	New Mexico Human Services Department State Fiscal Years 2023 & 2024 Strategic Plan
Fiscal Year	Tactic
Goal 1: Imp	rove the value and range of services we provide to ensure that every qualified New Mexican receives timely and
	accurate benefits.
Objective 1.1	Ensure that every qualified New Mexican receives timely and accurate benefits. (Income Support Division, ISD)
FY23	Increase food and nutrition support, specifically the State Food Supplement benefit and additional deductions.
FY23	Implement Supplemental Security Income program to provide additional cash for food for vulnerable populations,
	including people with disabilities.
FY23	Incorporate voluntary sexual orientation and gender identity questions into customer application platforms and
	reporting.
FY23 & FY24	Improve access for HSD customers with limited technological resources and/or proficiency.
FY23 & FY24	Partner with community-based organizations to host satellite HSD offices, COVID-safe practices permitting.
FY23 & FY24	Cross train HSD staff to assist Dept. of Workforce Solutions to support increases in Unemployment Insurance claimants.
FY23 & FY24	Cross train Dept. of Workforce Solutions staff to assist HSD in activities related to the unwinding of the Public Health Emergency.
FY23 & FY24	Collaborate with other state agencies to centralize and coordinate food security efforts in New Mexico.
	Expand the behavioral health (BH) network to provide a full continuum of behavioral health services. (Behavioral
-	es Division, BHSD)
FY23	Monitor and revise enrollment and credentialing requirements for Medicaid and Managed Care Organizations
	(MCOs).
FY23	Implement and incorporate systems improvements from credentialing workgroup into MCO contracts.
FY23	Incorporate appropriate telehealth and remote service deliver systems into BH Provider and Billing Manual and NM
	Admin. Code.
FY23	Evaluate and adjust as appropriate expansion of Certified Peer Support Workers (CPSWs) in array of social locations.
FY24	Develop Certified Community Behavioral Health Clinics (CCBHCs), which are a Federal model for sustainable and high
	quality integrated BH Clinics.
FY24	Develop 988/Crisis Now Mobile Crisis Response team pilots and plan for expansion to cover the entire state with
	sustainable, locally appropriate and flexible models.
FY24	Continue 988/Crisis Now development of BH Crisis response centers as locally appropriate (e.g. Crisis Triage Centers,
	Emergency Depts., BH Urgent Care).
FY24	Continue development of network of BH crisis receiving centers throughout the state, so no one is more than 90
	minutes from an appropriate facility.
FY24	Implement payment system that incentivizes effective integration of BH and Primary Care.
FY24	Implement Value Based Purchasing with state general funds and Block Grant Projects.
FY24	Include appropriate Value Based Purchasing mechanisms for BH system of care into MCO contracting.
FY24	Work with NM Dept. of Health and BH Collaborative to elaborate process to incorporate syndromic surveillance and
	data management into planning of Substance Use system of care from Prevention through to Recovery.
FY24	Develop and implement proposal for Certification of Bi- and Multi-Lingual BH practitioners, with financial incentives
1124	for the practitioners and agencies that adopt this.
FY24	Work with Regulation and Licensing Dept. and NM Universities and Colleges to develop profession of BH Interpreter.
Ohiective 1 3	Develop a statewide system of behavioral healthcare (BH) that promotes the BH and well-being of children,
-	d families, encourages a seamless system of care that is accessible and continuously available, and emphasizes
	d early intervention, resiliency, recovery and rehabilitation. (Behavioral Health Collaborative, BHC)
FY23	Reform residential treatment services in accordance with federal Family First Prevention Services Act (FFPSA)
5222	guidelines.
FY23	Review and maintain NARCAN (prescription medicine used for the treatment of a known or suspected opioid
5222	overdose emergency) supplies in NM.
FY23	Increase number of Medication Assisted Treatment qualified providers through NM Corrections Dept. pilot.
FY23	Strengthen Native American Behavioral Health network by providing technical assistance and support related to
51/22	Medicaid credentialing process.
FY23	Support the BHC Administrative Services Organization operations, BHC member agencies, and look for expansion
	opportunities.

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FY23	Identify prevention gaps in BH services for children and youth.
FY23	Support Local BH Collaborative expansion, facilitating partnerships with health councils and facilitating regional
	recommendations to BHC.
FY24	Contract with new Local BH Collaboratives for desired objectives and expand membership and relationships with
	health councils.
FY24	Evaluate use of Substance Use Disorder (SUD) screenings across primary care and BH settings.
FY24	Expand SUD prevention and intervention services for youth.
FY24	Determine whether to pursue harm reduction legislation.
FY23 & FY24	Expand evidence based practices and modalities to address behavioral health needs of children and youth.
FY23 & FY24	Monitor and evaluate BHC performance measures.
FY23 & FY24	Improve BH access, including suicide prevention supports.
FY23 & FY24	Explore financial incentives to keep BH professionals in NM.
FY23 & FY24	Expand High-Fidelity Wraparound services for children and youth, particularly those in state custody.
FY23 & FY24	Expand Medication Assisted Treatment (MAT) statewide.
FY23 & FY24	Increase services and supports for people involved in the justice-system using the Sequential Intercept Model.
FY23 & FY24	Pursue harm reduction strategies that address complex needs of individuals in the justice system with SUD.
FY23 & FY24	Increase members of BH workforce who represent cultural and racial diversity of NM.
FY23 & FY24	Contract with 3rd party to complete a statewide strategic plan for the BHC addressing 4 goals within the behavioral
	health system.
Objective 1.4	Ensure that as the largest payer in the state, Medicaid is providing appropriate payment for services. (Medical
FY23	Revise NM Administrative Code and implement communications regarding changes in standard of care requirements
	in prenatal care (Maternal Carrier Screening Cystic Fibrosis, Maternal Carrier Screening Spinal Muscular Atrophy,
	Prenatal Genetic Screening (Cell Free DNA), Prohibit prior authorization for Obstetrics services).
FY23	Propose rate increases to Governor's office and Legislature to address any identified inequities and inadequacies in
	provider payments.
FY23	Establish cadence and requirements for periodic rate reviews based on outcomes from Benchmarking report.
FY23	Revise and implement Hospital Access Payment/Targeted Access Payment as part of Safety Net Care Pool.
FY23	Develop strategy to address inequities in rate structure identified in rate study and to implement changes where
	gaps in service provision identified.
FY23	Procure a third-party biller to facilitate and streamline reimbursement for Medicaid clinical services provided by NM
	state agencies.
FY23	Collaborate with the Governor's Office and community representatives from Valencia County to explore
	opportunities and analyze data/financing options for building a hospital facility in the county.
FY23	Participate in the Interagency Pharmaceuticals Purchasing Council to examine cost-savings opportunities in drug
	purchasing/payment across state agencies and other public bodies.
FY23	Develop a value-based purchasing (VBP) transition plan for rural NM hospitals.
FY23	Develop a revision to the Targeted Access Payment.
FY24	Implement the identified changes to provider rate reviews/increases/assessment
FY24	Implement a VBP transition plan for rural NM hospitals.
FY24	Implement the revised Targeted Access Payment.
	Promote primary care expansion in NM, particularly in underserved and rural areas. (Office of the Secretary (OOS)
FY23	Update NM Primary Care Council (PCC) Strategic Plan for January 2023 release.
FY23	Support FY23 primary care Graduate Medical Education (GME) expansion program partners.
FY23	Ensure statewide primary care GME academic network is meeting program needs and investing in future supports
	and services.
FY23	Submit any Medicaid State Plan Amendment that addresses policy issues important to primary care GME expansion,
	if needed.
FY23	Integrate GME Expansion Board & Advisory Group into PCC, which will consolidate primary care GME expansion
	innovations with other primary care activities.
FY23	Reform Medicaid policies, programs and procedures to optimize primary care residency expansion.
FY23	Identify and implement policy changes HSD can make to support primary care residency expansion.
FY23	Develop primary care GME expansion program evaluation framework.

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FY23	Develop and test sustainable primary care alternative payment models (APMs) in Medicaid that will improve quality of care; increase equity, access, health outcomes, and value; and incentivize interprofessional teams.
FY23	Conduct a comprehensive, statewide primary care workforce analysis to determine the current provider-to-
	population ratios, provider demographics, utilization of primary care interprofessional teams, and healthcare career programs that will inform tactics to address workforce shortages and sustainability.
FY23	Drive health equity through developing and incentivizing models of interprofessional, person-centered primary care
-	teams that include behavioral health and Community Health Workers.
FY23	Design and launch a primary care APM clinician and provider transformation collaborative that builds relationships with stakeholders and provides them technical assistance and support related to APM adoption in their practice.
FY23	Design health equity measures for primary care alternative payment model and value based purchasing payments.
FY24	Update PCC Strategic Plan for January 2024 release.
FY24	Support FY24 primary care GME expansion program partners.
FY24	Ensure statewide primary care GME academic network is meeting program needs and investing in future supports and services.
FY24	Evaluate primary care GME expansion program performance.
FY24	Engage stakeholders on a mission and purpose of a multi-payor, sustainable primary care APM that improves quality
	of care; increases equity, access, health outcomes, and value; and incentivizes interprofessional teams.
FY24	Develop and implement strategies to create a sustainable and diverse primary care workforce that supports
	interprofessional teams, education, and residency programs; addresses barriers to recruitment and provider burn-
	out; and improves provider-to-population ratios and access to care.
FY24	Develop strategies to improve and invest in health technology that supports high quality primary care including
	systems for alternative payment models, healthcare information exchange, electronic health records, and population
	health; and systems that make primary care seamless and easy for patients and providers.
FY24	Implement and refine sustainable primary care APMs in Medicaid that will improve quality of care; increase equity,
	access, health outcomes, and value; and incentivize interprofessional teams.
FY24	Continue primary care APM transformation collaborative that builds relationships with stakeholders and supports the adoption of APMs.
FY24	Implement equity measures for primary care alternative payment model and value based purchasing payments.
FY24	Implement and refine sustainable primary care APMs in Medicaid that will improve quality of care; increase equity,
	access, health outcomes, and value; and incentivize interprofessional teams.
FY24	Continue primary care APM transformation collaborative that builds relationships with stakeholders and supports the adoption of APMs.
FY24	Implement equity measures for primary care alternative payment model and value based purchasing payments.
FY23 & FY24	Reform Medicaid policies, programs and procedures to optimize primary care residency expansion.
FY23 & FY24	Identify and implement policy changes HSD can make to support primary care residency expansion.
Objective 1.6	Modernize child support program to improve the financial and medical support of New Mexico's children. (Child
Support Enfor	cement Division, CSED)
FY23	Convene Child Support Guidelines Review Commission, completing report by Oct. 2022.
FY23	Assess Child Support Hearing Officer workload through the contracts with the Judicial Districts to ensure service to
	customers is provided timely and that all requirements are met.
FY23	Implement Queue Management System for Income Support Division Offices, which will support lobby and curbside
-	operations.
FY23	Implement and finalize reorganization of the CSED Legal Services to ensure proper supervisor and management of
	the staff attorneys statewide.
FY24	Amend the 40-4c-4 Mandatory Medical Support Act to remove the requirement to collect cash medical support for
	those children actively enrolled in Title XIX Medicaid at the time medical support is established or modified.
FY24	Complete Centralized Case Processing Unit- Phase 2.
FY24	Enhance Child Support Hearing Officer Program.
FY23 & FY24	Develop Policy for Unclaimed Property for undistributed collections from CSED.
FY23 & FY24	Eliminate Fees for Child Support customers.
FY23 & FY24	Implement Electronic Case File for CSED.

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FY23 & FY24	Redesign Child Support Training Plan.
FY23 & FY24	Update CSED Arrears Management Program to leverage changes through the Flexibility, Efficiency, and
	Modernization rule passed in 2016 from the Office of Child Support Enforcement (OCSE).
FY23 & FY24	Move child support guideline schedule from state statute to NMAC.
Objective 1.7	Support NM Department of Health in development of Developmental Disabilities (DD) waiver revisions (including
supports waiv	er). (Medical Assistance Division, MAD)
FY23	Implement waiver amendments with permanent rate increases for ARP funding initiatives upon CMS approval.
FY23	Implement DD waiver renewal upon CMS approval.
FY23	Begin super allocation of DD waiver waitlist using HSCBS ARPA funding.
FY24	Develop and submit waiver renewal applications to CMS for Fiscal Years 25 and 26.
FY24	Develop training for ISD on DD waiver changes in FY25 and FY26.
FY24	Outline options and continue stakeholder engagement for waiver renewals in FY25 and FY26.
FY23 & FY24	Review NM Administrative Code regulations for changes that need to be made with DD waiver changes.
FY23 & FY24	Initiate statewide townhall meetings and stakeholder meeting for information gathering to develop
	recommendations for changes to waiver renewal applications.
FY23 & FY24	Continue NM Dept. of Health collaboration on waiver redesign.
Objective 1.8	Employ all Federal flexibility related to Public Health Emergency (PHE) to remove barriers to access for Medicaid
members and	lessen burden on providers. (Medical Assistance Division, MAD)
FY23	Implement rate changes as directed in 2023 Leg Session in FY23 to be effective in SFY 20224.
FY23	Monitor implementation of emergency relief efforts.
FY23	Develop transition plan to reverse emergency flexibility implemented.
FY23	Begin roll off of Maintenance of Effort population no longer eligible when the PHE declaration terminates.
FY23	Conduct system changes and testing for PHE roll-off.
FY23	Implement PHE unwinding communication plan.
Objective 1.9	Design and maintain a high value Managed Care Medicaid Program that effectively delivers timely and accurate
benefits. (Me	dical Assistance Division, MAD)
FY23	Begin the 1115 Centennial Care (Medicaid) waiver renewal process.
FY23	Prepare CY2023 Directed Payments for submission to Centers for Medicare & Medicaid Services (CMS) by December
	2022.
FY23	Issue extension of Managed Care Organization (MCO) contract.
FY23	Develop 2022 Dual Special Needs Population Contract.
FY23	Begin Managed Care Organization Procurement (issue Request For Proposals).
FY23	Review Direct payments and determine strategy for continuation and hire staff to support.
FY24	Conduct MCO Procurement Readiness.
FY24	Implement new models for the Medicaid home visiting program.
FY24	Complete MCO contract amendments for changes to Early and Periodic Screening, Diagnostic and Treatment
	(EPSDT), and the Health Insurance Exchange plan offering.
FY23 & FY24	Revise Medicaid Manage Care Contract.
	Complete MCO contract amendments for changes to EPSDT, Value Based Purchasing (VBP), Medical Loss Ratio
	(MLR), and the Health Insurance Exchange plan offering.
FY23 & FY24	Expand Medicaid Home Visiting Program.
	Obtain additional Federal authorities to improve and expand upon the scope of services offered by NM Medicaid.
-	stance Division, MAD)
FY23	Expand reimbursement for Medicaid School-Based Services Program through State Plan Amendment and
	administrative claiming guide by July 2022.
FY23	Implement Community-Based Mobile Crisis Intervention Services through State Plan Amendment by July 2022.
FY23	Prepare, finalize, disseminate, and post to HSD's website public notices on 1115 Draft Renewal Application by
	September 6, 2022.
FY23	Conduct public comment period for 1115 Draft Renewal Application, including two public hearings and one tribal
23	consultation, September 6 - October 31, 2022.
FY23	Consolidate public comments and incorporate into 1115 renewal application by November 2022.
FY23	Submit final 1115 Renewal Application to CMS by December 2022.
FY23	Negotiate Standard Terms and Conditions (STCs) with CMS beginning January 1, 2023.
23	

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FY23	Obtain CMS approval of Medicaid reimbursement for Institutions for Mental Disease settings for individuals with
	Serious Mental Illness/Serious Emotional Disturbance under 1115 waiver amendment #2 expenditure authority.
FY23	Obtain CMS approval of High Fidelity Wraparound (HFW) services under 1115 waiver amendment #2 expenditure
1125	authority.
FY23	Obtain CMS approval of funding and technical assistance for new and/or expanded primary care residency programs
-	under 1115 waiver amendment #2 expenditure authority.
FY23	Implement the expansion of genetic screenings by revising the NM Administrative Code to remove restrictions.
FY24	Implement Certified Community Behavioral Health Clinics through State Plan Amendment by July 2023.
FY24	Obtain CMS approval of NM's 1115 Renewal Application by December 31, 2023.
FY24	Implement NM's 1115 Demonstration Waiver effective January 1, 2024.
FY24	Implement Lactation Consultants through State Plan Amendment by January 2024.
FY24	Implement a single specialized MCO for children in state custody through Managed Care Services Agreement by
	January 2024.
FY24	Implement default enrollment for dual-eligible Medicaid members in coordination with CMS and MCOs through
	Managed Care Services Agreement and State Medicaid Agency Contract by January 1, 2024.
FY24	Implement Doula Services through State Plan Amendment by January 2024.
FY24	Implement Human Donor Milk Services through State Plan Amendment by January 2024.
FY24	Implement enhanced services and supports for Legally Responsible Individuals as Providers of Home and Community-
	Based Services Community Benefit Services under new 1115 expenditure authority.
FY24	Implement the expansion in access to assisted living services and promoting a person-centered Long-Term Services
	and Supports experience for New Mexicans under new 1115 expenditure authority.
FY24	Implement the Environmental Modification Benefit Limit Increase under new 1115 expenditure authority.
FY24	Implement the Transitional Services Benefit Limit Increase under new 1115 expenditure authority.
FY24	Implement meals for enrollees residing independently under new 1115 expenditure authority.
FY24	Continue Waiver Standard Terms and Conditions negotiations with CMS throughout 2023.
FY24	Implement a Closed-Loop Referral System under new 1115 expenditure authority.
FY24	Implement medical respite for members experiencing homelessness under new 1115 expenditure authority.
FY24	Implement strategies for Rural Hospital Support under new 1115 expenditure authority.
FY24	Expand on existing Value Based Purchasing (VBP) arrangements with focus on population health management as
	defined by NM's Primary Care Council and Managed Care Services Agreement.
FY24	Expand the use of Community Health Workers and establish payment methodology through State Plan Amendment.
FY24	Address non-emergency medical transportation challenges through 1115 waiver authority.
FY24	Implement the expansion of the Medicaid Home Visiting Programs under new 1115 expenditure authority.
FY24	Implement New Chiropractic Services Pilot under new 1115 expenditure authority.
FY24	Implement New Member-Directed Traditional Healing Benefits under new 1115 expenditure authority.
FY24	Implement continuous eligibility for children up to age 6 under new 1115 expenditure authority.
FY24	Implement Medicaid Services for High-Need Justice Involved Populations 30 Days before Release under new 1115
	expenditure authority.
FY24	Implement the expansion of Home and Community Based Services (HCBS), Community Benefit (CB) Enrollment
	Opportunities through Additional Waiver slots under new 1115 expenditure authority.
FY24	Implement a Single Preferred Drug List through Managed Care Services Agreement.
FY24	Address residential treatment capacity issues through 1115 waiver amendment process.
Objective 1.1	L Implement American Rescue Plan Enhanced Federal Medical Assistance Percentages (FMAP) Home and
Community B	ased Services (HCBS) Spending Plan. (Medical Assistance Division, MAD).
FY23	Conduct Applied Behavioral Analysis (ABA) training for providers.
FY23	Expedite Allocation packet development.
FY23	Expand and fill new Developmental Disabilities/Waiver slots.
FY23	Open Personal Care Services provider network.
FY23	Pursue Program of All-Inclusive Care for the elderly (PACE) expansion, which provides comprehensive long-term
	services and supports to Medicaid and Medicare enrollees.
FY23	Submit Initial Spending Plan as required by the U.S. Centers for Medicare & Medicaid Services (CMS) for
	reinvestment of funds into expansion and enhancement of home and community-based services (HCBS).

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FY23	Launch HCBS webpage (public facing central registry built into Unified Portal).
FY23	Submit 1915(c) Waiver Amendments to CMS.
FY24	Implement approved HCBS proposals upon CMS approval.
FY24	Initiate stakeholdering to pursue PACE expansion, which provides comprehensive long-term services and supports to
	Medicaid and Medicare enrollees.
FY23 & FY24	Expand and fill new Community Benefit Allocations.
Objective 1.12	Comply with and implement Medicaid related initatives and requirements of the Kevin S. Settlement.
FY23	Establish Medicaid rates for the four evidence-based practice models required in the Settlement.
FY23	Build out the provider network, complete provider assessment, establish provider incentives to encourage providers
	to enroll.
FY23	Develop process to comply with the requirements of Appendices A, B, C and D.
FY24	Implement Medicaid rates for the four evidence-based practice models required in the Settlement.
	Goal 2: Create effective, transparent communication to enhance the public trust.
Objective 2.1	Develop and implement a comprehensive external communication plan. (Office of the Secretary, OOS)
FY23 & FY24	Implement best practices for social media to connect with HSD audiences and for outreach purposes.
FY23 & FY24	Expand and grow outreach through social media Facebook, Twitter, LinkedIn.
FY23 & FY24	Provide continuous training on website protocols for division staff.
FY23 & FY24	Review Google analytics for website.
FY23 & FY24	Grow external distribution list to continuously communicate with the public.
FY23 & FY24	Maintain credibility and transparency with the media and the public.
FY23 & FY24	Partner with associations and speak at annual meetings.
FY23 & FY24	Implement communication strategies designed to reach New Mexicans with limited technological access.
FY23 & FY24	Review social media analytics, determine growth, and set new digital outreach goals.
FY23 & FY24	Work with division staff on their section of the website.
FY23 & FY24	Develop public service announcements about HSD benefits.
FY23 & FY24	Inventory and maintain HSD website updates.
FY23 & FY24	Strengthen relationships with key advocacy groups.
FY23 & FY24	Conduct public hearings for customers, advocates, and various stakeholders.
FY23 & FY24	Engage with HSD customers in community-based settings, providing benefits enrollment support and answering
	questions.
	Implement a department wide strategy to include partners (federal, state and local, community-based services,
	rocates, Managed Care Organizations, Tribes) in decisions that affect them. (Office of the Secretary, OOS)
FY23	Assess the effectiveness of the Child Support Enforcement Divisions (CSED) Native American Initiative.
FY23 & FY24	Solicit feedback from key stakeholders (e.g. customers, HSD staff, legislators, providers, advocacy groups) related to
	HSD's strategic priorities.
FY23 & FY24	Collaborate with Native American liaison to share information with NM's Tribes, Nations, and Pueblos.
FY23 & FY24	Collaborate with Indian Affairs Public Information Officer to share information about HSD benefits available for
	Native American population.
FY23 & FY24	Broadcast public service announcements about HSD benefits specific to Native American populations.
FY23 & FY24	Attend Native American public events to provide information about HSD programs and services.
FY23 & FY24	Utilize Tribal Consultations as a means of community engagement, as needed.
FY23 & FY24	Convene Medicare Administrative Contractor (MAC) subcommittees. Conduct public hearings for HSD customers, providers, advocates, and other stakeholders.
FY23 & FY24 FY23 & FY24	Maintain relationships with key advocacy groups.
FY23 & FY24	Engage providers and users in Medicaid Management Information System Replacement (MMISR) Project activities,
1 123 Q F 124	
FY23 & FY24	including testing. Working with community partners, including customers and providers, to solicit feedback on designing the HSD
1 125 & F124	office of the future.
FY23 & FY24	Implement strategies developed by Medicaid Native American Technical Advisory Committee based on Committee
1 123 & F124	
Objective 2.2	priorities. Resolve major ongoing litigation and sanctions related to Deborah Hatten Gonzales (DHG) lawsuit. (Office of
General Couns	
FY23	Continue DHG Corrective Action Plan (CAP) implementation and work through all items to completion.
FY23	Close lawsuit based on completion of Correction Action Plan.

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Objective 2.4	Resolve major ongoing litigation and sanctions related to Kevin S lawsuit. (Office of General Counsel, OGC)
FY23	Advance progress on settlement issues related to Kevin S.
FY24	Close out settlement issues related to Kevin S.
Objective 2.5	Establish regular communication channels with stakeholders. (Medical Assistance Division, MAD)
FY23	Contract for complete Medicaid billing manual development.
FY23	Evaluate and revise consumer communication materials, ensuring accessibility standards.
FY23	Evaluate and revise consumer communication materials translated into languages other than English, ensuring
	accessibility standards.
FY23	Reissue or sunset all COVID-19 related supplements and Letters of Direction at the termination of the PHE.
FY24	Collaborate with ISD on ensuring completion of needed translations to expanded languages.
FY24	Review member correspondence from ASPEN and update as necessary to align with 1115 and procurement. Assess
	MCO communications to ensure all new member correspondence is approved by HSD post-procurement.
Objective 2.6	Inform public of Public Health Emergency (PHE) Medicaid programmatic changes. (Medical Assistance Division,
FY23	Reissue all COVID-19 related supplements and Letters of Directions to MCOs at the termination of the Federal Public
	Health Emergency.
FY23	Design and implement coordinated PHE unwinding communication plan (HSD, Managed Care Organizations, Health
	Insurance Exchange, NM Medical Insurance Pool).
Objective 2.7	Utilize Performance Measures to improve Managed Care Organizations (MCOs) performance on physical health
and behaviora	l health outcomes. (Medical Assistance Division, MAD)
FY23	Revise MCO Performance Measures to align with evolving Healthcare Effective Data Information Sheets (HEDIS)
	measures.
FY23 & FY24	Monitor National Committee for Quality Assurance (NCQA) revisions to Healthcare Effective Data Information Sheets
	(HEDIS).
FY23 & FY24	Evaluate MCO Healthcare Effective Data Information Sheets (HEDIS) data for Performance Measure target
	achievement.
FY23 & FY24	Evaluate MCO Performance Measure reporting.
FY23 & FY24	Draft Performance Measure letter to MCOs, outlining contract performance compliance or non-compliance.
FY23 & FY24	Recover penalties from MCOs for performance non-compliance.
FY23 & FY24	Develop a customer satisfaction survey to be administered to Children in State Custody to are engaged in Care
	Coordination through their MCO.
	Update HSD website for Americans with Disabilities Act (ADA) compliance (Office of the Secretary, OOS)
FY24	Implement ADA website compliance plan, monitor and evaluate for continual compliance.
Goal 3: Suc	cessfully implement technology to give customers and staff the best and most convenient access to services and
	information.
	Implement Health & Human Services (HHS) 2020 modules: system integration (SI), data services (DS), quality
-), financial services (FS), benefit management services (BMS), and unified public interface (UPI). (Information
Technology Di	
FY23	Continue testing of HHS 2020 modules.
FY24	Complete implementation of enhanced data services and analytics capabilities as part of the Medicaid Management
EV24	Information System (MMIS).
FY24	Continue implementation of the financial services and benefit management services modules as part of the
FV2.4	Medicaid Management Information System Replacement (MMISR) project.
FY24	Explore other agency collaboration opportunities as part of the HHS 2020 initiative.
-	Provide greater access to timely enterprise data to enhance evidence-based decision making. (Information
Technology Di	
FY23	Seek an increase to the operating budget for ITD to implement a data analytics organization that includes the filling
EV24	of 7 positions.
FY24 Objective 3-3	Implement an open data portal or website for public access.
-	Implement business transformation to redesign, streamline and improve our processes. (Information Technology
Division, ITD)	
FY23	Survey HSD customers, soliciting recommendations related to business redesign and improvements.
-	Expand and improve automation and self-service capabilities for ease of access to services. (Information
Technology Di	
FY23	Automate provider enrollment for Medicaid providers.

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FY23	Collaborate with behavioral health leaders and organizations to implement the 988 project.
FY23	Continue implementation of the unified portal.
Objective 3.5	Identify replacement strategy for Child Support Enforcement System (CSES). (Information Technology Division, ITD
& Child Suppo	ort Enforcement Division, CSED)
FY23	Continue the implementation of the CSES Replacement project.
FY23	Procure and Implement Employer Management solution.
FY23	Initiate full replacement/modernization of Child Support Enforcement System (CSES) system.
FY24	Procure and Implement Integrated State Disbursement Unit solution.
Objective 3.6	Provide requirements to systems teams related to the Public Health Emergency (PHE). (Medical Assistance
Division, MAD	
FY23	Review Federal guidance and make necessary systems changes.
FY23	PHE coding changes implemented.
-	Provide current, accessible, and fillable electronic human resources forms on TheWire (HSD employee intranet).
(Office of Hun	nan Resources, OHR)
FY23	Identify and update outdated OHR documents on TheWire, maintaining updates through standardized processes and
	protocols.
FY23	Convert OHR critical documents on TheWire to fillable PDF versions.
FY23	Complete revising outdated OHR documents on the Wire.
FY23	Complete conversion OHR critical documents on the Wire to fillable pdf versions
FY23	Develop and implement process to allow applicants and new hires to complete hiring process and provide
	confidential information electronically online pending budget availability.
FY24	Explore options to turn official employee personnel records to electronic files.
	Develop and implement electronic tracking mechanisms to ensure timeliness and effectiveness of employee
relations actions	ons for all staff whether teleworking or in the office. (Office of Human Resources, OHR)
FY23	Implement and refine strategies to complete employee relations actions using electronic processes.
FY23	Develop, track and implement standardized response times for Employee Relation issues.
FY23	Utilize electronic tracking mechanisms to drive timely and effective communication strategies with employees and
	managers on relevant Employee Relations issues regardless of whether teleworking or in the office.
-	Integrate with state-based Health Insurance Exchange to ensure streamlined experience for Medicaid members.
(Medical Assis	stance Division, MAD)
FY23	Implement Phase II Medicaid-HIE integration strategy.
FY24	Implement PHE unwinding process and system changes with HIE State-based exchange.
) Meet federal interoperability requirements. (Medical Assistance Division, MAD)
	Complete interoperability implementation.
-	L Create a secure, comprehensive and customizable electronic hiring and onboarding process available to
applicants, ne	w employees, hiring managers, and OHR. (Office of Human Resources, OHR)
FY23	Work with divisions, ITD and the contractor to customize and pilot DocuSign.
FY23	Train hiring managers to use DocuSign.
FY24	Present proposal to secure funding for 3 staff OHR Training and Labor Specialists, Advanced positions for the
	Operations Team to expedite the hiring and onboarding process for new staff by 40%.
FY24	Onboard new OHR staff. Identify strategies to streamline the efficiency of the hiring and onboarding processes.
Objective 3.12	Promote ideas and information to flow clearly and quickly among all IT team members and stakeholders.
-	Fechnology Division, ITD)
FY23	Define an IT service catalog.
FY24	Build an enterprise level knowledgebase and knowledge management process.
FY24	Build IT self-service capabilities to better support HSD staff.
	Bempower a data driven organization. (Information Technology Division, ITD)
FY23	Complete an analysis of data quality issues.
	Leverage and invest in new and emerging technology to drive agility of ITD services. (Information Technology
Division, ITD)	
FY23	Continue migration of workloads to the cloud and execution of the cloud strategy.

·	New Mexico Human Services Department State Fiscal Years 2023 & 2024 Strategic Plan
Fiscal Year	Tactic
Goal 4: Promo	te an environment of mutual respect, trust and open communication for staff to grow and reach their professional
	goals
Objective 4.1	Develop and implement comprehensive internal communication plan. (Office of the Secretary, OOS)
FY23 & FY24	Highlight internal employee promotions.
FY23 & FY24	Continue surveying employees for feedback.
FY23 & FY24	Hale and farewell employees on SharePoint and regularly in employee emails.
FY23 & FY24	Highlight employees' kudos on social media and TheWire.
FY23 & FY24	Continue implementing best practices for internal communication.
FY23 & FY24	Continue quarterly employee meetings to include recognition of employee anniversaries and allow additional time
	for questions to leadership.
FY23 & FY24	Continue monthly manager meetings to include recognition of employee anniversaries and allow additional time for
	questions to leadership.
Objective 4.2	Develop and implement a department-wide employee training program. (Office of Human Resources, OHR)
FY23	Revise and refine Leadership program for HSD managers.
FY23	Develop process to provide access to electronic human resources on the Wire, SharePoint and Blackboard.
FY23	Collaborate with other divisions to research, test, and select a Learning Management System, authoring tool and
	other training software for use across HSD.
FY23	Update 3 mandatory Blackboard Trainings.
FY23	Begin discussion to identify the structure of a training division for HSD, pending budget availability.
FY23	Assess additional management training topics that can be provided in conjunction with leadership development and
	supervision skills for managers.
FY23	Obtain 1 additional subscription for Lectora license for OHR Training Unit. Provide training and cross-training to staff
	to improve cross-trainer collaboration and strengthen the quality of trainings.
FY23	Create and deliver consistent curriculum to meet statewide training needs in the areas of ethics, new employee
	orientation.
FY23	Hire and onboard new trainers. Develop strategies to increase the number of trainings developed and delivered.
FY23	Complete assessment of training needs and priorities by Division, analyze and review findings, and establish
1	priorities with Directors.
FY23	Plan and develop Human Resources 101 training on basic employee relations and operations issues for managers
1	and supervisors.
FY24	Develop training for needs and priorities identified in Division assessments.
FY24	Implement Human Resources 101 training on basic employee relations and operations issues for managers and
1	supervisors.
-	Provide guidance and support to employees regarding HSD policy options in order to support a combination of elework environment. (Office of Human Resources, OHR)
FY23	Provide resources to division leaders on team building exercises and morale boosting options.
FY23	Provide training and guidance to supervisors on how to be an effective manager and the challenges that arise in a
	combined in-office and telework environment.
-	Assess Division Organizational Health Indicators and prioritize interventions needed for improved health. (Income
Support Divisi	
FY23	Implement technology to improve access and staff support.
-	Complete Business Transformation Council (BTC) process redesign effort and Organizational Change Management al Assistance Division, MAD)
FY23	Draft plan for Organizational Change Management completed to present to the Operational Steering Committee.
FY23	Hire dedicated staff with Organizational Change Management experience to implement BTC initiatives.
FY23	Module contractors review journeys as foundation for requirements and are included in requirements sessions with
	staff.
FY23	Develop and align Organizational Change Management schedule with modules.
	Resolve Personnel Issues and complete personnel investigations more quickly to better support employees and
-	(Office of Human Resources, OHR)

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Fiscal Year	Tactic
FY23	Implement strategies and work assignments for the ER team to reduce turnaround time by 20% for completion of ER
	team assignments.
Objective 4.7 Position the IT workforce for success. (Information Technology Division, ITD)	
FY23	Improve IT talent management processes.