

underscored material = new  
[bracketed material] = delete

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25

SENATE BILL 238

**49TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2009**

INTRODUCED BY

Gerald P. Ortiz y Pino

AN ACT

RELATING TO BEHAVIORAL HEALTH; AUTHORIZING THE INTERAGENCY  
BEHAVIORAL HEALTH PURCHASING COLLABORATIVE TO CONTRACT DIRECTLY  
WITH BEHAVIORAL HEALTH SERVICE PROVIDERS OR OPERATE BEHAVIORAL  
HEALTH SERVICES.

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

Section 1. Section 9-7-6.4 NMSA 1978 (being Laws 2004,  
Chapter 46, Section 8, as amended) is amended to read:

"9-7-6.4. INTERAGENCY BEHAVIORAL HEALTH PURCHASING  
COLLABORATIVE.--

A. There is created the "interagency behavioral  
health purchasing collaborative", consisting of the secretaries  
of aging and long-term services; Indian affairs; human  
services; health; corrections; children, youth and families;  
finance and administration; workforce solutions; public

underscored material = new  
[bracketed material] = delete

1 education; and transportation; the directors of the  
2 administrative office of the courts; the New Mexico mortgage  
3 finance authority; the governor's commission on disability; the  
4 developmental disabilities planning council; the instructional  
5 support and vocational [~~rehabilitation~~] education division of  
6 the public education department; and the New Mexico health  
7 policy commission; and the governor's health policy  
8 coordinator, or their designees. The collaborative shall be  
9 chaired by the secretary of human services with the respective  
10 secretaries of health and children, youth and families  
11 alternating annually as co-chairs.

12 B. The collaborative shall meet regularly and at  
13 the call of either co-chair and shall:

14 (1) identify behavioral health needs  
15 statewide, with an emphasis on that hiatus between needs and  
16 services set forth in the department of health's gap analysis  
17 and in ongoing needs assessments, and develop a master plan for  
18 statewide delivery of services;

19 (2) give special attention to regional  
20 differences, including cultural, rural, frontier, urban and  
21 border issues;

22 (3) inventory all expenditures for behavioral  
23 health, including mental health and substance abuse;

24 (4) plan, design and direct a statewide  
25 behavioral health system, ensuring both availability of

.174840.1

underscored material = new  
[bracketed material] = delete

1 services and efficient use of all behavioral health funding,  
2 taking into consideration funding appropriated to specific  
3 affected departments; and

4 (5) contract [~~for operation of one or more~~]  
5 with behavioral health [entities] service providers or operate  
6 a network of behavioral health services to ensure availability  
7 of services throughout the state.

8 C. The plan for delivery of behavioral health  
9 services shall include specific service plans to address the  
10 needs of infants, children, adolescents, adults and seniors, as  
11 well as to address workforce development and retention and  
12 quality improvement issues. The plan shall be revised every  
13 two years and shall be adopted by the department of health as  
14 part of the statewide health plan.

15 D. The plan shall take the following principles  
16 into consideration, to the extent practicable and within  
17 available resources:

18 (1) services should be individually centered  
19 and family focused based on principles of individual capacity  
20 for recovery and resiliency;

21 (2) services should be delivered in a  
22 culturally responsive manner in a home or community-based  
23 setting, where possible;

24 (3) services should be delivered in the least  
25 restrictive and most appropriate manner;

.174840.1

underscored material = new  
[bracketed material] = delete

1 (4) individualized service planning and case  
2 management should take into consideration individual and family  
3 circumstances, abilities and strengths and be accomplished in  
4 consultation with appropriate family, caregivers and other  
5 persons critical to the individual's life and well-being;

6 (5) services should be coordinated,  
7 accessible, accountable and of high quality;

8 (6) services should be directed by the  
9 individual or family served to the extent possible;

10 (7) services may be consumer or family  
11 provided, as defined by the collaborative;

12 (8) services should include behavioral health  
13 promotion, prevention, early intervention, treatment and  
14 community support; and

15 (9) services should consider regional  
16 differences, including cultural, rural, frontier, urban and  
17 border issues.

18 E. The collaborative shall seek and consider  
19 suggestions of Native American representatives from Indian  
20 nations, tribes, pueblos and the urban Indian population,  
21 located wholly or partially within New Mexico, in the  
22 development of the plan for delivery of behavioral health  
23 services.

24 F. Pursuant to the State Rules Act, the  
25 collaborative shall adopt rules through the human services

.174840.1

underscored material = new  
[bracketed material] = delete

1 department for:

2 (1) standards of delivery for behavioral  
3 health services provided through contracted behavioral health  
4 ~~[entities]~~ service providers and state, local or regionally  
5 operated behavioral health services, including:

6 (a) quality management and improvement;

7 (b) performance measures;

8 (c) accessibility and availability of  
9 services;

10 (d) utilization management;

11 (e) credentialing of providers;

12 (f) rights and responsibilities of  
13 consumers and providers;

14 (g) clinical evaluation and treatment  
15 and supporting documentation; and

16 (h) confidentiality of consumer records;  
17 and

18 (2) approval of contracts and contract  
19 amendments by the collaborative, including public notice of the  
20 proposed final contract.

21 G. The collaborative shall, through the human  
22 services department, submit a separately identifiable  
23 consolidated behavioral health budget request. The  
24 consolidated behavioral health budget request shall account for  
25 requested funding for the behavioral health services ~~[program]~~

.174840.1

underscored material = new  
[bracketed material] = delete

1 programs at the human services department and any other  
2 requested funding for behavioral health services from agencies  
3 identified in Subsection A of this section that will be used  
4 pursuant to Paragraph (5) of Subsection B of this section. Any  
5 contract proposed, negotiated or entered into by the  
6 collaborative is subject to the provisions of the Procurement  
7 Code.

8 H. The collaborative shall, with the consent of the  
9 governor, appoint a "director of the collaborative". The  
10 director is responsible for the coordination of day-to-day  
11 activities of the collaborative, including the coordination of  
12 staff from the collaborative member agencies.

13 I. The collaborative shall provide a quarterly  
14 report to the legislative finance committee on performance  
15 outcome measures. The collaborative shall submit an annual  
16 report to the legislative finance committee and the interim  
17 legislative health and human services committee that provides  
18 information on:

19 (1) the collaborative's progress toward  
20 achieving its strategic plans and goals;

21 (2) the collaborative's performance  
22 information, including contractors and providers; and

23 (3) the number of people receiving services,  
24 the most frequently treated diagnoses, expenditures by type of  
25 service and other aggregate claims data relating to services

.174840.1

underscored material = new  
[bracketed material] = delete

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25

rendered and program operations."

- 7 -