

1 AN ACT

2 RELATING TO GOVERNMENT ORGANIZATION; CLARIFYING STATUTORY  
3 PROVISIONS PERTAINING TO CHILD CARE FACILITIES; CLARIFYING  
4 THE EARLY CHILDHOOD EDUCATION AND CARE DEPARTMENT'S  
5 RESPONSIBILITIES FOR INFANTS, TODDLERS AND CHILDREN WITH  
6 DEVELOPMENTAL DELAYS; AUTHORIZING THE EARLY CHILDHOOD  
7 EDUCATION AND CARE DEPARTMENT TO PERFORM CRIMINAL HISTORY  
8 INVESTIGATIONS FOR CHILD CARE FACILITY LICENSURE AND OTHER  
9 PURPOSES; REQUIRING CONFIDENTIALITY; INCLUDING THE EARLY  
10 CHILDHOOD EDUCATION AND CARE DEPARTMENT IN THE MEMBERSHIP OF  
11 RELEVANT BOARDS; PROVIDING A PENALTY.

12  
13 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

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

16 "9-7-6.4. INTERAGENCY BEHAVIORAL HEALTH PURCHASING  
17 COLLABORATIVE.--

18 A. The "interagency behavioral health purchasing  
19 collaborative" is created, consisting of the secretaries of  
20 aging and long-term services; Indian affairs; human services;  
21 health; corrections; children, youth and families; early  
22 childhood education and care; finance and administration;  
23 workforce solutions; public education; and transportation;  
24 the directors of the administrative office of the courts; the  
25 New Mexico mortgage finance authority; the governor's

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

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

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

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

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

23 (4) plan, design and direct a statewide  
24 behavioral health system, ensuring both availability of  
25 services and efficient use of all behavioral health funding,

1 taking into consideration funding appropriated to specific  
2 affected departments; and

3 (5) contract for operation of one or more  
4 behavioral health entities to ensure availability of services  
5 throughout the state.

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

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

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

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

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

24 (4) individualized service planning and case  
25 management should take into consideration individual and

1 family circumstances, abilities and strengths and be  
2 accomplished in consultation with appropriate family,  
3 caregivers and other persons critical to the individual's  
4 life and well-being;

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

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

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

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

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

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

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

1 (1) standards of delivery for behavioral  
2 health services provided through contracted behavioral health  
3 entities, including:

4 (a) quality management and improvement;  
5 (b) performance measures;  
6 (c) accessibility and availability of  
7 services;

8 (d) utilization management;  
9 (e) credentialing of providers;  
10 (f) rights and responsibilities of  
11 consumers and providers;

12 (g) clinical evaluation and treatment  
13 and supporting documentation; and

14 (h) confidentiality of consumer  
15 records; and

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

19 G. The collaborative shall, through the human  
20 services department, submit a separately identifiable  
21 consolidated behavioral health budget request. The  
22 consolidated behavioral health budget request shall account  
23 for requested funding for the behavioral health services  
24 program at the human services department and any other  
25 requested funding for behavioral health services from

1 agencies identified in Subsection A of this section that will  
2 be used pursuant to Paragraph (5) of Subsection B of this  
3 section. Any contract proposed, negotiated or entered into  
4 by the collaborative is subject to the provisions of the  
5 Procurement Code.

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

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

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

19 (2) the collaborative's performance  
20 information, including contractors and providers; and

21 (3) the number of people receiving services,  
22 the most frequently treated diagnoses, expenditures by type  
23 of service and other aggregate claims data relating to  
24 services rendered and program operations."

25 SECTION 2. Section 9-29-1 NMSA 1978 (being Laws 2019,

1 Chapter 48, Section 1) is amended to read:

2 "9-29-1. SHORT TITLE.--Chapter 9, Article 29 NMSA 1978  
3 may be cited as the "Early Childhood Education and Care  
4 Department Act"."

5 SECTION 3. Section 9-29-8 NMSA 1978 (being Laws 2019,  
6 Chapter 48, Section 8) is amended to read:

7 "9-29-8. DEPARTMENT--DUTIES.--The department shall:

8 A. develop priorities for department programs and  
9 the use of department resources based on state policy,  
10 national best-practice standards, evidence-based  
11 interventions and practices and local considerations and  
12 priorities;

13 B. coordinate and align an early childhood  
14 education and care system to:

15 (1) include the family, infant, toddler  
16 program, child care, pre-kindergarten, early  
17 pre-kindergarten, home visitation, early head start, head  
18 start, early childhood special education and early  
19 intervention and family support; and

20 (2) provide New Mexico families with  
21 consistent access to appropriate early childhood care and  
22 education services;

23 C. administer the child care assistance, child  
24 care facility licensing and registered child care home  
25 programs;

1           D. develop standards for the department-sponsored  
2 delivery of early childhood programs;

3           E. cooperate with other state agencies that affect  
4 children to develop common contracting procedures and service  
5 definitions and a uniform system of access to early childhood  
6 programs;

7           F. develop reimbursement criteria for child care  
8 facilities and home providers licensed by the department;

9           G. conduct biennial assessments of child care or  
10 early learning service gaps and needs and establish plans to  
11 address those service gaps and needs;

12           H. conduct pre-employment fingerprint-based  
13 national criminal background checks on all department  
14 employees, including those whose employment by the department  
15 arises as a result of the transfer provisions of Laws 2019,  
16 Chapter 48, Section 34, and on staff members and volunteers  
17 of department-contracted providers whose jobs involve direct  
18 contact with children participating in programs delivered by  
19 the department or those providers;

20           I. provide a system of seamless transition from  
21 prenatal to early childhood programs to kindergarten;

22           J. provide consumer education and accessibility to  
23 early childhood care and education programs;

24           K. advance quality early childhood education and  
25 care programs to support the development of children to

1 prepare them for success in school;

2 L. ensure effective collaboration with state and  
3 local child welfare programs and early childhood health and  
4 behavioral health programs;

5 M. develop and manage effective data systems to  
6 support the necessary functions of a coordinated program;

7 N. develop an aligned system of workforce  
8 development for early childhood professionals; and

9 O. promote culturally and linguistically  
10 appropriate programming and provide equal education and care  
11 opportunities to non-English speaking families."

12 SECTION 4. A new section of the Early Childhood  
13 Education and Care Department Act is enacted to read:

14 "CRIMINAL HISTORY INVESTIGATIONS--PROCEDURES--  
15 CONFIDENTIALITY--VIOLATION--PENALTY.--

16 A. To investigate the suitability of an applicant  
17 for licensure or registration as a child care facility or  
18 child care home programs or for employment or volunteering at  
19 a licensed child care facility or registered child care home  
20 program, including any facility or program that has primary  
21 custody of infants, toddlers and children for twenty hours or  
22 more per week, the department shall have access to criminal  
23 history records information furnished by the department of  
24 public safety and the federal bureau of investigation,  
25 subject to any restrictions imposed by federal law.

1           B. An applicant for a license or registration or  
2 for employment or volunteering shall undergo a state and  
3 national criminal history records check, and the applicant  
4 shall submit an electronic set of fingerprints to the  
5 department of public safety for that purpose. The department  
6 of public safety shall conduct a check of state criminal  
7 history records and forward the fingerprints to the federal  
8 bureau of investigation for a national criminal history  
9 records check to determine the existence and content of  
10 records of convictions and arrests in this state or other law  
11 enforcement jurisdictions and to generate a criminal history  
12 records check in accordance with rules of the department of  
13 public safety and regulations of the federal bureau of  
14 investigation. The department of public safety shall review  
15 the information obtained from the criminal history records  
16 check and shall compile and provide that information to the  
17 early childhood education and care department. The early  
18 childhood education and care department shall use the  
19 information to investigate and determine whether an applicant  
20 is qualified to hold a license or an employment or volunteer  
21 position. The department shall promulgate rules for the  
22 investigation and determination of qualifications.

23           C. Criminal history information obtained by the  
24 department is confidential and shall be used only for the  
25 purpose of determining the suitability for licensure,

1 employment or volunteer service and shall not be disclosed to  
2 anyone other than public employees directly involved in the  
3 decision affecting the applicant.

4 D. A person who releases or discloses criminal  
5 history records or information contained in those records in  
6 violation of the provisions of this section is guilty of a  
7 misdemeanor and shall be sentenced in accordance with the  
8 provisions of Section 31-19-1 NMSA 1978."

9 SECTION 5. Section 24-1-2 NMSA 1978 (being Laws 1973,  
10 Chapter 359, Section 2, as amended) is amended to read:

11 "24-1-2. DEFINITIONS.--As used in the Public Health  
12 Act:

13 A. "condition of public health importance" means  
14 an infection, a disease, a syndrome, a symptom, an injury or  
15 other threat that is identifiable on an individual or  
16 community level and can reasonably be expected to lead to  
17 adverse health effects in the community;

18 B. "crisis triage center" means a health facility  
19 that:

20 (1) is licensed by the department of health;

21 and

22 (2) provides stabilization of behavioral  
23 health crises and may include residential and nonresidential  
24 stabilization;

25 C. "department" means:

1 (1) the department of health; or  
2 (2) the children, youth and families  
3 department as to residential treatment centers that serve  
4 persons up to twenty-one years of age, community mental  
5 health centers that serve only persons up to twenty-one years  
6 of age, day treatment centers that serve persons up to  
7 twenty-one years of age, shelter care homes and those  
8 outpatient facilities that are also community-based  
9 behavioral health facilities serving only persons up to  
10 twenty-one years of age;

11 D. "director" means the secretary;

12 E. "health care provider" means a person licensed  
13 to provide health care in the ordinary course of business,  
14 except as otherwise defined in the Public Health Act;

15 F. "health facility" means a public hospital,  
16 profit or nonprofit private hospital, general or special  
17 hospital, outpatient facility, crisis triage center,  
18 freestanding birth center, adult daycare facility, nursing  
19 home, intermediate care facility, assisted living facility,  
20 boarding home not under the control of an institution of  
21 higher learning, child care facility, shelter care home,  
22 diagnostic and treatment center, rehabilitation center,  
23 infirmary, community mental health center that serves both  
24 children and adults or adults only, residential treatment  
25 center that serves persons up to twenty-one years of age,

1 community mental health center that serves only persons up to  
2 twenty-one years of age and day treatment center that serves  
3 persons up to twenty-one years of age or a health service  
4 organization operating as a freestanding hospice or a home  
5 health agency. The designation of these entities as health  
6 facilities is only for the purposes of definition in the  
7 Public Health Act and does not imply that a freestanding  
8 hospice or a home health agency is considered a health  
9 facility for the purposes of other provisions of state or  
10 federal laws. "Health facility" also includes those  
11 facilities that, by federal regulation, must be licensed by  
12 the state to obtain or maintain full or partial, permanent or  
13 temporary federal funding. It does not include the offices  
14 and treatment rooms of licensed private practitioners;

15 G. "screening" means a preliminary procedure,  
16 including a test or examination, that:

- 17 (1) may require further investigation; and  
18 (2) can identify individuals with  
19 unrecognized health risk factors or asymptomatic disease  
20 conditions in populations;

21 H. "secretary" means:

- 22 (1) the secretary of health;  
23 (2) the secretary of children, youth and  
24 families as to residential treatment centers that serve  
25 persons up to twenty-one years of age, community mental

1 health centers that serve only persons up to twenty-one years  
2 of age, day treatment centers that serve persons up to  
3 twenty-one years of age, shelter care homes and those  
4 outpatient facilities that are also community-based  
5 behavioral health facilities serving only persons up to  
6 twenty-one years of age; or

7 (3) the secretary of early childhood  
8 education and care for child care facilities; and

9 I. "test" means any diagnostic or investigative  
10 analysis or medical procedure that determines the presence  
11 of, absence of or exposure to a condition of public health  
12 importance or its precursor in an individual."

13 SECTION 6. Section 28-10-1 NMSA 1978 (being Laws 1973,  
14 Chapter 349, Section 1, as amended) is amended to read:

15 "28-10-1. GOVERNOR'S COMMISSION ON DISABILITY.--

16 A. The "governor's commission on disability" is  
17 created, consisting of sixteen members, nine of whom shall be  
18 appointed by the governor. The seven remaining members shall  
19 be the director of the vocational rehabilitation division of  
20 the public education department, the secretary of workforce  
21 solutions or the secretary's designee, the director of the  
22 behavioral health services division of the human services  
23 department, the secretary of children, youth and families or  
24 the secretary's designee, the secretary of early childhood  
25 education and care or the secretary's designee, the secretary

1 of aging and long-term services or the secretary's designee  
2 and the secretary of human services or the secretary's  
3 designee. Initially, three members shall be appointed for  
4 terms ending December 31, 1978, three members for terms  
5 ending December 31, 1980 and three members for terms ending  
6 December 31, 1982. Thereafter, appointments shall be for six  
7 years expiring on December 31 of even-numbered years.

8 Appointed members shall be appointed from different  
9 geographic areas of the state and from the major disability  
10 services in the state. Appointed members shall include  
11 persons with disabilities, representatives of government and  
12 private enterprise, parents or guardians of persons with  
13 disabilities and professionals in, or those who are  
14 interested in, service for persons with disabilities. Not  
15 more than five of the members appointed by the governor shall  
16 be of the same political party.

17 B. A majority of the members of the commission  
18 constitutes a quorum for the transaction of business. The  
19 commission shall meet at least twice a year and shall  
20 annually elect a chair and a vice chair.

21 C. The commission shall be primarily concerned  
22 with those persons with disabilities who have a condition  
23 that, regardless of its physical or mental origin,  
24 constitutes a substantial occupational disadvantage."

1 Chapter 50, Section 4, as amended) is amended to read:

2 "28-16A-4. DEVELOPMENTAL DISABILITIES COUNCIL--  
3 CREATION--MEMBERSHIP--TERMS.--

4 A. The "developmental disabilities council" is  
5 created in accordance with the federal Developmental  
6 Disabilities Assistance and Bill of Rights Act. The council  
7 shall be an adjunct agency as provided in the Executive  
8 Reorganization Act.

9 B. The council shall consist of no fewer than  
10 twenty-six members, at least sixty percent of whom shall be:

11 (1) persons with developmental disabilities;  
12 (2) parents or legal guardians of children  
13 with developmental disabilities; or

14 (3) immediate relatives or guardians of  
15 adults with mentally impairing developmental disabilities who  
16 cannot advocate for themselves.

17 C. Of the sixty percent of members described in  
18 Subsection B of this section, one-third shall be persons with  
19 developmental disabilities, one-third shall be members  
20 described in Paragraphs (2) and (3) of Subsection B of this  
21 section and one-third shall be a combination of members  
22 described in Subsection B of this section. At least one  
23 member described in Subsection B of this section shall be an  
24 immediate relative or guardian of a person who resides or  
25 previously resided in an institution or shall be a person

1 with a developmental disability who resides or previously  
2 resided in an institution. No member of the council shall be  
3 an employee, or someone who manages employees, of a state  
4 agency that receives funds to provide developmental  
5 disabilities supports and services.

6 D. The council shall also include:

7 (1) the secretary of health, or the  
8 secretary's designee;

9 (2) the secretary of human services, or the  
10 secretary's designee;

11 (3) the secretary of children, youth and  
12 families, or the secretary's designee;

13 (4) the secretary of early childhood  
14 education and care, or the secretary's designee;

15 (5) the secretary of aging and long-term  
16 services, or the secretary's designee;

17 (6) the secretary of public education, or  
18 the secretary's designee;

19 (7) the director of the vocational  
20 rehabilitation division of the public education department,  
21 or the director's designee;

22 (8) the director of the state protection and  
23 advocacy system established pursuant to the federal  
24 Developmental Disabilities Assistance and Bill of Rights Act  
25 of 1990, or the director's designee;

1 (9) the director of an entity within a state  
2 institution of higher education designated as a university  
3 center for excellence in developmental disabilities  
4 education, research and service; and

5 (10) at all times, representatives of local  
6 and nongovernmental agencies and private nonprofit groups  
7 concerned with services for persons with developmental  
8 disabilities in New Mexico.

9 E. The governor shall select the members of the  
10 council for appointment pursuant to Subsection B and  
11 Paragraphs (9) and (10) of Subsection D of this section after  
12 soliciting recommendations from organizations representing a  
13 broad range of persons with developmental disabilities and  
14 other persons interested in persons with developmental  
15 disabilities. The council may, at the initiative of the  
16 council or at the request of the governor, coordinate council  
17 and public input to the governor regarding all  
18 recommendations.

19 F. The membership of the council shall be  
20 geographically representative of the state and reflect the  
21 diversity of the state with respect to race and ethnicity.

22 G. Members, except for ex-officio members, shall  
23 be appointed by the governor for terms of three years.

24 H. The governor shall provide for rotation of the  
25 membership of the council. These provisions shall allow

1 members to continue to serve on the council until those  
2 members' successors are appointed and qualified.

3 I. The council shall notify the governor regarding  
4 membership requirements of the council and shall notify the  
5 governor when vacancies on the council remain unfilled for a  
6 significant period of time.

7 J. Council members shall recuse themselves from  
8 any discussion of grants or contracts for which such members'  
9 departments, agencies or programs are grantees, contractors  
10 or applicants. The council shall ensure that no council  
11 member casts a vote on any matter that would provide direct  
12 financial benefit to the member or otherwise give the  
13 appearance of a conflict of interest."

14 SECTION 8. Section 28-16A-6 NMSA 1978 (being Laws 1993,  
15 Chapter 50, Section 6, as amended) is amended to read:

16 "28-16A-6. ELIGIBILITY.--

17 A. For purposes of eligibility for support and  
18 services, "developmental disability" means a severe chronic  
19 disability of a person, which disability:

20 (1) is attributable to a mental or physical  
21 impairment, including the result from trauma to the brain, or  
22 combination of mental and physical impairments;

23 (2) is manifested before the person reaches  
24 the age of twenty-two years;

25 (3) is expected to continue indefinitely;

1 (4) results in substantial functional  
2 limitations in three or more of the following areas of major  
3 life activity:

- 4 (a) self-care;
- 5 (b) receptive and expressive language;
- 6 (c) learning;
- 7 (d) mobility;
- 8 (e) self-direction;
- 9 (f) capacity for independent living;

10 and

- 11 (g) economic self-sufficiency; and

12 (5) reflects the person's need for a  
13 combination and sequence of special, interdisciplinary or  
14 generic care treatment or other support and services that are  
15 of lifelong or extended duration and are individually planned  
16 and coordinated.

17 B. A child, from birth through two years of age,  
18 who is at risk for or who has a developmental delay as  
19 defined by rules of the early childhood education and care  
20 department is eligible for early intervention services.

21 C. A person who is eligible for developmental  
22 disability supports and services based on any previous  
23 definition of developmental disability used by the state and  
24 was receiving services on June 15, 1993 shall remain eligible  
25 for developmental disability supports and services. However,

1 a child, from birth through age two, who is determined to be  
2 at risk for or who has a developmental delay shall be  
3 eligible for early intervention services only, unless the  
4 child meets the criteria set forth in Subsection A of this  
5 section."

6 SECTION 9. Section 28-16A-8 NMSA 1978 (being Laws 1993,  
7 Chapter 50, Section 8, as amended) is amended to read:

8 "28-16A-8. REPORTING ON COMMUNITY SERVICES FOR PERSONS  
9 WITH DEVELOPMENTAL DISABILITIES.--The department of health,  
10 the human services department, the public education  
11 department, the vocational rehabilitation division of the  
12 public education department, the children, youth and families  
13 department, the early childhood education and care  
14 department, the New Mexico school for the blind and visually  
15 impaired and the New Mexico school for the deaf shall provide  
16 to the council, on an annual basis, information and data with  
17 respect to the actual or estimated number of persons with  
18 developmental disabilities served by the agency, the type of  
19 services provided, any major changes in policies adopted in  
20 the previous year or anticipated in the coming year that have  
21 had or are expected to have a beneficial or deleterious  
22 effect on persons with developmental disabilities and any  
23 gaps in eligibility or services that pose a barrier to the  
24 provision of services needed by persons with developmental  
25 disabilities."

1 SECTION 10. Section 28-16A-9 NMSA 1978 (being  
2 Laws 1993, Chapter 50, Section 9, as amended) is amended to  
3 read:

4 "28-16A-9. INFORMATION AND REFERRAL SYSTEM--  
5 COORDINATION AND CONTINUATION.--In order to coordinate  
6 information and referral services and eliminate the  
7 duplication of effort, the council shall provide information  
8 and referral services for persons with disabilities, their  
9 families, providers of support and services and local and  
10 state agencies, including:

- 11 A. the human services department;
- 12 B. the department of health;
- 13 C. the public education department and its  
14 vocational rehabilitation division;
- 15 D. the New Mexico school for the deaf;
- 16 E. the New Mexico school for the blind and  
17 visually impaired;
- 18 F. the Carrie Tingley crippled children's  
19 hospital;
- 20 G. the children, youth and families department;
- 21 and
- 22 H. the early childhood education and care  
23 department."

24 SECTION 11. Section 28-16A-13 NMSA 1978 (being  
25 Laws 1993, Chapter 50, Section 13, as amended) is amended to

1 read:

2 "28-16A-13. AUTHORIZATION FOR PROVIDING SUPPORT AND  
3 SERVICES FOR PERSONS WITH DEVELOPMENTAL DISABILITIES.--

4 A. Subject to the availability of appropriations  
5 provided expressly for this purpose, the department may:

6 (1) acquire, provide or coordinate support  
7 and services for persons with developmental disabilities;

8 (2) enter into contracts and provider  
9 agreements with agencies and persons capable of providing  
10 support and services to persons with developmental  
11 disabilities; and

12 (3) establish advisory councils and task  
13 forces as necessary to guide the development and review of  
14 support and services to persons with developmental  
15 disabilities.

16 B. Support and services shall be provided based on  
17 individual support and service plans developed by an  
18 interdisciplinary team. The team is responsible for  
19 collectively evaluating a child's or adult's needs and  
20 developing an individual support and service plan to meet the  
21 needs; provided that the early childhood education and care  
22 department shall be responsible for the team that is  
23 evaluating a child for family, infant, toddler program  
24 services.

25 C. The department or, for children eligible for

1 family, infant, toddler program services, the early childhood  
2 education and care department shall:

3 (1) solicit the involvement of consumers,  
4 providers, parents, professional organizations and other  
5 governmental organizations prior to the adoption or revision  
6 of rules concerning the provision of support, services,  
7 standards or funding systems. Participants shall be selected  
8 in a manner that reflects geographical, cultural,  
9 organizational and professional representation across the  
10 state;

11 (2) develop rules, including policies and  
12 procedures that, to the extent possible, will promote  
13 uniformity in reimbursement and quality assurance systems  
14 regardless of the source of funding; and

15 (3) convene and maintain a family, infant,  
16 toddler interagency coordinating council and a statewide  
17 adult support and services task force that shall, at a  
18 minimum, address quality assurance."

19 SECTION 12. Section 28-16A-18 NMSA 1978 (being  
20 Laws 1993, Chapter 50, Section 18, as amended) is amended to  
21 read:

22 "28-16A-18. DEVELOPMENTAL DISABILITIES EARLY CHILDHOOD  
23 EVALUATION SYSTEM.--The state shall have a timely,  
24 comprehensive, multidisciplinary system for evaluating  
25 infants, toddlers and preschool-age children suspected of

1 having developmental delays. Diagnostic evaluations for  
2 infants and toddlers shall address family service needs and  
3 shall include training capabilities to educate community  
4 providers and parents in the understanding and application of  
5 the evaluations. This diagnostic evaluation system shall be  
6 jointly provided through a coordinated system by the  
7 children's medical services bureau of the public health  
8 division or the developmental disabilities supports division  
9 of the department, the early childhood education and care  
10 department, the university of New Mexico's center for  
11 development and disability and the public education  
12 department."

13 SECTION 13. Section 28-16A-19 NMSA 1978 (being  
14 Laws 2003, Chapter 323, Section 1, as amended) is amended to  
15 read:

16 "28-16A-19. INFORMATION AND REFERRAL TASK FORCE  
17 CREATION.--The "information and referral task force" is  
18 created in the council to develop a statewide, comprehensive  
19 "211" information and referral plan for use as a telephone  
20 dialing code for access to health and human services. The  
21 plan shall include a tariff structure based on existing  
22 agreements, a common taxonomy of terms, coordination between  
23 public and private systems and standardized statewide  
24 training and exploration of a centralized information  
25 repository. The task force shall include representation from

1 the department of health; the human services department; the  
2 children, youth and families department; the early childhood  
3 education and care department; the workforce solutions  
4 department; the aging and long-term services department; the  
5 internet long-term care link program; the governor's  
6 commission on disability; the New Mexico commission for the  
7 blind; the commission for deaf and hard-of-hearing persons; a  
8 statewide organization that raises money for health and human  
9 service purposes; and other interested parties."

10 SECTION 14. Section 32A-15-3 NMSA 1978 (being  
11 Laws 1985, Chapter 103, Section 3 and Laws 1985, Chapter 140,  
12 Section 3, as amended) is amended to read:

13 "32A-15-3. CRIMINAL HISTORY RECORDS CHECK--BACKGROUND  
14 CHECKS.--

15 A. State and national criminal history records  
16 checks shall be conducted on all operators, staff, employees  
17 and volunteers and prospective operators, staff, employees  
18 and volunteers of child care facilities, including every  
19 facility or program that has primary custody of children for  
20 twenty hours or more per week, and juvenile detention,  
21 correction or treatment facilities. State and national  
22 criminal history records checks shall also be conducted on  
23 all prospective foster or adoptive parents and other adult  
24 relatives and non-relatives residing in the prospective  
25 foster or adoptive parent's household. The objective of

1 conducting the records checks is to protect the children  
2 involved and promote the children's safety and welfare while  
3 receiving service from the facilities and programs.

4 B. The early childhood education and care  
5 department shall have access to criminal history information  
6 on prospective and current operators, staff, employees and  
7 volunteers of child care facilities, including every facility  
8 or program under the department's authority that has primary  
9 custody of infants, toddlers and children for twenty hours or  
10 more per week.

11 C. The children, youth and families department  
12 shall have access to criminal history information on:

13 (1) prospective and current operators,  
14 staff, employees and volunteers of juvenile detention,  
15 correction or treatment facilities or a facility or program  
16 under the department's authority that has primary custody of  
17 children for twenty hours or more per week; and

18 (2) all prospective foster or adoptive  
19 parents or other adult relatives and non-relatives residing  
20 in a prospective foster or adoptive parent's household.

21 D. For purposes of investigating the suitability  
22 of persons enumerated in Subsections B and C of this section,  
23 the early childhood education and care department or the  
24 children, youth and families department, as applicable, shall  
25 have access to criminal history records information furnished

1 by the department of public safety and the federal bureau of  
2 investigation, subject to any restrictions imposed by federal  
3 law. As directed by the applicable department, a person  
4 enumerated in Subsection A of this section shall submit a set  
5 of electronic fingerprints to the department of public  
6 safety. The department of public safety shall conduct a  
7 check of state criminal history records and forward the  
8 fingerprints to the federal bureau of investigation for a  
9 national criminal history records check to determine the  
10 existence and content of records of convictions and arrests  
11 in this state or other law enforcement jurisdictions and to  
12 generate a criminal history records check in accordance with  
13 rules of the department and regulations of the federal bureau  
14 of investigation. The department of public safety shall  
15 review the information returned from the criminal history  
16 records check and compile and disseminate a response to the  
17 appropriate department, which shall use the information to  
18 investigate and determine whether a person is qualified to  
19 provide care for a child or be a foster or adoptive parent.

20 E. Criminal history records obtained pursuant to  
21 the provisions of this section are confidential and are not a  
22 public record for purposes of the Inspection of Public  
23 Records Act and shall not be used for any purpose other than  
24 determining suitability for licensure, employment, volunteer  
25 service, fostering or adoption. Criminal history records

1 obtained pursuant to the provisions of this section and the  
2 information contained in those records shall not be released  
3 or disclosed to any other person or agency, except pursuant  
4 to a court order or with the written consent of the person  
5 who is the subject of the records.

6 F. A person who releases or discloses criminal  
7 history records or information contained in those records in  
8 violation of the provisions of this section is guilty of a  
9 misdemeanor and shall be sentenced pursuant to the provisions  
10 of Section 31-19-1 NMSA 1978."

11 SECTION 15. EFFECTIVE DATE.--The effective date of the  
12 provisions of this act is July 1, 2022. \_\_\_\_\_

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