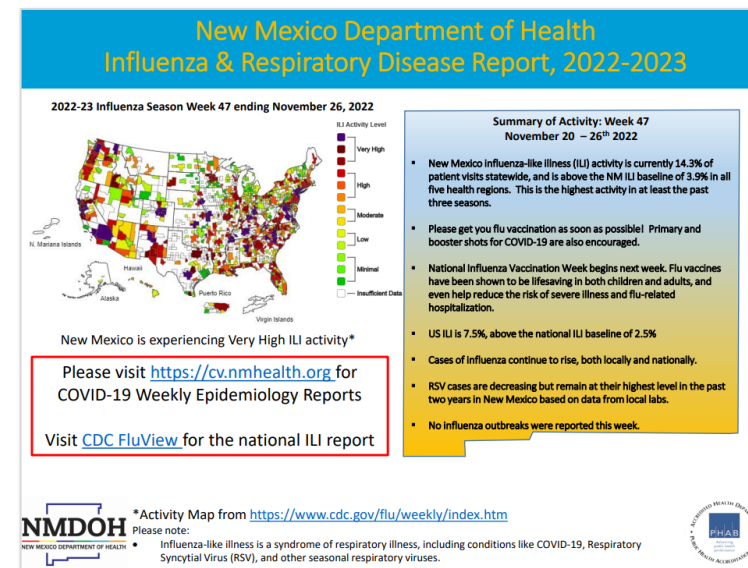
Scientific Laboratory Division  
Toxicology Bureau Departures by  
Calendar Year



Reclassification effective July 2022

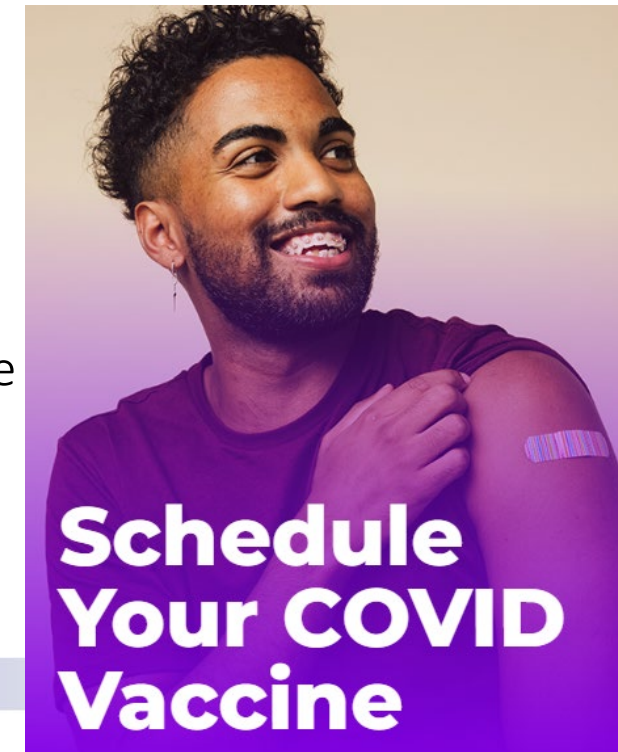
# Recent Legislative Investments in Epidemiology have paid good dividends.

- 671 RSV and 874 flu cases identified so far in 2022, NM hospitalized case surveillance contributes to national data via FluSurvNET and RSVNET. ►
- Provided 22 Infection Prevention and Control ECHO trainings to 121 participants from long-term care and home health as part of the Project Firstline collaborative.
- Initiated process for the development of two new Trauma Centers; Roosevelt General Hospital (Portales) and Covenant Hospital (Hobbs).
- All-Payer Claims Database (APCD) vendor onboarded in July 2022. \$500K of state C2 funding budgeted for use as state matching funds to CMS Medicaid Matching Funds (Federal 90%/State 10%).
- Geocoding of 2022 COVID cases (295K records), 2018-19 Vital Records births (46K records) and deaths (39K records).
- Since legislation was passed in 2021 for House Bill 179, allowing homeless individuals to receive free birth certificates, the Bureau of Vital Records has issued more than 1,100 free birth certificates.
- Began sampling at 10 wastewater treatment facilities for COVID-19 virus.
- Collected and analyzed 134 drinking water samples from private wells after wildfires for contamination (total coliforms, chlorides, nitrates, etc.). ►



# Recent Legislative Investments in Administration and Marketing have paid good dividends.

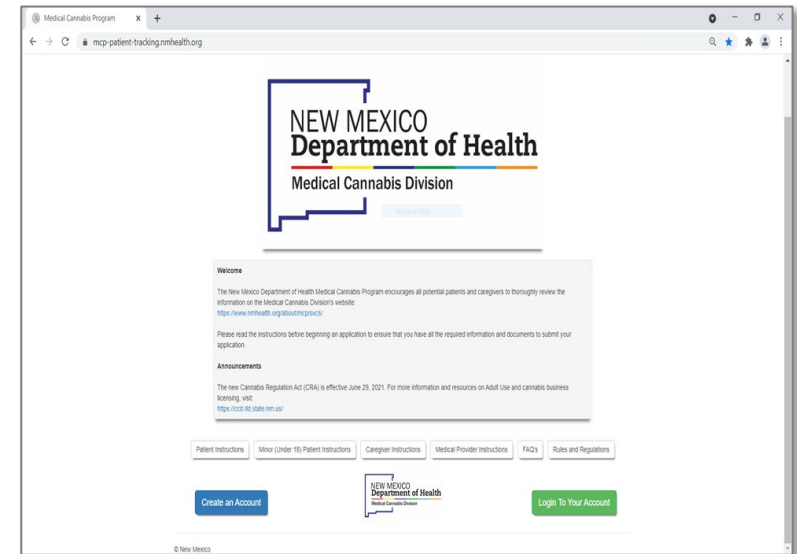
- Hired a new ASD leadership team, including Interim Division Director.
- Public Health Accreditation Board (PHAB) reaccreditation has been in process— our application was submitted, and we have a site visit this Wednesday, 12/14. Reaccreditation occurs every 5 years. ►
- Established marketing division:
  - Awarded the marketing RFP and presented the inaugural event reflections
  - Social media accounts verified, post frequency, consistency, and accommodations to ensure access increased, number of followers grew from between 3.9 and 9.9%, average engagement rate ranged from 0.3 to 4.0%.
  - Reached 4,754,318 New Mexicans through TV, radio, and digital channels.
  - Launched NMformula.org to connect families in need with guidance and resources has seen consistent use since launch last summer with 112,512 page views.
  - 12 COVID advertising campaigns supported ongoing vaccine success. ►





# Recent Legislative Investments in Information Technology have paid good dividends.

- Procured and implemented solutions that significantly reduced our cybersecurity risk; Achieved 3.8% phishing prone score (lower is better and industry average for state government is 15.2%).
- In June 2022, vital records digitalization was completed.
- Migrated 3,800 employees to the state communication and collaboration platform.
- Over 17,000 patients utilizing Medical Cannabis Program online patient portal and wait time has reduced to 5.6 days. Patients can now also access digital medical cannabis cards through the portal. ▶



# Recent Legislative Investments in DOH Facilities have paid good dividends.

- In October 2021, The Meadows Phase 3 at NM Behavioral Health Institute (NMBHI) opened for operations. ►
- Filled 6 key administrative vacancies (three new facility administrators [Turquoise Lodge Hospital, NM Rehab Center (NMRC), The Meadows at NMBHI], two directors of nursing [Ft. Bayard Medical Center, NMRC], and one HR director [NMRC]).
- As of November 2022, all clinical deficiencies were resolved for NM State Veterans Home.
- As of August 2022, automated medication dispensing has been implemented at Ft. Bayard Medical Center and NM State Veterans Home (NM Rehab Center and Turquoise Lodge Hospital are coming soon).
- Increased shift differential implemented November 2022 in effort to recruit more direct care staff.
- DOH led State Personnel Office approval for increased pay bands for 4 direct care staff pay bands.
- On May 2<sup>nd</sup>, NM Behavioral Health Institute evacuated 203 residents to other facilities throughout the state due to the Hermits Peak/Calf Canyon fire. In addition, 70 staff were deployed to facilities sheltering residents. ►
- NM Rehab Center (NMRC)'s intensive outpatient treatment program was reinstated and the first patient admitted on December 6, 2022.



# Recent Legislative Capital Investments in DOH Facilities have paid good dividends.

- \$20,000.0 and \$40,000.0 for small homes at NM State Veterans Home construction is underway. ►
- \$5,000.0 NM Behavioral Health Institute forensics design RFP was issued, contractor was selected, and work has started.
- \$1,200.0 design phase complete for facilities work management system rollout starting January 2023.
- NMDOH has expended 100% of facilities improvement appropriations in in the last 4 years (totaling \$32,000.0).



Small homes construction at New Mexico State Veterans Home, 11/30/22



*Investing for tomorrow, delivering today.*

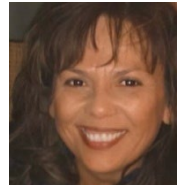
Thank you!

# DOH Leadership Team

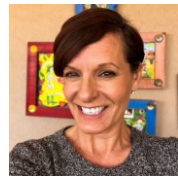
*See next page for DOH Facilities Leadership*



**David R. Scrase, MD, MHSA**  
Cabinet Secretary (Acting)  
[david.scrase@hsd.nm.gov](mailto:david.scrase@hsd.nm.gov)  
505-316-5422



**Marlene Velasquez**  
Administrative Services Division  
Director (Acting)  
[marlene.velasquez@doh.nm.gov](mailto:marlene.velasquez@doh.nm.gov)  
505-469-4789



**Lea J. Harrison**  
Deputy Secretary of Facilities  
[Lea.harrison@doh.nm.gov](mailto:Lea.harrison@doh.nm.gov)  
505-670-3261



**Billy Jimenez, JD**  
Deputy Secretary/General Counsel  
[billy.jimenez@doh.nm.gov](mailto:billy.jimenez@doh.nm.gov)  
505-827-2913



**Laura Chanchien Parajón, MD, MPH**  
Deputy Secretary/Epidemiology and Response  
Division Director, State Epidemiologist (Acting)  
[laura.parajon@doh.nm.gov](mailto:laura.parajon@doh.nm.gov)  
505-803-3873



**Chris Burmeister**  
Division of Health Improvement Director  
[christopher.burmeis@doh.nm.gov](mailto:christopher.burmeis@doh.nm.gov)  
505-252-4492



**Jason Cornwell**  
Developmental Disabilities Supports  
Division Director  
[jason.cornwell@doh.nm.gov](mailto:jason.cornwell@doh.nm.gov)  
505-660-3453



**Michael W. Edwards, PhD, HCLD (ABB)**  
Scientific Laboratory Division Director  
[michael.edwards@doh.nm.gov](mailto:michael.edwards@doh.nm.gov)  
505-383-9001



**HC Hawkins**  
Human Resources Bureau Director  
[hc.hawkins@doh.nm.gov](mailto:hc.hawkins@doh.nm.gov)  
505-827-0526



**Breanna Henley**  
Director of Operations  
[Breanna.Henley@doh.nm.gov](mailto:Breanna.Henley@doh.nm.gov)  
575-649-7230



**Janet Johnson**  
Tribal Liaison (Acting)  
[janet.johnson@doh.nm.gov](mailto:janet.johnson@doh.nm.gov)  
505-365-2684



**Jeff Lara**  
Public Health Division Director (Acting)  
[jeffrey.lara1@doh.nm.gov](mailto:jeffrey.lara1@doh.nm.gov)  
505-827-2691



**Andrea Lawrence**  
Marketing Director  
[andream.lawrence@doh.nm.gov](mailto:andream.lawrence@doh.nm.gov)  
505-470-2290



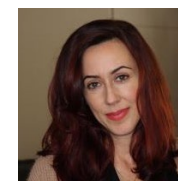
**Glidden R. Martinez**  
Chief Information Officer  
[glidden.martinez@doh.nm.gov](mailto:glidden.martinez@doh.nm.gov)  
505-819-8116



**Jodi McGinnis Porter**  
Communications Director  
[jodi.mcginisporter@doh.nm.gov](mailto:jodi.mcginisporter@doh.nm.gov)  
505-670-4136



**George D. Morgan**  
Facilities Management Director  
[georged.morgan@doh.nm.gov](mailto:georged.morgan@doh.nm.gov)  
505-660-0350



**Arya Showers**  
Policy and Accountability Director  
[aryan.showers@doh.nm.gov](mailto:aryan.showers@doh.nm.gov)  
505-470-4141



**Dominick V. Zurlo, PhD**  
Medical Cannabis Program Director  
[dominick.zurlo@doh.nm.gov](mailto:dominick.zurlo@doh.nm.gov)  
505-827-2321

# DOH Facilities Leadership Team



**David R. Scrase, MD, MHSA**  
Cabinet Secretary (Acting)  
[david.scrase@hsd.nm.gov](mailto:david.scrase@hsd.nm.gov)  
505-316-5422



**Lea J. Harrison**  
Deputy Secretary of Facilities  
[Lea.harrison@doh.nm.gov](mailto:Lea.harrison@doh.nm.gov)  
505-670-3261



**George D. Morgan**  
Facilities Management Director  
[georged.morgan@doh.nm.gov](mailto:georged.morgan@doh.nm.gov)  
505-660-0350



**Vacant**  
Chief Medical Officer

Sequoyah Adolescent Treatment Center, Albuquerque



**Carmela Sandoval**  
Administrator  
[Carmela.Sandoval@doh.nm.gov](mailto:Carmela.Sandoval@doh.nm.gov)  
505-222-0375

New Mexico Behavioral Health Institute, Las Vegas



**Timothy Shields, PhD**  
Administrator  
[timothy.shields@doh.nm.gov](mailto:timothy.shields@doh.nm.gov)  
505-454-2203

Turquoise Lodge Hospital, Albuquerque



**Jeff LaMure**  
Administrator  
[jeff.lamure@doh.nm.gov](mailto:jeff.lamure@doh.nm.gov)  
505-383-1122

The Meadows at NMBHI, Las Vegas



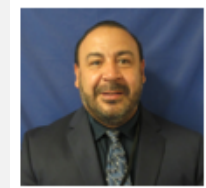
**Michael Slaughter**  
Administrator  
[michael.slaughter@doh.nm.gov](mailto:michael.slaughter@doh.nm.gov)  
505-454-2190

Los Lunas Community Program, Los Lunas



**Michael Gemme**  
Administrator  
[michael.gemme@doh.nm.gov](mailto:michael.gemme@doh.nm.gov)  
505-249-4117

NM Rehabilitation Center, Roswell



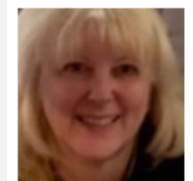
**Matthew Rael**  
Administrator  
[matthew.rael@doh.nm.gov](mailto:matthew.rael@doh.nm.gov)  
575-347-3410

Ft. Bayard Medical Center, Silver City

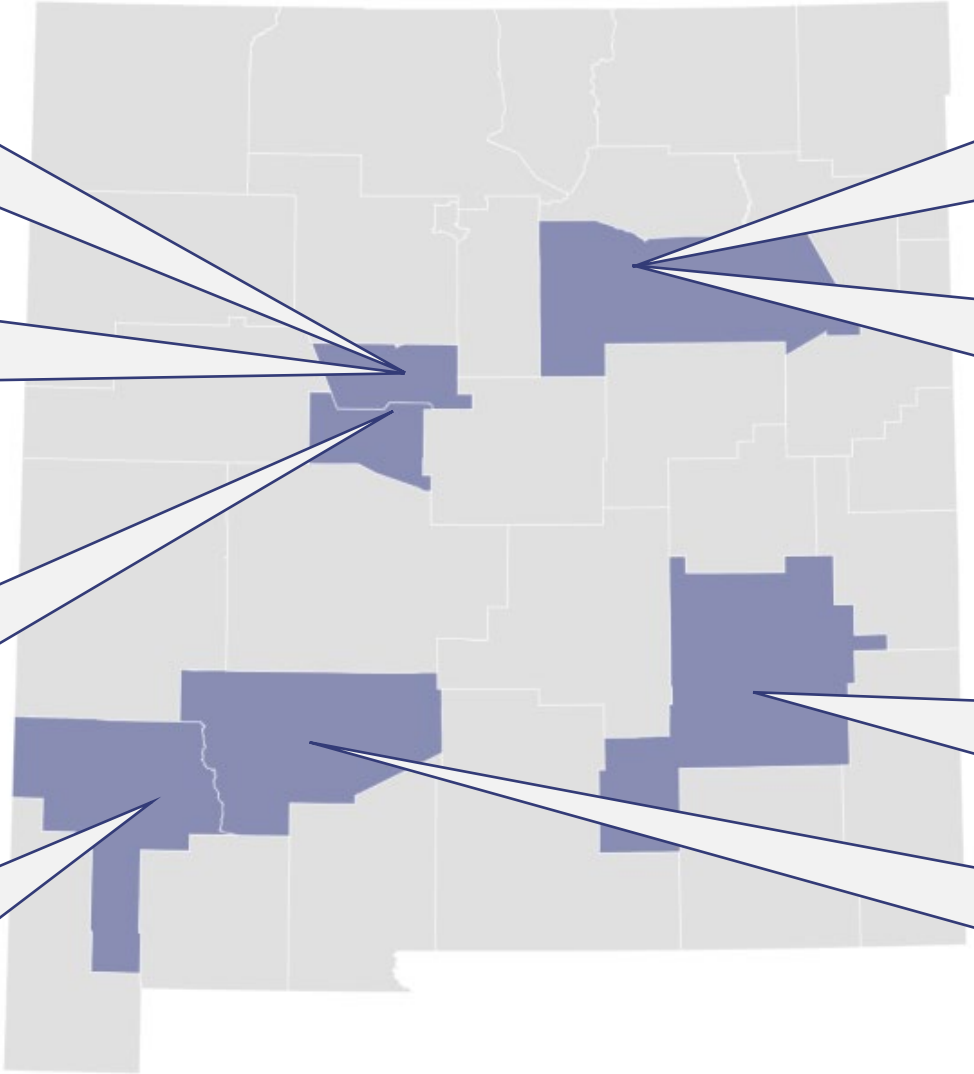


**Todd Winder, MBA, MHA, LNHA**  
Administrator  
[todd.winder@doh.nm.gov](mailto:todd.winder@doh.nm.gov)  
575-537-8604

NM State Veterans Home, Truth or Consequences



**Mary Snyder**  
Administrator (Acting)  
[mary.snyder@doh.nm.gov](mailto:mary.snyder@doh.nm.gov)  
575-952-0441



# SFY24 DOH Budget Request: DDSD

(1,000s)	FY21 Actuals	FY22 Est. Actuals	Original FY23 OPBUD	FY24 REQUEST	\$ DIFFERENCE FY23-24	% Difference FY23-24
General Fund	158,125.5	162,194.2	183,557.9	193,757.9	10,200.0	6%
Other Transfers	7,737.3	8,463.2	9,549.9	9,738.1	188.2	2%
Federal Revenue	0.0	0.0	0.0	0.0	0.0	0%
Other Revenue	307.3	196.2	305.0	184.6	-120.4	-39%
Fund Balance			0.0	0.0	0.0	0%
<b>GRAND TOTAL</b>	<b>166,170.1</b>	<b>170,853.6</b>	<b>193,412.8</b>	<b>203,680.6</b>	<b>10,267.8</b>	<b>5%</b>

200 - PS&EB	14,084.6	14,937.2	14,483.8	15,553.8	1,070.0	7%
300 - Contracts	9,562.6	10,248.8	11,377.1	12,588.9	1,211.8	11%
400 - Other	4,817.0	4,660.2	10,693.5	8,479.5	-2,214.0	-21%
500 - OF Uses	111,955.1	42,825.6	156,858.4	167,058.4	10,200.0	7%
<b>GRAND TOTAL</b>	<b>140,419.3</b>	<b>72,671.8</b>	<b>193,412.8</b>	<b>203,680.6</b>	<b>10,267.8</b>	<b>5%</b>

	FY21 Actuals	FY22 Est Actuals	FY23 OPBUD	FY24 REQUEST
Permanent	91.0	90.0	118.0	96.15
Term	103.0	99.0	86.0	99.0
Temporary	0.0	0.0	0.0	1.0
<b>Total FTE</b>	<b>194.0</b>	<b>189.0</b>	<b>204.0</b>	<b>196.15</b>

Vacancy Rates as of 10/25/22	
# vacant positions	28.0
% positions vacant	15%

# SFY24 Facilities Base Increase Request

(1,000s)

	FY21 Actuals	FY22 Est. Actuals	Original FY23 OPBUD	FY24 REQUEST	\$ DIFFERENCE FY23-24	% Difference FY23-24
General Fund	61,386.8	67,629.7	72,345.5	75,921.6	3,576.10	5%
Other Transfers	6,076.1	8,373.0	6,348.0	6,157.7	-190.3	-3%
Federal Revenue	12,473.0	10,220.6	12,910.9	12,311.4	-599.5	-5%
Other Revenue	65,842.2	60,382.7	92,228.9	93,562.3	1333.4	1%
Fund Balance	0.0	0.0	0.0	0.0	0.0	0%

<b>GRAND TOTAL</b>	<b>145,778.1</b>	<b>146,606.0</b>	<b>183,833.3</b>	<b>187,953.0</b>	<b>4,119.70</b>	<b>2%</b>
--------------------	------------------	------------------	------------------	------------------	-----------------	-----------

200 - PS&EB	107,329.6	105,210.5	134,949.9	139,044.4	4,094.50	3%
300 - Contracts	11,357.6	13,037.6	16,146.6	16,972.6	826.00	5%
400 - Other	25,365.6	23,396.0	32,736.8	31,936.0	-800.80	-2%
500 - OF Uses	0.0	0.0	0.0	0.0	0.0	0%

<b>GRAND TOTAL</b>	<b>144,052.8</b>	<b>141,644.1</b>	<b>183,833.3</b>	<b>187,953.0</b>	<b>4,119.70</b>	<b>2%</b>
--------------------	------------------	------------------	------------------	------------------	-----------------	-----------

	FY21 Actuals	FY22 Est. Actuals	FY2023 OPBUD	FY2024 REQUEST
Permanent	1,983.0	1,911.5	1,911.5	1,905.5
Term	5.0	5.0	5.0	5.0
Temporary	15.0	14.0	14.0	14.0
<b>Total FTE</b>	<b>2,003.0</b>	<b>1,930.5</b>	<b>1,930.5</b>	<b>1,924.5</b>

Vacancy Rates as of 10/25/22	
# vacant positions	653.0
% positions vacant	<b>33%</b>



# SFY24 DOH: Public Health Division

(1,000s)	FY21 Actuals	FY22 Est. Actuals	Original FY23 OPBUD	FY24 REQUEST	\$ DIFFERENCE FY23-24	% Difference FY23-24
General Fund	51,639.4	55,269.8	61,910.5	78,306.9	16,396.4	26%
Other Transfers	14,450.7	16,550.5	17,813.1	20,291.8	2,478.7	14%
Federal Revenue	53,951.6	159,929.9	91,251.8	108,019.8	16,768.0	18%
Other Revenue	36,082.7	37,148.9	42,217.2	46,571.7	4,354.5	10%
Fund Balance	215.5	183.5	0.0	0.0	0.0	0%
<b>GRAND TOTAL</b>	<b>156,339.9</b>	<b>269,082.6</b>	<b>213,192.6</b>	<b>253,190.2</b>	<b>39,997.6</b>	<b>19%</b>

200 - PS&EB	48,275.6	50,768.6	65,430.6	68,816.9	3,386.3	5%
300 - Contracts	38,335.7	103,938.9	59,740.5	83,429.6	23,689.1	40%
400 - Other	63,647.8	70,401.7	87,559.2	100,481.4	12,922.2	15%
500 - OF Uses	462.3	462.3	462.3	462.3	0.0	0%

<b>GRAND TOTAL</b>	<b>150,721.4</b>	<b>225,571.5</b>	<b>213,192.6</b>	<b>253,190.2</b>	<b>39,997.6</b>	<b>19%</b>
--------------------	------------------	------------------	------------------	------------------	-----------------	------------

	FY21 Actuals	FY22 Est. Actuals	FY23 OPBUD	FY24 REQUEST
Permanent	276.5	269.5	272.5	249.15
Term	516.0	513.5	513.5	566.5
Temporary	0.0	0.0	0.0	0.0
<b>Total FTE</b>	<b>792.5</b>	<b>783.0</b>	<b>786.0</b>	<b>815.65</b>

Vacancy Rates as of 10/25/22	
# vacant positions	166
% positions vacant	20%

# SFY24 DOH: Epidemiology and Response Division

(1,000s)

	FY21 Actuals	FY22 Est. Actuals	Original FY23 OPBUD	FY24 REQUEST	\$ DIFFERENCE FY23-24	% Difference FY23-24
General Fund	10,924.7	10,683.2	12,703.9	15,313.1	2,609.2	21%
Other Transfers	638.5	562.1	490.2	873.0	382.8	78%
Federal Revenue	68,723.5	72,339.0	114,063.3	48,798.8	-65,264.5	-57%
Other Revenue	2,215.4	4,211.4	644.1	671.2	27.1	4%
Fund Balance	48.6	32.2	0.0	0.0	0.0	0%
<b>GRAND TOTAL</b>	<b>82,550.7</b>	<b>87,827.9</b>	<b>127,901.5</b>	<b>65,656.1</b>	<b>-62,245.4</b>	<b>-49%</b>

200 - PS&EB	31,441.0	27,909.2	34,214.8	35,816.7	1,601.9	5%
300 - Contracts	34,359.5	30,749.1	75,634.8	20,269.0	-55,365.8	-73%
400 - Other	16,222.3	24,902.5	18,051.9	8,070.4	-9,981.5	-55%
500 - OF Uses	0.0	0.0	0.0	1,500.0	1,500.0	
<b>GRAND TOTAL</b>	<b>82,022.8</b>	<b>83,560.8</b>	<b>127,901.5</b>	<b>65,656.1</b>	<b>-62,245.4</b>	<b>-49%</b>

	FY21 Actuals	FY22 Est. Actuals	FY23 OPBUD	FY24 REQUEST
Permanent	57.0	80.0	90.0	81.15
Term	150.0	208.0	208.0	293.0
Temporary	0.0	0.0	0.0	2.0
<b>Total FTE</b>	<b>207.0</b>	<b>288.0</b>	<b>298.0</b>	<b>376.15</b>

Vacancy Rates as of 10/25/22	
# vacant positions	185.0
% positions vacant	47%

# FY24 DOH: Division of Health Improvement

(1,000s)

	FY21 Actuals	FY22 Est. Actuals	Original FY23 OPBUD	FY24 REQUEST	\$ DIFFERENCE FY23-24	% Difference FY23-24
General Fund	5,956.2	6,135.0	7,305.6	9,716.3	2,410.7	33%
Other Transfers	3,874.3	4,688.0	5,498.4	5,498.4	0.0	0%
Federal Revenue	1,922.4	2,940.2	2,650.0	2,876.4	226.4	9%
Other Revenue	1,777.6	1,910.7	2,056.0	1,913.0	-143.0	-7%
Fund Balance	0.0	0.0	0.0	0.0	0.0	0%

<b>GRAND TOTAL</b>	<b>13,530.5</b>	<b>15,673.9</b>	<b>17,510.0</b>	<b>20,004.1</b>	<b>2,494.1</b>	<b>14%</b>
--------------------	-----------------	-----------------	-----------------	-----------------	----------------	------------

200 - PS&EB	11,683.2	13,242.6	14,772.4	17,047.4	2,275.0	15%
300 - Contracts	271.1	777.9	1,003.0	922.5	-80.5	-8%
400 - Other	1,574.0	1,464.6	1,734.6	2,034.2	299.6	17%
500 - OF Uses	0.0	0.0	0.0	0.0	0.0	0%

<b>GRAND TOTAL</b>	<b>13,528.3</b>	<b>15,485.1</b>	<b>17,510.0</b>	<b>20,004.1</b>	<b>2,494.1</b>	<b>14%</b>
--------------------	-----------------	-----------------	-----------------	-----------------	----------------	------------

	FY21 Actuals	FY22 Est. Actuals	FY23 OPBUD	FY24 REQUEST
Permanent	61.0	56.0	71.0	82.15
Term	122.0	119.0	103.0	120.0
Temporary	0.0	0.0	0.0	0.0
<b>Total FTE</b>	<b>183.0</b>	<b>175.0</b>	<b>174.0</b>	<b>202.15</b>

Vacancy Rates as of 10/25/22	
# vacant positions	29.0
% positions vacant	16%

# SFY24 DOH: Scientific Laboratory Division

(1,000s)

	FY21 Actuals	FY22 Est. Actuals	Original FY23 OPBUD	FY24 REQUEST	\$ DIFFERENCE FY23-24	% Difference FY23-24
General Fund	8,004.6	7,859.9	8,896.1	9,071.1	175.00	2%
Other Transfers	656.9	704.6	777.0	787.4	10.4	1%
Federal Revenue	4,466.4	5,439.3	4,608.4	5,143.7	535.3	12%
Other Revenue	1,677.0	1,904.8	1,674.5	1,826.0	151.5	9%
Fund Balance		0.0	0.0	0.0	0.0	0%



<b>GRAND TOTAL</b>	<b>14,804.9</b>	<b>15,908.6</b>	<b>15,956.0</b>	<b>16,828.2</b>	<b>872.20</b>	<b>5%</b>
--------------------	-----------------	-----------------	-----------------	-----------------	---------------	-----------

200 - PS&EB	8,777.4	8,744.9	10,254.5	10,868.6	614.10	6%
300 - Contracts	600.7	301.0	562.2	861.7	299.5	53%
400 - Other	5,308.1	6,599.3	5,139.3	5,097.9	-41.4	-1%
500 - OF Uses	0.0	0.0	0.0	0.0	0.0	0%



<b>GRAND TOTAL</b>	<b>14,686.2</b>	<b>15,645.2</b>	<b>15,956.0</b>	<b>16,828.2</b>	<b>872.20</b>	<b>5%</b>
--------------------	-----------------	-----------------	-----------------	-----------------	---------------	-----------

	FY21 Actuals	FY22 Est. Actuals	FY23 OPBUD	FY24 REQUEST
Permanent	85.0	82.0	121.0	81.0
Term	49.0	108.0	70.0	96.0
Temporary	0.0	0.0	0.0	0.0
<b>Total FTE</b>	<b>134.0</b>	<b>190.0</b>	<b>191.0</b>	<b>177.0</b>

Vacancy Rates as of 10/25/22	
# vacant positions	66.0
% positions vacant	35%

# SFY24 DOH: Administrative Services

(1,000s)

	FY21 Actuals	FY22 Est. Actuals	Original FY23 OPBUD	FY24 REQUEST	\$ DIFFERENCE FY23-24	% Difference FY23-24
General Fund	6,234.1	6,145.5	6,502.8	10,913.3	4,410.5	68%
Other Transfers	62,749.5	246,765.6	1,118.9	564.3	-554.6	-50%
Federal Revenue	10,305.8	11,766.4	9,871.8	9,909.8	38.0	0%
Other Revenue	155.4	15.6	0.0	0.0	0.0	0%
Fund Balance	0.0	0.0	0.0	0.0	0.0	0%
<b>GRAND TOTAL</b>	<b>79,444.8</b>	<b>264,693.1</b>	<b>17,493.5</b>	<b>21,387.4</b>	<b>3,893.9</b>	<b>22%</b>

200 - PS&EB	12,941.1	13,411.0	14,836.8	15,334.3	497.5	3%
300 - Contracts	25,885.1	218,273.4	1,066.8	4,507.8	3,441.0	323%
400 - Other	38,229.1	25,448.9	1,589.9	1,545.3	-44.6	-3%
500 - OF Uses	0.0	0.0	0.0	0.0	0.0	0%
<b>GRAND TOTAL</b>	<b>77,055.3</b>	<b>257,133.3</b>	<b>17,493.5</b>	<b>21,387.4</b>	<b>3,893.9</b>	<b>22%</b>

Permanent	163.0	163.0	164.0	159.15
Term	48.0	46.0	43.0	30.0
Temporary	0.0	0.0	2.0	1.0
<b>Total FTE</b>	<b>211.0</b>	<b>209.0</b>	<b>209.0</b>	<b>190.15</b>

Administrative Services		Vacancy Rates as of 10/25/22	
Office of the Secretary		# vacant positions	55.0
Human Resource Bureau		% positions vacant	25%
IT Services Division			
ASD: Finance, budgets, accounting, audits, and grants			
Office of General Counsel			



*Investing for tomorrow, delivering today.*

1190 S. St. Francis Drive • Santa Fe, NM 87505 • Phone: 505-827-2613 • Fax: 505-827-2530 • nmhealth.org



# SFY24 DOH: Medical Cannabis Program

(1,000s)

	FY21 Actuals	FY22 Est. Actuals	Original FY23 OPBUD	FY24 REQUEST	\$ DIFFERENCE FY23-24	% Difference FY23-24
General Fund	0.0	0.0	0.0	0.0	0.0	0%
Other Transfers	0.0	0.0	2,516.5	2,516.5	0.0	0%
Federal Revenue	0.0	0.0	0.0	0.0	0.0	0%
Other Revenue	5,422.0	2,516.5	0.0	0.0	0.0	0%
Fund Balance	0.0	0.0	0.0	0.0	0.0	0%
<b>GRAND TOTAL</b>	<b>5,422.0</b>	<b>2,516.5</b>	<b>2,516.5</b>	<b>2,516.5</b>	<b>0.0</b>	<b>0%</b>

200 - PS&EB	2,681.7	1,451.8	1,609.0	1,572.3	-36.7	-2%
300 - Contracts	1,126.4	592.1	570.5	570.5	0.0	0%
400 - Other	664.6	265.1	337.0	373.7	36.7	11%
500 - OF Uses	0.0	0.0	0.0	0.0	0.0	0%
<b>GRAND TOTAL</b>	<b>4,472.7</b>	<b>2,309.0</b>	<b>2,516.5</b>	<b>2,516.5</b>	<b>0.0</b>	<b>0%</b>

Permanent	0.0	0.0	3.0	0.25
Term	28.0	18.0	15.0	18.0
Temporary	0.0	0.0	0.0	0.0
<b>Total FTE</b>	<b>28.0</b>	<b>18.0</b>	<b>18.0</b>	<b>18.25</b>

Vacancy Rates as of 10/25/22	
# vacant positions	0
% positions vacant	0%

Medical Cannabis Program
Medical Cannabis Patient Services



*Investing for tomorrow, delivering today.*

1190 S. St. Francis Drive • Santa Fe, NM 87505 • Phone: 505-827-2613 • Fax: 505-827-2530 • nmhealth.org

