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FISCAL IMPACT REPORT

SPONSOR Ortiz y Pino ORIGINAL DATE 1/26/22
LAST UPDATED _____ HB _____
SHORT TITLE Child Behavioral Health Services Support SB 79
ANALYST Chilton

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Nonrecurring	Fund Affected
FY22	FY23		
	\$300.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From

Human Services Department (HSD)

Children, Youth and Families Department (CYFD)

SUMMARY

Synopsis of Bill

Senate Bill 79, Child Behavioral Health Services Support, appropriates \$300 thousand from the general fund to the Human Services Department for the purpose of contracting for services to provide peer support and referrals to families with children needing behavioral health services.

There is no effective date of this bill. It is assumed that the effective date is 90 days following adjournment of the Legislature.

FISCAL IMPLICATIONS

The appropriation of \$300 thousand contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of Fiscal Year 2023 shall revert to the general fund.

SIGNIFICANT ISSUES

Although services such as peer support and referral for families of children with behavioral health programs are covered by some insurance programs, including Medicaid, the funds

appropriated in this bill could be used to augment the program, as indicated in this statement from CYFD:

While providers are able to bill Family Peer Support Services to Medicaid, the general fund dollars allow CYFD to support (1) the initial and ongoing training requirements for Family Peer Support Workers (FPSW) and supervisors, (2) the certification process for becoming an approved FPSW, (3) program evaluation and tracking of outcomes, and (4) other necessary efforts to ensure high quality programming which fall outside of the scope of services eligible for Medicaid billing. These components are currently funded through CYFD BHS federal grant funds, which are specific to identified grant sites for the next two years. This additional funding will allow for statewide expansion and sustainable implementation of Family Peer Support Services once federal grant funds end.

Of the three types of peer support services in New Mexico, the two most affected by this appropriation are the Family Peer Support Services (FPSS) and Youth Peer Support Services (YPSS) for children, youth and their families, overseen and funded by the CYFD Behavioral Health Services (BHS) Division, which funds the development, training, certification, and evaluation these services through federal grants and state general funds. CYFD BHS funds the infrastructure and startup of Family Peer Support Services at three behavioral health providers via a federal grant. Family Peer Support Services are billable to Medicaid.

Family Peer Support Services help families gain the knowledge to become informed decision makers. Through the family peer process, caregivers increase their skills and confidence to effectively attain their goals and ultimately empower their family to navigate child serving systems with more independence. The Family Peer Support Worker (FPSW) uses a strengths-based and culturally sensitive approach that is family-driven, child centered, that considers cultural history, religion, life experiences, beliefs and preferences. This intensive work is provided in the family's home and community. Sessions and length of service vary based upon the individual needs of the family, programmatic guidelines and funding requirements.

Family Peer Support Services is a requirement of the proposal to add High-Fidelity Wraparound to the New Mexico Medicaid fee schedule to the Center for Medicare and Medicaid Services. The proposal was jointly developed by CYFD BHS and HSD Medical Assistance Division to meet the requirements of the Kevin S. Settlement Agreement.

The Kevin S, Settlement Agreement referred to above responded to a lawsuit, *Kevin S. et al v Blalock et al*, filed in 2018 and 2020. The suit alleged that CYFD was not providing adequate care for trauma-impacted children under its purview. The settlement included the following stipulations:

- Developing a trauma-responsive system of care for all children in state custody.
- Placing children in out-of-home care in stable, safe, appropriate, community-based placements in the least-restrictive environment.
- Building a relationship with each of the New Mexico Nations, Tribes and Pueblos, and comply with the Indian Child Welfare Act (ICWA) — making every effort to ensure that all Native children and families receive appropriate support and services.

- Building a statewide, community-based behavioral health system that all children and families will be able to access.
- Implementing training, supervision, and support for agency staff, foster parents, and other adults who serve children impacted by trauma.

HSD notes that “Certified Family Peer Support was developed by CYFD through SAMSHA grant funding and it has been challenging to sustain providers and identify new providers in the children’s system of care, and that”

PERFORMANCE IMPLICATIONS

HSD indicates that it would need to hire a FTE to be responsible for “the development of an application process, modification of the system of record and payment, and evaluation of the effort” as part of its response to this appropriation. The cost, estimated at \$84,730, would be encompassed in the \$300,000 to be appropriated.

LC/acv