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BEHAVIORAL HEALTH REFORM AND INVESTMENT ACT (SB3)

KRISTIE BROOKS, DIRECTOR OF BEHAVIORAL HEALTH TRANSFORMATION AND INNOVATION

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BEFORE WE START...

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On behalf of all colleagues at the Health Care Authority, we humbly acknowledge we are on the ancestral lands of the original peoples of the Pueblo, Apache, and Diné past, present, and future.

With gratitude we pay our respects to the land, the people and the communities that contribute to what today is known as the **Great State of New Mexico.**

Learn more: About Taos Pueblo at Taospueblo.com



A cloudy morning looking over Taos Pueblo

Photo provided by elpueblolodge.com



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MISSION

We ensure New Mexicans attain their highest level of health by providing whole-person, cost-effective, accessible, and high-quality health care and safety-net services.

VISION

Every New Mexican has access to affordable health care coverage through a coordinated and seamless health care system.

GOALS



IMPROVE Leverage purchasing power and partnerships to create innovative policies and models of comprehensive health care coverage that improve the health and well-being of New Mexicans and the workforce.



SUPPORT Build the best team in state government by supporting employees' continuous growth and wellness.



ADDRESS Achieve health equity by addressing poverty, discrimination, and lack of resources, building a New Mexico where everyone thrives.



PROVIDE Implement innovative technology and data-driven decision-making to provide unparalleled, convenient access to services and information.

OVERVIEW

- Summary of SB3
- Responsible Agencies
- Objectives /Goals
- Timelines
- Current Status

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SUMMARY OF SB3

- SB1/HB2 addresses the financial component that help support SB3.
- SB3 establishes the **Behavioral Health Reform and Investment Act**, which takes a regional approach to behavioral health care, involving all 3 branches of government.
 - Each region, will identify up to 5 behavioral health priorities and request funding to implement a four-year plan.
 - Requires that behavioral health stakeholders work together to support the expansion of behavioral health services in New Mexico.

Signed by the Governor 2/27/2025



RESPONSIBLE AGENCIES

- Health Care Authority (HCA)
 - Behavioral Health Services Division (BHSD)
 - Medical Assistance Division (MAD)
- Administrative Office of the Courts (AOC)
- Legislative Finance Committee (LFC)
- Behavioral Health Executive Committee - New!



OBJECTIVES & GOALS

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BEHAVIORAL HEALTH EXECUTIVE COMMITTEE:

Consists of:

- ✓ Secretary of HCA
- ✓ Director of BHSD*
- ✓ Director of MAD
- ✓ Director of AOC
- ✓ 3 BH experts, designated by AOC
- ✓ Three Behavioral Health Experts appointed by AOC:
 - Dr. Stacey Cox, of Silver City, CEO of the Center for Health Innovation- NM Public Health Institute
 - Dr. Violette Cloud, of Albuquerque, Senior Project Associate with Policy Research Associates, Inc.
 - Former State Senator, Gerald “Jerry” Ortiz y Pino, of Albuquerque.

*Committee Chair

Key Focus:

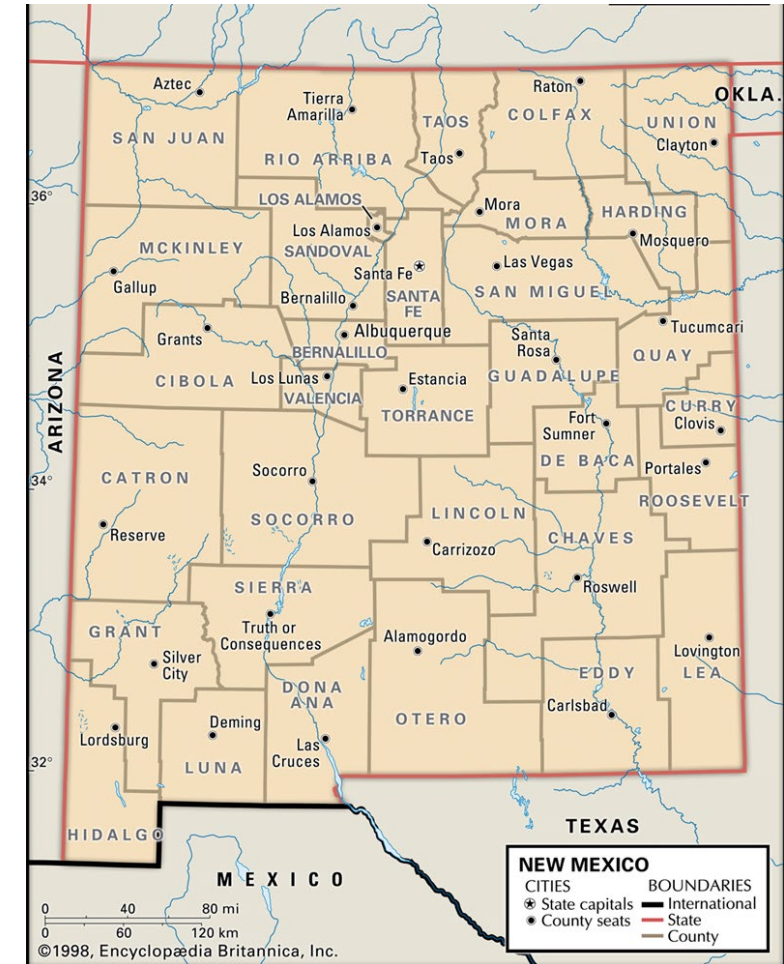
- Meet at least *quarterly* (public meetings)
- Reports to LFC *quarterly*, regarding implementation of regional plans

	Key Goals:
I.	Designate behavioral health regions
II.	Review and approve regional plans
III.	Establish funding strategies
IV.	Monitor and track deliverables



REGIONAL PLAN

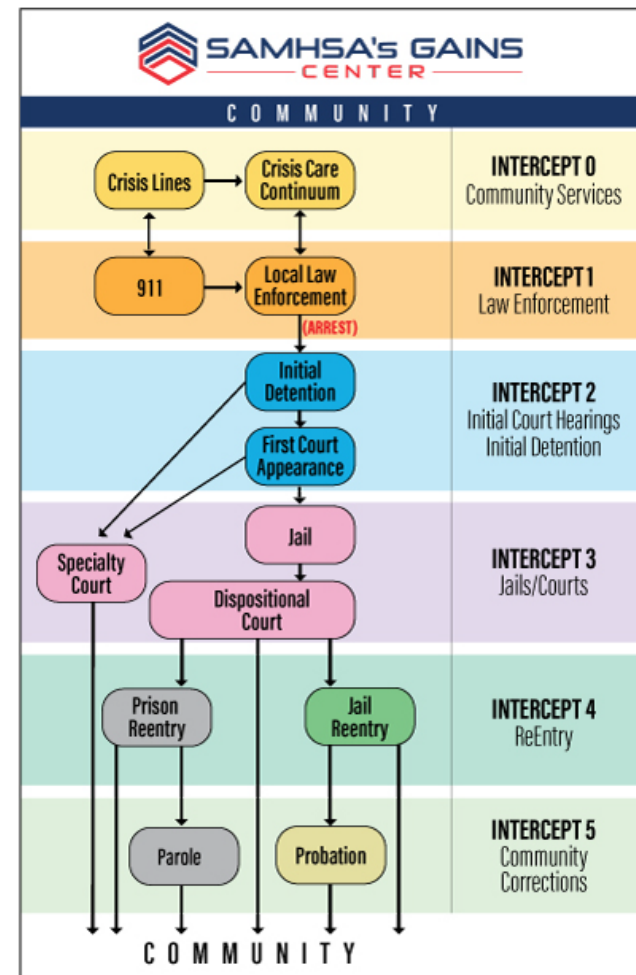
- **“Regional plan”** means a plan that is developed collaboratively by behavioral health stakeholders to provide behavioral services to a behavioral health region.
- Regions are designated by the Behavioral Health Executive Committee.
- Up to 5 state-funded priorities will be identified within each region.



REGIONAL PLAN & SEQUENTIAL MAPPING:

- **“Sequential Intercept Mapping” (SIM)** = a tool that is used as a cross-system approach to help communities identify gaps and resources.

GOAL: To divert people with substance misuse and mental health disorders away from the criminal justice system, and into treatment.



Source: [The Sequential Intercept Model \(SIM\) | SAMHSA](#).



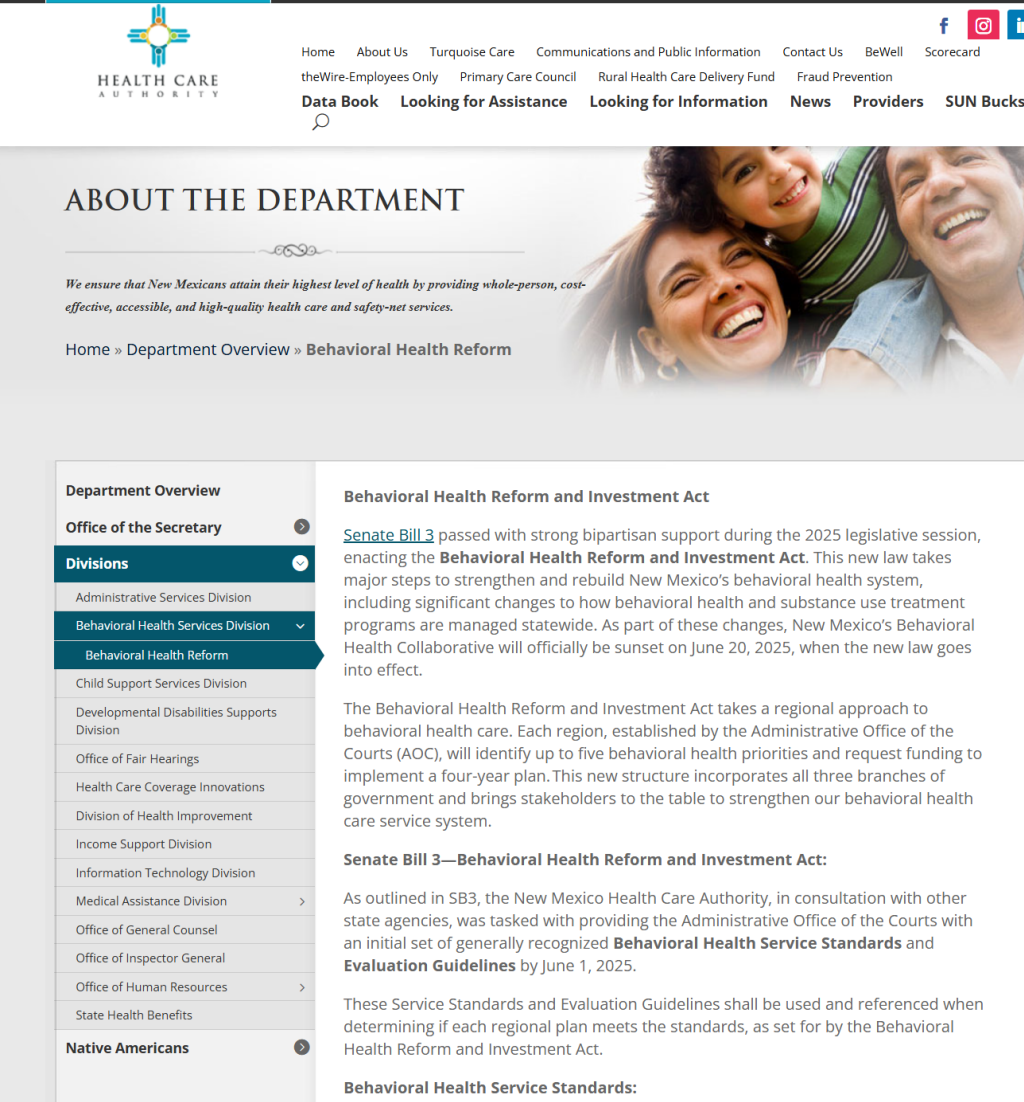
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BH SERVICE STANDARDS:

- BHSD provided AOC with behavioral health *standards of service* (June 1, 2025)
 - BHSD will confirm if each regional plan meets the behavioral health standards.
- LFC and HCA provided AOC with *evaluation guidelines* for behavioral health services (June 1, 2025)

GOAL: To ensure that the best practices of behavioral health services are delivered.



The screenshot shows the website of the New Mexico Health Care Authority. The header includes the logo and navigation links: Home, About Us, Turquoise Care, Communications and Public Information, Contact Us, BeWell, Scorecard, theWire-Employees Only, Primary Care Council, Rural Health Care Delivery Fund, Fraud Prevention, Data Book, Looking for Assistance, Looking for Information, News, Providers, and SUN Bucks. The main content area is titled "ABOUT THE DEPARTMENT" and features a photo of a smiling family. Below the photo, it states: "We ensure that New Mexicans attain their highest level of health by providing whole-person, cost-effective, accessible, and high-quality health care and safety-net services." The breadcrumb trail reads: Home » Department Overview » Behavioral Health Reform. A sidebar on the left lists the Department Overview, Office of the Secretary, Divisions (Administrative Services, Behavioral Health Services, Behavioral Health Reform, Child Support, Developmental Disabilities, Office of Fair Hearings, Health Care Coverage, Division of Health Improvement, Income Support, Information Technology, Medical Assistance, Office of General Counsel, Office of Inspector General, Office of Human Resources, State Health Benefits), and Native Americans. The main content area is titled "Behavioral Health Reform and Investment Act" and contains the following text:

Behavioral Health Reform and Investment Act

[Senate Bill 3](#) passed with strong bipartisan support during the 2025 legislative session, enacting the **Behavioral Health Reform and Investment Act**. This new law takes major steps to strengthen and rebuild New Mexico's behavioral health system, including significant changes to how behavioral health and substance use treatment programs are managed statewide. As part of these changes, New Mexico's Behavioral Health Collaborative will officially be sunset on June 20, 2025, when the new law goes into effect.

The Behavioral Health Reform and Investment Act takes a regional approach to behavioral health care. Each region, established by the Administrative Office of the Courts (AOC), will identify up to five behavioral health priorities and request funding to implement a four-year plan. This new structure incorporates all three branches of government and brings stakeholders to the table to strengthen our behavioral health care service system.

Senate Bill 3—Behavioral Health Reform and Investment Act:

As outlined in SB3, the New Mexico Health Care Authority, in consultation with other state agencies, was tasked with providing the Administrative Office of the Courts with an initial set of generally recognized **Behavioral Health Service Standards and Evaluation Guidelines** by June 1, 2025.

These Service Standards and Evaluation Guidelines shall be used and referenced when determining if each regional plan meets the standards, as set for by the Behavioral Health Reform and Investment Act.

Behavioral Health Service Standards:

[Behavioral Health Reform * New Mexico Health Care Authority](#)



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BEHAVIORAL HEALTH INVESTMENTS:

- Appropriations (HB2) through the Behavioral Health Reform and Investment Act, will be managed by BHSD:
 - i. Will be used to address priorities and funding gaps in each region;
 - ii. Must be equitably shared between each region's identified priorities;
 - iii. May be used up to 4 years in length;
 - iv. May be used to cover uninsured and indigent persons;
 - v. Up to 5% may be used for emergencies that may adversely impact behavioral health services.
- Regions may also request to repurpose any unused balances, granted from the Behavioral Health Reform and Investment Act, to another priority within the region.

GOAL: To provide funding for regional priorities, with input from local agencies.



CREDENTIALING

- HCA, LFC, and LHHS will work together to establish working groups of health care licensing boards.
- MAD will establish a universal credentialing system for provider enrollment and credentialing to be utilized by all MCO's.

GOAL: Streamline the process of behavioral health licensing and reduce administrative burden for behavioral health professionals.



BH SERVICE LIMITATIONS:

- HCA will outline rules relating to behavioral health services, aligning with standards of care.

GOAL: To ensure that all recipients receive the care that they need.

988 AND 911 COORDINATION:

- State agencies that manage these emergency systems (HCA and County Authorities/Dept. of Public Safety) will work together to ensure shared communication and collaborative integration of systems for response to crises and services.

GOAL: Improve crisis and emergency response.



BEHAVIORAL HEALTH AUDIT & EVALUATION

- HCA will be responsible for monitoring contracts and grantees from the Behavioral Health Reform and Investment Act.
- Starting July 1, 2027, HCA will conduct a gap analysis of adult behavioral health services, to inform regional plans and SIM.
 - This analysis will be completed every 2 years.

GOAL: Ensure compliance and quality standards are met, while optimizing infrastructure and the expansion of behavioral health services provided throughout the state.



TIMELINE OF IMPLEMENTATION

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TIMELINE OF IMPLEMENTATION:

May 1, 2025: AOC begins providing HCA with *monthly* updates on regional plans.

December 31, 2025: MAD will establish group of licensing boards to help streamline provider *credentialing* process.

June 1, 2025: BHSD will provide AOC with set of behavioral health *standards and evaluation guidelines* for service.

July 1, 2027: HCA will conduct a gap analysis of BH adult services to inform regional plans. To be repeated every two fiscal years.

June 30, 2027: MAD will establish a universal BH *provider enrollment and credentialing process* for Medicaid.

June 30, 2027: BH Executive Committee will designate a government entity within each region.



FIRST YEAR ANTICIPATED ACTIVITY:

- Build and strengthen relationships with state, local, community partners
- Support and define regions, regional plans and priorities
- Hire additional staff in alignment with appropriations in HB2
- Establish roles, responsibilities, policies and procedures for the new Behavioral Health Executive Committee
- Develop regional finance mechanism
- Develop communication plan





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THANK YOU & QUESTIONS

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