

AN ACT  
RELATING TO SUBSTANCE ABUSE; PROVIDING FOR TREATMENT,  
PREVENTION AND INTERVENTION EXPANSION; MAKING  
APPROPRIATIONS; DECLARING AN EMERGENCY.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

Section 1. TEMPORARY PROVISION--SUBSTANCE ABUSE  
TREATMENT EXPANSION.--

A. The department of health shall:

(1) develop and implement regionally coordinated addiction intervention services for addicted persons who voluntarily seek treatment and their families; coordinate the level of care to meet their treatment needs and follow addicted persons coming out of the justice system or who are referred by the justice system as an alternative to criminal penalties;

(2) increase substance abuse treatment capacity and assist regions in developing treatment infrastructure to provide regional and local access to a full range of services to make effective treatment available on request; provided that this shall be accomplished by a phased-in plan over a three-year period, with phase one implementation in fiscal year 2002, to address regional disparities in service availability and increase client capacity in proportion to funding appropriations each year;

(3) expand capacity of regionally

coordinated comprehensive integrated treatment services that represent effective, science-based, state-of-the-art practices in substance abuse treatment and that provide for the full continuum of graduated treatment options and levels of care as defined by the American society of addiction medicine. Clients shall be clinically assessed through standardized assessments to determine the most appropriate level of care for their level of acuity. Services are to include both clinical and pharmacological treatment interventions and provide for regionally based treatment continua;

(4) provide substance abuse treatment services to adults requesting treatment and their families, within appropriated funding limitations. The department shall adopt financial eligibility criteria and a sliding fee schedule for those who require treatment services based on clinical assessment and who are financially in need, are uninsured for substance abuse treatment services or who do not meet priority poverty levels. The department shall assist persons eligible for medicaid or other insurance coverage of substance abuse treatment services in accessing provider benefits;

(5) in collaboration with the corrections department, provide substance abuse treatment and community reintegration programs and services to persons under probation and parole supervision through the regionally

coordinated treatment system and community corrections as appropriate to client needs and service locality, within appropriated funding limitations, to establish referral protocols and enhance community-based systems for this population through service system integration between the corrections department and the department of health;

(6) develop and implement harm reduction initiatives that reduce death and mortality from drug addiction and improve the quality of life of addicted persons, including opiate maintenance therapy in jails and prisons and expansion of methadone maintenance and other pharmacological therapies, to provide greater statewide access to persons addicted to drugs;

(7) in partnership with foundations, educational institutions and the private sector, develop and implement research programs that develop science-based models of treatment and harm reduction services that will advance the practice of addiction medicine and practice;

(8) expand and enhance the quality of services and the capacity of the regionally coordinated addiction treatment provider system through the development of an addiction medicine consultation network incorporating use of telemedicine to provide access to addiction psychiatry specialists by rural providers serving persons with dually diagnosed addiction and mental illness disorders;

(9) with its regionally coordinated substance abuse treatment system, provide services that meet the highest standards of addiction medicine practice and provide training to develop that capacity in the provider system;

(10) conduct a statewide, regionally based needs assessment in cooperation with the behavioral health advisory board located in each region, community corrections advisory boards and committees and the public and citizens of each region during fiscal year 2002 to identify service gaps and capacity needs in each region of the state; and develop a plan of phased-in funding of the service delivery system to achieve the goal of substance abuse treatment on request with a full range of graduated treatment options in each of the state's five regions. The plan shall address the necessary percentage of funding required each year, beginning with fiscal year 2003, to achieve appropriate infrastructure and service capacity expansion to meet the needs for the state; and

(11) expand statewide science-based substance abuse prevention programs for youth.

B. The department of health and its regional provider system shall coordinate with other state and local service agencies, such as the human services department, to seek temporary assistance for needy families and medicaid as appropriate to client need, pursuant to the New Mexico Works

Act.

C. The department of health, in collaboration with the corrections department, shall establish referral protocols for regionally coordinated treatment services for persons leaving corrections programs and requiring continuing substance abuse treatment.

D. For the purpose of providing substance abuse treatment and community reintegration programs, minimizing repeat offenses and prison time served, the corrections department, in consultation with the department of health, shall implement a residential evaluation and treatment center to be considered as an alternative correctional sanction and sentencing alternatives at an existing corrections department prison facility for selected nonviolent prisoners and parole violators. The corrections department shall incorporate substance abuse treatment with community reintegration programs as an alternative to prison for selected offenders with pretrial, probation, parole or technical parole violation status. The purposes of the programs are to identify and effectively trace substance abusers in the criminal justice system and to provide effective community reintegration programs designed to minimize the potential for repeat offenses and prison time served.

E. The corrections department, in consultation with the department of health, shall provide residential

treatment programs for selected females released and paroled from prison who are diagnosed with a mental illness and substance abuse problems to prepare them for reintegration into community living.

F. The corrections department, in consultation with the department of health, shall provide for a residential treatment program for selected females released or paroled from prison and their minor children under the age of eleven years, to provide a continuum of addiction services care and effective family functional development for reintegration into community living.

Section 2. APPROPRIATIONS. --

A. Five million dollars (\$5,000,000) is appropriated from the general fund to the department of health behavioral health treatment program for expenditure in fiscal years 2001 and 2002 to expand and implement regionally based substance abuse intervention, treatment and harm reduction initiatives. The department of health may use the appropriation to match any federal funding available for this purpose. Any unexpended or unencumbered balance remaining at the end of fiscal year 2002 shall revert to the general fund.

B. One million dollars (\$1,000,000) is appropriated from the general fund to the department of health for expenditure in fiscal years 2001 and 2002 to provide coordinated substance abuse and treatment services

and community reintegration programs, collaboratively planned with the corrections department, for persons under supervision and parole of the corrections department. Any unexpended or unencumbered balance remaining at the end of fiscal year 2002 shall revert to the general fund.

C. One million eight hundred thousand dollars (\$1,800,000) is appropriated from the general fund to the department of health for expenditure in fiscal years 2001 and 2002 to expand statewide science-based substance abuse prevention programs for youth. Any unexpended or unencumbered balance remaining at the end of fiscal year 2002 shall revert to the general fund.

D. Two million dollars (\$2,000,000) is appropriated from the general fund to the corrections department for expenditure in fiscal years 2001 and 2002 for substance abuse treatment to include the following, and any unexpended or unencumbered balance remaining at the end of fiscal year 2002 shall revert to the general fund:

(1) five hundred thousand dollars (\$500,000) to implement a residential evaluation and treatment center at an existing corrections department prison as an alternative correctional sanction sentencing alternative for selected nonviolent prisoners and parole violators;

(2) five hundred thousand dollars (\$500,000) to provide residential treatment for females

released from prison who are dually diagnosed with mental illness and substance abuse to transition and reintegrate them into the community; and

(3) one million dollars (\$1,000,000) to provide residential treatment and family and community reintegration services for the women living with their children and for female offenders who are paroled or released with substance abuse problems and their children under eleven years of age.

Section 3. EMERGENCY. --It is necessary for the public peace, health and safety that this act take effect immediately. \_\_\_\_\_