Summary: SUD Mid-Point Assessment Review. Human Services Department (HSD) response to CMS follow up email received September 9, 2023.

CMS reviewed the SUD Mid-Point Assessment (MPA), submitted on June 28, 2022. CMS appreciates New Mexico's commitment to robust monitoring of its demonstration and the thorough approach taken by the state and its contractor to assess the demonstration's progress, and we would like to offer the following feedback.

Overall, we are pleased that the metrics are showing progress the state has made through this demonstration so far, and we hope to see this continue. However, we are concerned about the implementation action items the report indicated haven't been completed and request that the state provide updates, timelines, and additional information (as warranted) for addressing each:

Milestone 1: Access to critical levels of care for OUD and other SUDs, Five action items were incomplete.

Action:	HSD Response
Add SUD to beneficiary eligibility	The state submitted SPA 21-0005 SPA to add SUD
criteria for CLNM health homes	beneficiary eligibility criteria for CLNM health homes. The
through a State Plan Amendment	SPA was approved on February 15, 2021 with an effective
(SPA) and rule which includes all	date of January 1, 2021. This change has been updated in
OUD/SUD screening.	the revised CLNM Health Home manual available on the HSD
	website at CLNM-POLICY-MANUAL-FINAL-081121.pdf
	(state.nm.us). HSD is in the process of amending the New
	Mexico Administrative Code. In the interim Human Services
	Department (HSD) will implement this change through a
	Provider Supplement issued in May 2023.
Process and add new OTPs as they	Provider enrollment is an ongoing activity that will continue.
apply	The NM State Opioid Treatment Authority (SOTA) worked
	closely with two new OTP applicants in the past year to
	complete the application process. Elite Methadone in Las
	Cruces, NM opened its doors in February of 2023 and
	Empower Clinic in Socorro, NM anticipates opening in
	August of 2023. Both new providers are committed to
	pursuing service delivery in surrounding frontier and rural
	counties through Medication Units or potentially mobile
	clinic services. Further, BHSD is working directly with an
	established Albuquerque-based OTP who is preparing to
	offer a Medication Unit option in Gallup, NM. Without an
	OTP in that community, Gallup residents living with Opioid
	Use Disorder often must travel to Albuquerque for services
	and would be more appropriately served with access to
	medication in their home community. Lastly, utilizing the
	federal State Opioid Response (SOR) grant, in collaboration
	with UNM Opioid Hub team, several OTPs receive funding to
	support expanded hours at their clinics, in order to expand
	access and better serve individuals and their families.
	In addition, the state is currently in process of increasing
	provider rates specific to Maternal Health, Primary Care, and
	Behavioral Health services up to 120% of Medicare rates.

Conduct an analysis for result on	University of New Mexico is conducting this analysis and
calendar year (CY) 1 activities	expected completion is June 2024.
related to availability of providers	
for OP services in all regions of the	
state, including MAT, telemedicine,	
and after-hours access.	
 Conduct an analysis of available 	University of New Mexico is conducting this analysis and
programs for all applicable age	expected completion is June 2024.
levels across the state.	
• 2.5 Partial Hospitalization action 27:	Provider outreach and enrollment is and ongoing activity
work with hospitals to add this	that will continue. To ensure access to high-quality care for
service.	Medicaid members through appropriate reimbursement of
	health care service as well as to attract and retain healthcare
	providers the state is in the process of increasing rates
	specific to Maternal Health, Primary Care, and Behavioral
	Health services up to 120% of Medicare rates and in other
	service areas up to 100% of Medicare rates.
 Develop a report that shows the 	HSD-Behavioral Health Services Division (BHSD) created and
average length of stay for adult	implemented this report in November of 2022. This report
ARTCs across the state. LOS will be	is currently in use by the division.
specific for each of the 3 levels of	
care within an ARTC.	

Milestone 2: Widespread use of evidence-based, SUD-specific patient placement criteria. One action item was incomplete.

Action:	HSD Response
• Conduct an independent evaluation	BHSD reviewed this action item and will to conduct an
of placement criteria and utilization	alternative analysis that measures return on investment
management for all level of ARTCs.	adding ARTC Providers to the Medicaid Plan. Expected
	completion is June 2024.

Milestone 3: Use of nationally recognized, evidence-based SUD program standards to set residential treatment provider qualifications.

One action item was incomplete.

Action:	HSD Response
Develop on-site audit tool for	BHSD has a draft tool in place and is under review by BHSD
ARTCs to ensure placement,	leadership. Expected implementation is December 2023 or
staffing, service standards and	sooner.
placement criteria meet ASAM	
criteria. This will be conducted	
every two years.	

Milestone 5: Implementation of comprehensive treatment and prevention strategies to address opioid abuse and OUD.

One action item was marked as "suspended" with no additional context.

Action:	HSD Response
Continue and expand PAX Good	This item was incorrectly identified as suspended. This
Behavior Game	activity is currently ongoing. BHSD, Office of Substance Abuse Prevention (OSAP) offers the PAX Good Behavior Game packaged training opportunity to 15 new elementary school districts/tribal community sites across New Mexico every year while maintaining the current 22 sites. OSAP supports teacher training, classroom materials, manuals, and partner training contracted through the program developer, PAXIS Institute. OSAP continues to provide ongoing mentoring through coaches working with local sitebased partners providing workshops and data collection as well as Professional Learning Communities with teachers and school administrators contracted through Coop Consulting. OSAP supports the PAX Dream Makers Youth Gathering; a youth-led approach, which empowers youth to create Peace, Productivity, Health, and Happiness through co-developing and implementing action plans for the participants and their community. Additionally, with a vision to start primary prevention at a younger age OSAP is putting forward the opportunity to work with 6 new tribal Head Start programs with a focus on 3-5-year-olds, parents, and community members.

Milestone 6: Improved care coordination and transitions between levels of care. Six actions items suspended.

Action:	HSD Response
 Solicit potential providers in 13 	The state suspended six of the seven outstanding action
targeted counties.	items because it reprioritized its focus away from health
 Evaluate potential health home 	homes and towards certified community behavioral health
applications	clinics (CCBHCs). HSD received a SAMHSA CCBHC planning
• Educate applicants in health home	grant in February 2023.
requirements and provision of	
additional services expected	There are six targeted pilot sites in 6 counties (Bernalillo,
 Develop reimbursement per facility 	Dona Ana, Curry, Eddy, Santa Fe, Sandoval)
 Activate health homes in 13 	
counties	Target population is adults with SMI, children with SED, and
• Repeat above steps and activate all	those with long term and serious substance use disorders, as
remaining counties for health	well as others with mental illness and substance use
homes	disorders. Priority populations include veterans, American
	Indians, and Hispanic populations.
	BHSD will conduct stakeholder meetings to include the
	existing Health Home providers, advocacy groups, and
	partners to provide information and answer questions on

the steps the State has taken toward implementation of CCBHCs and the reasons for moving away from the health home model.

Care coordination continues under the CCBHC model. Both full and shared delegation care coordination are included as part of the States Managed Care program.

CCBHC will be included in a state plan amendment and include all nine required CCBHC services: Crisis mental Health Services, Screening Assessment & Diagnosis, Patient Centered Treatment Planning, Outpatient mental Health and SUD Services, Outpatient Primary Care Screening a& Monitoring, Targeted Case Management, Psychiatric Rehabilitation Services, Peer Support Counseling and Family Support, Intensive Mental HealthCare for those in the Military.

The identified six pilot CCBHC sites cover all four quadrants of NM and serve rural and underserved communities.

During the planning year, the state will work with selected sites to prepare for CCBHC certification by supporting them to participate in the needs assessment and helping them to apply findings.

The state will support training and technical assistance on the aforementioned topics such as assessing gaps in staffing and services, building partnerships and formal relationships, implementing EBPs with fidelity, meaningful consumer input, care coordination, performance measurement and reporting, continuous quality improvement, and implementing and optimizing Health Information Technology Structure (HIT).

The state intends to utilize the CC PPS 1 rate-setting methodology and select utilization and cost data from its Omnicaid Medicaid Management Information System (MMIS) system for members enrolled in the fee-for-service program, as well as encounter data from its managed care program for CCBHC services.

Entire plan is available upon request.