

2024 State-Tribal Collaboration Act Annual Report



This is our final report before embarking on a new transition to the Health Care Authority. The Human Services Department (HSD) presents a synopsis of the top budget, legislative and policy issues and priorities with tribal impact in the programs and services delivered through the HSD Income Support Division, Child Support Services Division, Medical Assistance Division, and Behavioral Health Services Division for fiscal year July 1, 2023, to June 30th, 2024. HSD continues its commitment to uphold the principles of the State-Tribal Collaboration Act of 2009 by building upon the priority of a healthy government-to-government relationship with the twenty-four tribes of New Mexico.

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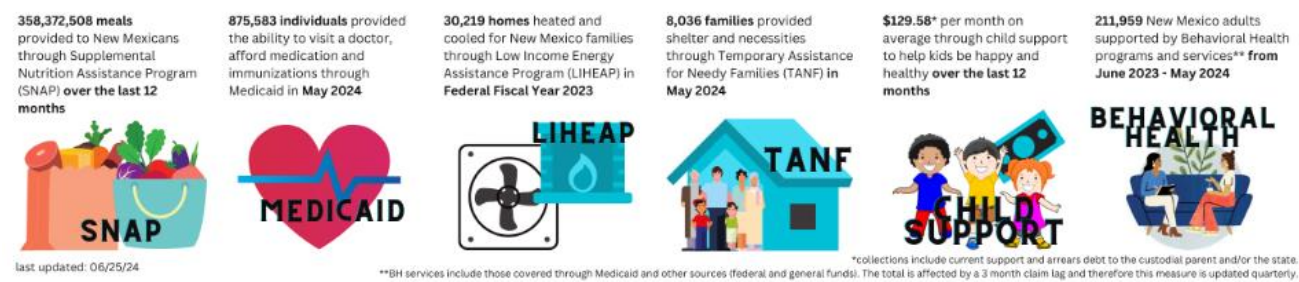
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Agency Overview

The Human Services Department had the following impact.



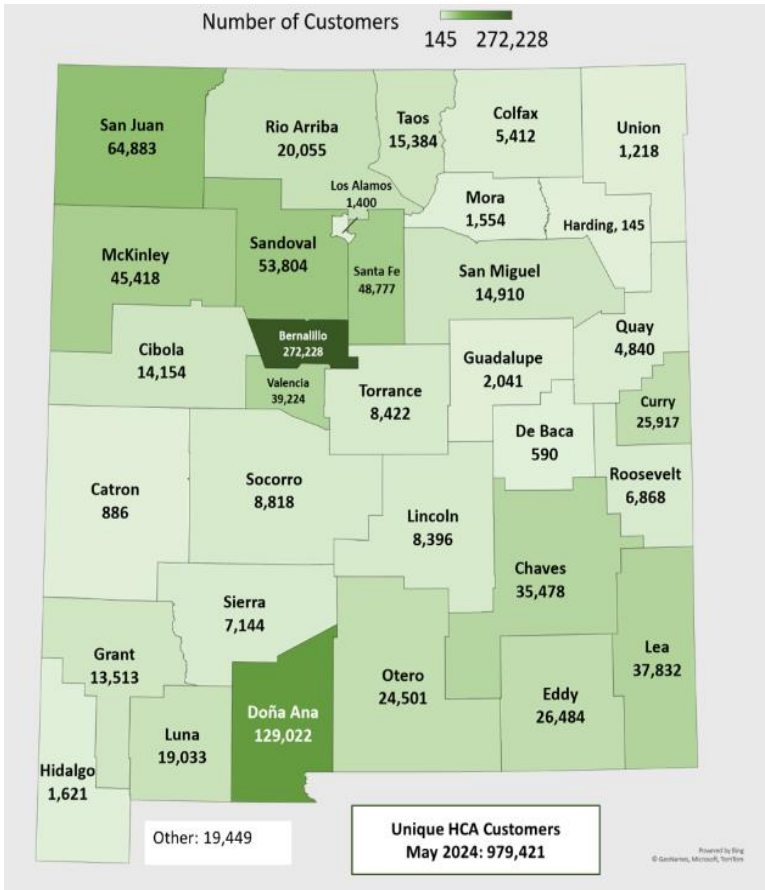
The mission of the Human Services Department (HSD) has been to transform lives. Working with our partners, HSD designs and delivers innovative, high-quality health and human services that improve the security and promote independence for New Mexicans in their communities.

As of June 2024, HSD served 979,421 unique customers though the administration of a variety of programs like Medicaid, Supplemental Nutrition Assistance Program (SNAP), Behavioral Health, Child Support, and additional safety net programs. 12.75% of the population served were Native American.

Under the leadership of Secretary, Kari Armijo, HSD strives to implement a variety of innovations to increase the delivery of services and access to our customers, who in total represent over 50% of the state’s population.

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Unique Number of Customers by Region as of June 30th, 2024



Four Pillars of Strengthening Relationships with Tribes

Our agencies' intent is to continue to serve, be a collaborative resource, and be a partner to New Mexico's 24 tribal leaders, constituents, and communities. In doing so, we have identified four pillars of strengthening relationships with tribes:

Prioritize	Promote	Build	Provide
Tribes, Nations, and Pueblos regarding available and upcoming state funding opportunities—i.e., communication and sustainability of such funding.	tribal health equity by recognizing and respecting self-determination in tribal health and safety net concerns as prioritized by Tribes, Nations, and Pueblos.	trusting relationships with Tribes, Nations, and Pueblos by being visible in communities and connecting with individuals to offer available HSD resources.	agency-wide training of the unique government-to-government relationship for a better understanding of State and Federal obligation to Tribes, Nations, and Pueblos.

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HSD Legislative Updates for SFY24

The following information provides an overview of legislative bills related to HSD and/or bills HSD has a responsibility to administer as passed by the legislature and signed by the Governor.

House & Senate Bills

Senate Bill 14 – Health Care Authority Executive Reorganization - Updates HCA relating to the duties, powers, and responsibilities of the HSD, which becomes defunct on July 1, 2024, and HCA assumes responsibility. Moves Health Care Affordability Fund from the Office of Superintendent of Insurance (OSI) to HCA.

Senate Bill 15 – Health Care Consolidation Oversight Act – Grants power to HCA and OSI to review and approve mergers, acquisitions, and other changes in control of certain health care entities. Ensures transactions do not have a negative effect on health care services in NM.

Senate Bill 161– Acute Care Facility Subsidies – Appropriates \$50 million (GF) to HCA for use in FY 25 and FY26. Provides quarterly subsidies to acute care facilities with fewer than 30 beds to cover revenue losses.

House Bill 7 - Health Care Affordability Fund and Distribution – Changes the distribution amount from the health insurance premium surtax to the HCA fund up to 55% of the net receipts (from 30% currently). Increases access to affordable health care for uninsured New Mexicans.

House Bill 33 – Prescription Drug Price Transparency Act – Increases transparency across the prescription drug supply chain through annual reports that include information from drug manufacturers pharmacy services administrative organizations, pharmacy benefit managers, and health insurers with data about drug pricing and sales.

Health Care Authority Creation

Senate Bill 16 – Health Care Delivery and Access – Medicaid Directed Payment Program for hospitals – Program will leverage federal Medicaid matching funds of about \$1.3 billion for NM hospitals, increasing financial stability and availability of critical services.

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HEALTH CARE
AUTHORITY

The establishment of the HCA is a significant moment for the state of New Mexico that demonstrates our commitment to prioritizing the health and well-being of every New Mexican. This new state government agency represents a strategic consolidation of efforts to optimize safety-net services, health care purchasing, policy, and regulation under one umbrella.

Effective July 1, 2024, the HCA will operate as a new state government agency, integrating resources and mandates from key entities, including the Human Services Department (HSD), the Employee Benefits Bureau from the General Services Department (GSD), the Health Care Affordability Fund team from the Office of Superintendent of Insurance (OSI), and the Division of Health Improvement

and Developmental Disabilities Supports Division from the Department of Health.

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The New Mexico Health Care Authority's fifteen divisions uniquely contribute to the agency's 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***

HCA Vision: Our vision is that every New Mexican has access to affordable health care coverage through a coordinated and seamless health care system.

Our goals are to:

- 1. Leverage purchasing power and partnerships to create innovative models of comprehensive health care coverage that improve the health and well-being of New Mexicans and the workforce.*
- 2. Achieve health equity by addressing poverty, discrimination, and lack of resources, building a New Mexico where everyone thrives.*
- 3. Implement innovative Technology and data-driven decision-making to provide unparalleled, convenient access to services and information.*
- 4. Build the best team in state government by supporting employees' continuous growth and wellness.*

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Four of our HCA Divisions support **health care and behavioral health delivery** for New Mexicans.

MAD
Medical Assistance Division

Oversees New Mexico's Medicaid program, Turquoise Care, and supports the Medicaid Advisory Committee, which includes a diverse group of stakeholders contributing to policy and program administration

BHSD
Behavioral Health Services Division

Manages adult behavioral health and substance use care in New Mexico and collaborates on making policies and strategies with the New Mexico Behavioral Health Collaborative

HCAF
Health Care Affordability Fund

Lowers health care costs and premiums for eligible individuals, small businesses, and uninsured New Mexicans

SHB
State Health Benefits

Provides comprehensive and competitive benefits to employees of the State of New Mexico and participating Local Public Bodies, including their qualified family members

Two of our HCA Divisions support **safety-net service delivery**, helping to keep New Mexicans healthy.

ISD
Income Support Division

Designs and delivers innovative, high-quality health and human services that improve security and promote independence for New Mexicans in their communities

CSSD
Child Support Services Division

Aids children by ensuring they receive financial and medical support, thereby enhancing their overall well-being and stability



Two of our HCA divisions offer programs that contribute to both **health care and safety-net services**.

DDSD
Developmental Disabilities Supports Division

Oversees community support and Medicaid waiver programs for individuals with intellectual and developmental disabilities, promoting a life of respect, empowerment, and safety

DHI
Division of Health Improvement

Ensures regulatory compliance in health services through licensing, investigations, background checks, nurse aide programs, and lab certifications for safety and health standards

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Seven of our HCA Divisions **provide critical program support services.**

ASD <i>Administrative Services Division</i> Manages support services and financial activities for HCA funds, aiming to enhance accountability through effective business processes and comprehensive management of budgets, compliance, and contracts	ITD <i>Information Technology Division</i> Delivers efficient and cost-effective IT services to support the HCA's mission and optimize technology investments	OFH <i>Office of Fair Hearings</i> Conduct and schedule numerous hearings across various public assistance programs, with final decisions issued by HCA division directors in line with regulations	OIG <i>Office of Inspector General</i> Combats fraud, waste, and abuse through audits, investigations, and overseeing specific integrity programs for health care and safety net services
OGC <i>Office of General Counsel</i> Provides legal services to all HCA divisions, assisting with contract development, hearings, litigation, legislative matters, negotiations, document evaluations, training, and compliance with laws and regulations	OHR <i>Office of Human Resources</i> Supports the recruitment and retention of quality employees for the HCA, offering training, development, and comprehensive HR services to more than 2,000 staff members	OOS <i>Office of the Secretary</i> Supports agency-wide operations and the Secretary's priorities through strategic communications, stakeholder engagement, planning, policy and budget formulation, and project management	

A Summary of HSD’s Key Accomplishments in State Fiscal Year 2024

Medicaid Assistance Division (MAD)

- New Mexico Medicaid received federal approval to extend continuous health insurance coverage to children from birth to age six, benefiting 92,842 children. Starting January 1, 2024, this expansion eliminates the need for annual Medicaid renewals for this age group, ensuring uninterrupted access to essential health care services.
- The Medicaid Home visiting program will be expanded to more providers, offering important early support to new families during pregnancy and post-birth.
- Opioid Treatment Program (OTP) - Covers Medication Assisted Treatment (MAT) services provided through an Opioid Treatment Center. New Mexico updated its Medicaid state plan to include provisional certification to the accreditation and certification standards of treatment centers effective November 1, 2023.
- As of July 1, 2023, New Mexico Medicaid is adding CHW/CHR services as a new reimbursable preventive service. CHW/CHR services include health promotions and coaching, health system navigation and clinical support.

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- Turquoise Care expanded authority to permanently allow State-authorized legally responsible individuals (LRIs), such as relatives and guardians, to render Personal Care Services (PCS) as paid caregivers for members under circumstances which include the inability to find and retain other qualified, suitable caregivers.
- An additional 1,000 Community Benefit slots were approved effective July 1, 2024, for the long-term services program in Turquoise Care. These community-based services are for members who meet a nursing facility level of care (NF-LOC) and, with the right services, can remain in their communities and out of nursing facilities.
- Effective July 1, 2023, NM Medicaid approved reimbursement of Community Health Workers (CHW) and Community Health Representatives (CHR) for services in an outpatient setting. New Mexico is now the first state to eliminate the need for a physician's order for every visit by a community health worker and community health representative.
- The Human Services Department began reimbursing Tribal 638 Nursing Facilities at the Enhanced Medicaid Rate (EMR) effective August 18, 2023, which is the Federal OMB rate. There are two tribally run nursing facilities in the state, and Laguna Rainbow Care Center is the first facility to receive this EMR.
- New Mexico was selected by the Health Resources and Services Administration (HRSA) to develop, implement, and align health services with safe, affordable housing programs for the homeless and people at risk of losing their housing.
- The addition of chiropractic services has been approved in SFY 23 and is now a benefit added to the 2024 1115 Waiver for Turquoise Care.
- HSD has successfully implemented a substantial \$409 million increase in reimbursement rates for most Medicaid health care providers. This significant investment is designed to fortify and support the health care workforce in New Mexico, ensuring that the state's Medicaid customers receive essential health care services.
- The Medical Assistance Division developed a training guide for Indian Health Service (IHS) and Tribal 638 providers on Fee for Service transportation. This training module will be presented to IHS and Tribal 638s in SFY25.
- Tribal 638 and IHS received the following amounts for calendar year under the State Plan Amendment #70-2 for Reimbursement of Outpatient Pharmacy Refills.
<https://www.hca.nm.gov/wp-content/uploads/LOD-70-2-I.H.S.-Tribal-638-Outpatient-Pharmacy-Annual-Reimbursement-Rate-Changes.pdf>
 - CY 2023
 - Fee For Service total: \$836,174,054.06
 - Managed Care total: \$111, 292, 595.12
 - CY2024 (as of May 2024)
 - Fee For Service total: \$201,830, 114.90
 - Managed Care total: \$26,021,635.67
- Rural Health Care Delivery Fund - The \$80 million Rural Health Care Delivery Fund under Governor Lujan Grisham's administration advances health care access in rural, frontier, and Tribal communities, including primary care and behavioral health. The following Tribal programs were awarded grant funding:

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- **Breath of My Heart Birthplace** | Award Amount: \$203,661.10—Funding will be used to expand tribal midwifery services and create on-going training in midwifery for tribal students.
- **First Nations Community Health** | Award Amount: \$240,000—Funding will be used to create mobile primary care services.
- **Pueblo of Picuris** | Award Amount: \$4,975,903.00—Funding will be used to expand primary care, behavioral health, dental and emergency transportation services.
- **Ft. Defiance Hospital/Tsehootsooi Medical Center** | Award Amount: \$6,000,000—Funding will be used to create a new tribal clinic in Gallup, NM.
- **Laguna Pueblo** | Award Amount: \$1,097,512.50—Expansion of primary care services at the Community Health Center.

Behavioral Health Services Division (BHSD)

- 1 year into 988 service, the 988-call center is clinically staffed and provides crisis intervention capabilities through phone, text and chat 24/7/365hours, days of the week, and days in the year. In FF2024, 988 achieved:
 - 39,091 total contacts, 45% increase in calls in NM in first year.
 - Average call time: 13.8 minutes.
 - 88% of calls were addressed by counselors.
 - Counties with highest contacts per 1,000 residents: Grant (11.96), Sierra (10.02), Bernalillo (8.68), Taos (8.03), and McKinley (6.72).
 - 988 may have saved the lives of 4,732 New Mexicans who experienced suicidal ideation.
- Opioid Use Disorder Prevention Team: Created a multimedia campaign that included information about overdose and response training, and distribution of nasal naloxone to reduce risk of overdose.
 - Total Reach: 1.3 M New Mexicans (social engagements, ad clicks or website visits)
 - Technical assistance and trainings for first responders, communities, and providers (including Native American, rural and frontier communities) expands access to resources and information. From January to June 2023:
 - 1,692 individuals trained and 8,682 Naloxone kits distributed.
 - 36 trainings and 206 Naloxone kits distributed to tribal partners.
 - Naloxone distribution expansion to 4 large county providers (Doña Ana, Rio Arriba, Santa Fe and Bernalillo).
 - In March, the Food and Drug Administration approved the sale of over-the-counter Naloxone.
 - BHSD collaborated with the New Mexico Attorney General's Office to launch the ***Don't Be Taken for a Ride*** campaign aimed at bringing awareness of Medicaid scams to New Mexico's most vulnerable and unsheltered population. Both agencies launched social and mass media campaigns to reach Native Americans being fraudulently invited to drug and alcohol treatment in Arizona.

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Income Support Division (ISD)

- Implemented Real Time Eligibility (RTE) for Interim Reporting (IR) for SNAP and Cash programs. The RTE IR allows for the “Renew My Benefits” application to be completed through Yes NM and to go through a review process. If there is no change, the system certifies the application with no worker interaction needed.
- The Electronic Stolen Benefit State Plan was approved to assist SNAP customers with the replacement of their SNAP benefits due to skimming of their SNAP benefits stolen electronically. As of today, ISD has replaced \$2,209,374.81 in SNAP benefits for New Mexicans.
- During the 2024 Legislative Session, ISD secured funding for the following Governor’s Food Initiatives:
 - Increase in the Federal Poverty Income Limits for SNAP households who are broad-based categorically eligible to 200% (implementation set for October 1)
 - Increase of the State SNAP supplement to households that have elderly or disabled members will be increased up to \$100.
 - ISD is working collaboratively with the Public Education Department to issue SUN Bucks for School Year 2023-2024. The \$120 issuance for children who receive free and reduced school meals will occur August 5, 2024.
- ISD in collaboration with Aging and Long-Term Services Department (ALTSD) issued an additional \$135 to 11,834 senior or disabled households who received the State SNAP Supplement for the month of February 2024.
- Through the pilot SNAP Outreach Program, HSD partnered with Roadrunner Food Bank (RRFB) as a SNAP Outreach contractor. RRFB is New Mexico’s largest food bank, spanning 16 counties and serving numerous tribal communities through its extensive partner network of food pantries. RRFB has started making strides to conduct in-person outreach in Tribal communities. More recently, RRFB was able to distribute information on their SNAP/public benefits assistance line to community members in Jemez, Isleta Pueblo, and the Torreon Chapter House on the Navajo Nation reservation. At these three outreach events, the RRFB team distributed approximately 1,353 resources. These resources included SNAP outreach material (information on how to apply and number to call to get assistance with the SNAP application), RRFB distribution information, behavioral/mental health resources (NM Crisis Assistance Line/AGORA), and Animal Humane Pet Food Bank information.
- HSD worked with the Affordable Connectivity Program (ACP), a Federal Communications Commission (FCC) program to lower the cost of broadband for eligible households, making internet more accessible. The \$14 billion ACP provides up to a \$30 discount per month toward internet service for eligible households and up to \$75 per month for qualifying households on tribal lands.
- To mitigate the loss of federal SNAP emergency allotments (EA) ending February 2023, HSD issued a \$50 SNAP supplement to all identified elderly/disabled SNAP cases March-June. HSD efforts are to continue to provide access to funds for food banks, to establish ongoing food box distributions, and to provide ARPA funds to purchase food for communities.
- The Human Services Department (HSD) launched optional electronic notices to customers about their benefits. E-notices are an easier way for some to view and receive important

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notices from HSD. The fastest and easiest way to renew benefits is by accessing YESNM account at www.yes.state.nm.us More information is found on our website: <https://renew.hsd.nm.gov/partners-toolkit>.

- ISD Issued \$22 million in supplemental utility assistance payments to 120,266 lower-income households.
- ISD provided 4,741 lower-income households stipends up to \$1,500 in water and wastewater assistance.
- ISD provided Disaster SNAP to 1,996 New Mexicans (totaling \$446,309.00) affected by wildfires and partnered with community organizations to meet other needs (e.g., housing, medical supports).
- ISD Increased TANF cash payments by 23%.
- ISD Collaborated with Taxation and Revenue Department (TRD) to distribute \$15 million in economic relief payments.
- ISD implemented transition bonus cash for individuals' transitioning from TANF.
- ISD supported aged/disabled adults with additional SNAP payments for 3 months during the unwinding of the Public Health Emergency (PHE).
- ISD received approval for several US Food & Nutrition Services waivers reducing administrative burden for the unwinding of the PHE.

Child Support Services Division (CSSD)

- Supported families with children living in poverty by updating the Child Support Guideline Schedule to include a Self-Support Reserve (SSR). "Self-Support reserve" is a formula that ensures the payer parent has sufficient income to maintain a minimum standard of living, resulting in more consistent payments over the child's lifetime.
- January 2024 – Eliminated the required \$5 monthly payment for parents whose children were receiving Medicaid benefits.
- Launched the third public service campaign to promote the Child Support Services Division in English, Spanish, and Diné.

Division Summaries and Updates for State Fiscal Year 2024

Medical Assistance Division (MAD)

<http://www.hsd.state.nm.us>

Turquoise Care – New Mexico Medicaid's Introduction to the 1115 Waiver

Initiatives in the 1115 Waiver Renewal Application (Turquoise Care)

HSD submitted a five-year renewal application for the state's Medicaid program to the U.S. Centers for Medicare & Medicaid Services (CMS) under the new Medicaid name Turquoise Care December 2022. The renewal application allows for the state to expand benefits and services to their

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Medicaid program. The renewal application has an effective date of January 1, 2024, through December 31, 2028. Initiatives include:

New Mexico Medicaid will change its name from Centennial Care to Turquoise Care on July 1, 2024.

The procurement of the four managed care organizations (MCO) are:

- BCBS of New Mexico
- Molina Healthcare of New Mexico
- Presbyterian Health Plan
- United Healthcare Community Plan of New Mexico

Western Sky Community Care will not be Medicaid MCO after June 30, 2024.

Turquoise Care has three goals:

Goal 1: Build a New Mexico health care delivery system where every Medicaid member has a dedicated health care team that is accessible for both preventive and emergency care that supports the whole person.

Goal 2: Strengthen the New Mexico health care delivery system through the expansion of innovative payment reforms and value-based initiatives.

Goal 3: Identify groups that have been historically and intentionally disenfranchised and address health disparities through strategic program changes to enable an equitable chance at living healthy lives.

Turquoise Care held statewide outreach events beginning in March 2024 through May 2024. There were over 10 Tribal outreach events held in the following communities: Santo Domingo Pueblo, Laguna Pueblo, Taos Pueblo, Zuni Pueblo, Nambe Pueblo, Jicarilla Apache Nation, Gallup, Crownpoint, Pine Hill and Shiprock.

1115 Medicaid Waiver Updates

Approved services

- **Ensuring New Mexico children have continuous Medicaid coverage up to age six.** For children up to the age of 6 years, there will be continuous Medicaid enrollment for this age population. Parents of eligible children under the age of 6 will no longer have to reapply for Medicaid on a yearly basis.
- **New Mexico Medicaid home visiting program expanded statewide to support parents of children from prenatal to age 5.** This program expanded statewide and serves 299 families. Tiwa Babies, a Taos Pueblo program, is the only tribal community home visiting (CHV) provider in the state. Tiwa Babies provides service to both Native American and non-Native American families.
 - **Permanently allow State authorized relatives, guardians, and/or legally responsible individuals (LRI) to render Community Benefit Personal Care Services (Community Benefit PCS).** This service authorizes the state to support unpaid caregivers and ensure that individuals eligible for Home and Community Based Services (HCBS) get their needs met in the community. This approval under Turquoise Care will allow more qualified providers and ensure that relatives/guardians and other LRI's to be compensated for caregiving.
- **Medicaid coverage to justice involved individuals 30 days prior to release** – This program supports the justice-involved population prior to release (incarcerated persons in state prisons,

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local jails, youth correctional facilities, tribal holding facilities or tribal jails). MAD was approved to create a justice re-entry program to provide benefits to any Medicaid-eligible adult or juvenile 90 days prior to leaving incarceration or detention. Benefits include, at a minimum, case management, Medication Assisted Treatment, and 30-days prescription refill.

- **Expanded access to supportive housing by providing safe and stable housing to individuals more at-risk of adverse health outcomes** - Under Turquoise Care, the Supportive Housing Program will continue providing pre-tenancy and tenancy support activities to members with SMI that are part of the Linkages Supportive Housing Program. HSD hopes to expand these services to more members.
 - **HSD is proposing two new home delivered meals pilots** - These will serve community benefit members who are facing food insecurity that jeopardizes the member's ability to remain in a community-based setting and pregnant members with gestational diabetes.
- Medical Recovery Housing** - Recovering from a hospital stay, illness, or injury can be challenging. CMS approved a pilot Medical Respite program at one site to provide short-term housing stability during recovery that may include monitoring of the individual's condition, and other support.

Medicaid Unwinding/Renew NM Renew New Mexico

HSD facilitated planning activities related to the end of the federal Public Health Emergency (PHE) declaration in accordance with federal guidance. NM Medicaid had a 14-month unwinding process that began March 2023 and ended April 2024. This work included IT system planning, policy work and communications planning to determine the best strategies for sunsetting the Medicaid Maintenance of Effort (MOE) and resuming normal recertification processes to NM Medicaid applications.

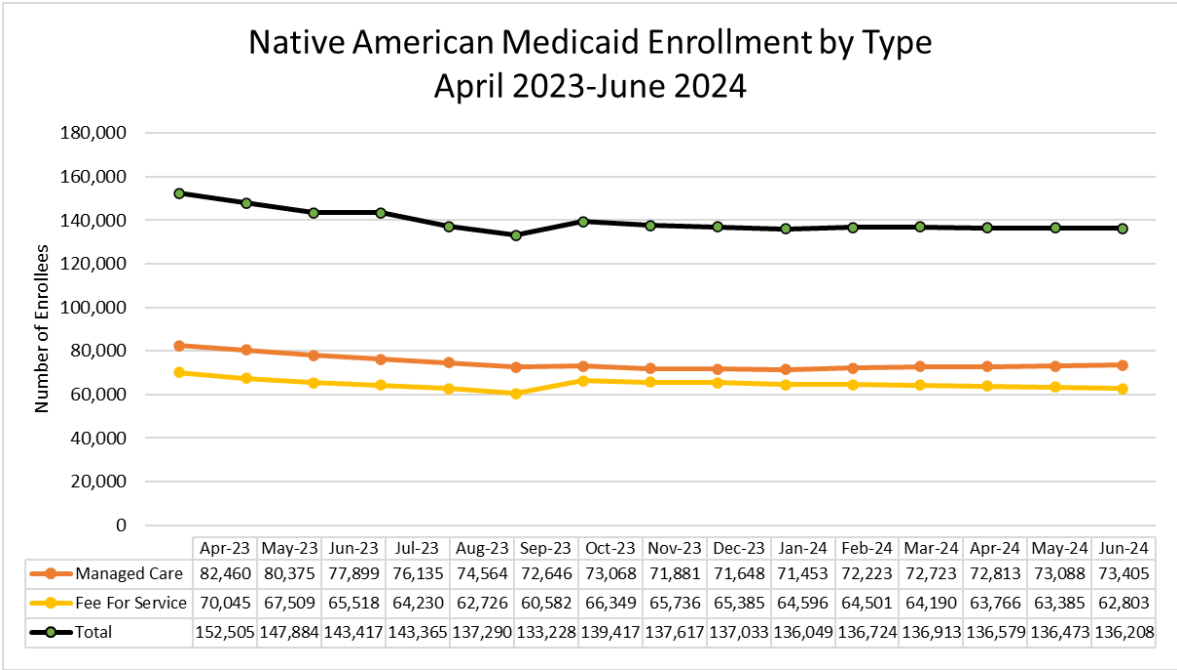
HSD conducted a statewide public awareness and multimedia/multilingual campaign that included communication to over one million customers who received text reminders and multimedia such as TV and radio commercials, billboards, transit, posters, flyers and outreach events in tribal communities. The campaign was conducted in English, Spanish and Dine as requested.

HSD anticipated a modest disenrollment of Native Americans at the end of the PHE. Information from April 2023 to June 2024, Medicaid Enrollment Reports (MERs) shows an 11% (16,000) drop in Native Americans enrolled in Medicaid which could be due to financial reasons, moved out of state, didn't renew their Medicaid application, or complete the renewal process.

For individuals that are financially ineligible for full benefit Medicaid programs, they may qualify for subsidized healthcare coverage through BeWellnm. The Legislature authorized the Office of Superintendent of Insurance (OSI) to use funds from the Health Care Affordability Fund to provide premium help to those transitioning from Medicaid to coverage on BeWellnm. This fund will pay the first month's premium for enrollees who meet the following criteria:

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Below is a graph of Native American enrollment in Medicaid during the unwinding period from April 2023 to June 2024.



Behavioral Health Services Division

https://www.hsd.state.nm.us/about_the_department/behavioral_health_services_division/

BHSD serves as the Mental Health and Substance Abuse State Authority for New Mexico with a responsibility to address the need for, planning, monitoring, and continuous quality of services across the state. BHSD focuses on strategies for mental health promotion, substance abuse prevention, and treatment for individuals in New Mexico.

BHSD works in partnership with the Medical Assistance Division (MAD) to oversee contracts with the Medicaid Managed Care Organizations (MCO) to ensure the provision of Medicaid behavioral health benefits. BHSD is actively engaged in projects that include collaboration with the Children, Youth, and Families Department (CYFD), the Department of Health (DOH), the Indian Affairs Department (IAD), the Department of Corrections (DOC), the Department of Veteran Services (DVS), and the Behavioral Health Planning Council (BHPC) inclusive of the local collaboratives, as well as providers and consumers within the state.

Program/Service Overview & Native American Initiatives/Updates

Policy Unit

Housing Programs/Services

The Linkages Program provides rental assistance for individual with a serious mental illness diagnoses who are homeless or at-risk of becoming homeless. Linkages reserves at least 10% of vouchers for Native American populations. Funding increased 20% in FY24.

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The Set Aside Housing Program (SAHP)/Local Lead Agencies (LLA) is designed to provide supportive housing for individuals with special needs, while offering resources for justice programs and services. There are 13 LLAs that serve 19 New Mexico counties and/or tribal lands, two of which are tribal LLAs—i.e., Pueblo Zuni and Pueblo of Acoma.

Reach, Intervene, Support, and Engage (RISE) provides behavioral health treatment services for adults experiencing incarceration and transitional behavioral health services before or upon returning to the community. In FY24, RISE sites increased from 8 to 14 NM Counties. Grant County supported a NA participant in reuniting with his family after engaging in a virtual Talking Circle. Socorro County continued to provide Tribal Wellness programming and participated in a Recovery Pow Wow in September 2023. Lincoln County provided supported the Mescalero Apache Blessing Run.

Clinical Unit

Clinical Programs/Services

Adult Accredited Residential Treatment Centers (AARTC) provide diagnostic and therapeutic services for inpatient/outpatient facilities. Services provided are reimbursable by Medicaid. Three AARTC's provide services specifically to Native Americans: Four Corners Recovery Center, Hoy Recovery and Cenikor. Four Corners Detox Center opened a new Intensive Outpatient services location in Gallup NM. Ten NA providers attended a series of American Society of Addiction Medicine (ASAM) trainings.

Comprehensive Community Support Services (CCSS) provides services for adults and children with Serious Mental Illness (SMI) or Severe Emotional Disturbance (SED) diagnoses, moderate to severe substance use disorder (SUD), co-occurring disorders, or an eligible recipient with a diagnosis that does not meet the criteria for SMI, but for whom time limited CCSS would support their recovery and resiliency process. Services provided by CCSS are reimbursable by Medicaid. CCSS is provided statewide in 25 counties where there are high populations of Native Americans.

Assertive Community Treatment (ACT) is an intensive and highly integrated approach for community mental health service delivery. Services are provided by a transdisciplinary team, mental health clinicians, clinicians with a specialty in SUD, employment specialists, a psychiatric provider, registered nurses (RNs), and often housing or general case management specialists. In FY24, ACT hosted several training courses: ACT Foundations, ACT Foundations, Enhanced-Illness Management and Recovery, Motivational Interviewing, and Individual Placement and Support.

Suicide Prevention/Veteran Services Programming provides various support services rendered to veterans. Each provider is required to provide services to NA populations throughout the state. Services include emergency housing, case management, job training and placement, and Retreats focused on treating the mental and behavioral health of veterans.

Lesbian, Gay, Bisexual, Transgender, Queer, Intersex, Asexual+ (LGBTQIA+) programming is available to individuals' providing education and a safe space for LGBTQIA. Programming is available in Gallup and Farmington. BHSD was able to reinstate Capacity Builders for the last quarter of this year and they serve NA populations in San Juan County. They served 13 Native Americans in the final quarter of FY24.

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Sexual Assault Program provides various support services rendered to survivors of sexual assault. In FY24 Approximately 336 Native Americans of all ages were served. This program is available in Gallup and Farmington.

Women's Services Program provide intensive outpatient and inpatient services that will prevent and/or reduce mental health and substance use problems in women through the provision of intensive support services. There are 6 providers located in the following counties: Taos, San Miguel, Colfax, Rio Arriba, Dona Ana, Bernalillo, Valencia, San Juan and Santa Fe Counties and the Jicarilla/Apache Nation.

State Opioid Treatment Authority (SOTA) manages service delivery by Opioid Treatment Providers (OTP's) for adults over the age of 18 with Opiate Use Disorder (OUD). There are OTP clinics near Isleta Pueblo—Albuquerque Health Services and Recovery Services of NM. New Mexico Treatment Services of Farmington offers Medical Assisted Treatment (MAT) services in surrounding communities that border the Navajo Nation. Two Santa Fe Clinics (Santa Fe Health Services and NM Treatment Services of Santa Fe) and two Espanola Clinics (Espanola Health Services and NM Treatment Services of Espanola) are in proximity of the following Pueblo communities: San Juan (Ohkay Owingeh), Cochiti, Nambe, Picuris, Pojoaque, San Felipe, San Ildefonso, Santa Clara, Kewa (Santo Domingo), Taos and Tesuque.

SOTA Community Reinforcement and Family Training (CRAFT) a skills-based approach to empowers families to effectively influence the behavior of a person struggling with substance use and other addictions. Serna Solutions has directed CRAFT training to behavioral health providers and others in Native American communities, including Gallup, Farmington, Ramah Navajo/Pine Hill Reservation, Ohkay Owingeh, Pojoaque and, Santo Domingo.

Office of Peer Recovery and Engagement (OPRE) provides formalized peer support and practical assistance to people who have or are receiving services to help regain control over their lives in their own unique recovery process. OPRE continues funding 2 peer run Native American Wellness Centers that provide cultural and behavioral health education supporting eligible adults and, as appropriate, their family members, other professionals, and the community at large: **Hozho Center** in Gallup, NM & **Healing Circle** in Shiprock, NM

Office of Substance Abuse Prevention (OSAP) manages the various grant programs that provide substance abuse prevention programming, currently 13 programs are funded in 11 counties across the state; 3 programs are in two (2) tribal communities and one (1) school for Native American students. Overdose prevention and harm reduction services are provided to 23 New Mexico Pueblos, Tribes and Nations.

OSAP PAX Good Behavior Game (GBG) collaborates with tribal communities to address prevention initiatives for underage drinking, adult drinking and driving, prescription drug use, illicit drug use. Implemented in 28 tribal schools in New Mexico.

Crisis Programs/Services

988 and the Continuum of Care continues to partner with Poston & Associates to provide Native American specific 988 marketing, education, and outreach throughout the State of New Mexico. Interface with the 988 Crisis Now system from NA populations accounts for 8%-11% of all contacts

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to 988. Santa Fe Recovery Center is making efforts set up a Crisis Triage Center (CTC) in Gallup, with a primary focus on serving Native Americans. 988 had a Native American Steering Committee until October 2023 and intends to resume the committee when staff capacity increases.

Comprehensive Community Behavioral Health Clinics (CCBHC) is a specially designated clinic providing a comprehensive range of community based and outpatient mental health, substance use disorder, and primary care screening services, serving all ages. New Mexico applied for and was awarded a SAMHSA CCBHC Planning Grant in March 2023. BHSD led planning for CCBHC implementation in partnership with several state agencies and community stakeholders—including the New Mexico Tribal Behavioral Health Provider Association, the Native American suicide prevention workgroup, the Native American Tribal Advisory Council (NATAC), the Albuquerque Area Tribal Epidemiology Center (AASTEC) and the Albuquerque Area Indian Health Board (AAIHB).

Stakeholder Collaboration Unit

Behavioral Health Collaborative

The BHC allows several state agencies and multiple resources across state government involved in behavioral health treatment, prevention, and recovery to work on improving mental/behavioral health services in NM. BHSD is a voting member of the NM Behavioral Health Collaborative (BHC) and collaborates with them to establish policy and implement strategies to manage the behavioral health system in NM.

Local Collaboratives (LC) are a part of the BHC. LCs have a voice and advocate to NM leadership, Behavioral Health Planning Council, and legislators. The following are tribal LCs: [1] LC14—Acoma, Isleta, Jicarilla, Laguna, Mescalero, Zuni, [2] LC15—Navajo Nation, [3] LC16—Cochiti, Jemez, Sandia, San Ildefonso, Santa Ana, Zia, [4] LC18—Nambe, Ohkay Owingeh, Picuris, Pojoaque, Santa Clara, Taos, Tesuque. LC18 hosted a suicide prevention in partnership with the Yellow Ribbon Campaign in June 2024 at the Pojoaque Annex with 40 attendees. LC18 also hosted a workshop in partnership with Workforce Integrated Network in June 2024 to educate and inform the community about Peer Support Workers and Community Health Workers. LC16 hosted a training in Jemez with CEUs for ACEs in May 2024 with 25 attendees. One new Tribal LC was brought on in FY24— LC14.

Native American Programs

Native American Services (NAS) is a state general funded grant program. Behavioral health agencies that provide Traditional Healing practices can apply for this grant. The definition of Traditional Healing for this grant is “the knowledge, skills, and practices based on the theories, beliefs, and experiences indigenous to different cultures, whether explicable or not, used in the maintenance of health as well as in the prevention, diagnosis, improvement, or treatment of physical and mental illness.” Services provided in FY24 included: equine therapy, support groups, traditional arts and crafts, sweat lodges, peacemaking, talking circles, traditional mentoring, and auricular therapy. Recipients of the FY24 NAS grant include: *Albuquerque Area Southwest Tribal Epidemiology Center/Albuquerque Area Indian Health Board (AASTEC/AAIHB), Zuni Youth Enrichment Program, 2E Consults, First Nations Community Health Source, Five Sandoval Indian Pueblos, Hozho Behavioral Health, Jemez Pueblo, and Totah Behavioral Health*

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Income Support Division

[Income Support | New Mexico Human Services Department \(state.nm.us\)](https://state.nm.us)

The mission of the Income Support Division (ISD) is to relieve, minimize or eliminate poverty and to make available certain services for eligible low-income individuals and families through statewide programs of financial assistance, food assistance, employment assistance and training services.

The Human Services Department (HSD) also recognizes the importance of developing work readiness in the populations served through public assistance. To do this, HSD has developed programs geared towards the training and placement of individuals into career positions. To learn more about these programs, please visit the [Build Your Future](#) link at the Income Support Division website.

The following data represents the number of Native American beneficiaries' self attesting to *living on tribal land* and receiving benefits from the Human Services Department.

Tribal Residence	Medicaid	SNAP	TANF	General Assistance	LIHEAP
Alamo Navajo	1,190	855	2	0	3
Checkerboard Navajo	2,931	2,318	4	2	0
Jicarilla Apache	247	146	0	0	0
Main Reservation Navajo	8,618	6,547	24	12	18
Mescalero Apache Tribe	331	199	13	0	8
Ohkay Owingeh	84	54	1	0	2
Pueblo of Acoma	350	165	4	0	0
Pueblo of Cochiti	63	21	0	0	0
Pueblo of Isleta	155	81	6	0	6
Pueblo of Jemez	266	148	5	0	0
Pueblo of Laguna	420	227	5	1	0
Pueblo of Nambe	25	15	3	0	0
Pueblo of Picuris	24	18	0	0	0
Pueblo of Pojoaque	9	6	0	0	0
Pueblo of San Felipe	384	226	11	1	18
Pueblo of San Ildefonso	18	11	1	0	0
Pueblo of Sandia	6	5	0	0	0
Pueblo of Santa Ana	22	8	2	0	0
Pueblo of Santa Clara	70	23	0	0	0
Pueblo of Santo Domingo	499	296	0	0	10
Pueblo of Taos	117	50	0	0	2
Pueblo of Tesuque	17	6	1	0	0
Pueblo of Zia	50	31	0	0	0
Pueblo of Zuni	1,670	1,159	6	0	1

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Ramah Navajo	196	172	2	0	0
Southern Ute Tribe	0	0	0	0	0
To'Hajiilee Navajo	113	104	0	0	2

Source: NMHCA ASPEN Database

The following data represents the number of Native American beneficiaries' self-attesting to tribal affiliation and receiving benefits from the Human Services Department.

Tribal Affiliation	Medicaid	SNAP	TANF	Education Works	General Assistance	LIHEAP
Alamo Navajo	2,232	1,424	19	0	1	22
Checkerboard Navajo	19,555	11,789	126	1	19	228
Jicarilla Apache	1,546	857	25	0	0	10
Main Reservation Navajo	31,935	18,721	292	0	40	335
Mescalero Apache Tribe	2,341	1,343	77	0	7	68
Ohkay Owingeh	754	419	14	0	1	23
Pueblo of Acoma	1,743	913	31	0	1	26
Pueblo of Cochiti	310	125	8	0	0	1
Pueblo of Isleta	1,065	488	15	0	1	34
Pueblo of Jemez	1,003	551	31	0	3	10
Pueblo of Laguna	2,153	1,101	37	0	7	18
Pueblo of Nambe	275	148	9	0	0	7
Pueblo of Picuris	131	65	6	0	0	0
Pueblo of Pojoaque	170	71	3	0	0	2
Pueblo of San Felipe	1,619	875	28	0	2	48
Pueblo of San Ildefonso	184	86	7	0	0	0
Pueblo of Sandia	64	25	1	0	0	1
Pueblo of Santa Ana	208	89	5	0	0	0
Pueblo of Santa Clara	319	172	19	0	0	7
Pueblo of Santo Domingo	1,957	1,130	33	0	0	33
Pueblo of Taos	790	408	11	0	1	16
Pueblo of Tesuque	113	53	4	0	0	0
Pueblo of Zia	304	126	7	0	0	2
Pueblo of Zuni	4,575	2,645	48	0	1	10
Ramah Navajo	803	530	8	0	0	5
Southern Ute Tribe	18	14	0	0	0	0
To'Hajiilee Navajo	1,047	613	11	0	1	9
Ute Mountain Ute Tribe	21	12	0	0	0	0
Total	77,235	44,793	875	1	85	915

Source: NMHCA ASPEN Database

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Program and Service Overview-Native American Initiatives

Supplemental Nutrition Assistance Program (SNAP)



The Supplemental Nutrition Assistance Program (SNAP) provides monthly food security to approximately 470,113 New Mexicans, of which 44,793 are recipients with tribal affiliation. The Income Support Division (ISD) has improved the efficiency of processing new, renewal and emergency SNAP applications to meet the federal timeliness standard of 95 percent for all 34 locations since Oct. 1, 2018.

Disaster Supplemental Nutrition Assistance Program (D-SNAP)

During a major disaster declaration by the president or by the United States Department of Agriculture (USDA), disaster relief provisions will be implemented in those areas declared in need of disaster relief. D-SNAP is only administered after a federally declared disaster and after the State of New Mexico receives approval from the USDA, Food and Nutrition Services to activate D-SNAP services. If a D-SNAP is authorized, eligibility for benefits will be based on the applicant's household income, resources and disaster-related expenses.

While Disaster SNAP (D-SNAP) was not implemented in FY2024, our efforts focused on preparing and coordinating readiness plans for potential disaster scenarios affecting tribal communities within New Mexico. Despite not implementing D-SNAP benefits this fiscal year, our team remained proactive in enhancing disaster response capabilities and strengthening partnerships with tribal leaders and relevant stakeholders. We are committed to maintaining readiness and responsiveness to future disaster situations affecting our tribal populations.

SNAP Outreach

Currently in its pilot phase, HSD's SNAP Outreach Program works to ensure that all eligible New Mexicans have equitable access to SNAP benefits by building and implementing a comprehensive and robust SNAP Outreach Program. By expanding the agency's SNAP outreach, HSD strives to reduce food insecurity, improve nutritional health, and enhance the quality of life for individuals and families across the state. Through targeted education, community partnerships, and effective communication, we aim to connect people with the food resources they need to lead healthy and productive lives.

Through the pilot SNAP Outreach Program, HSD has partnered with Roadrunner Food Bank (RRFB) in FFY24 as a SNAP Outreach contractor. RRFB is New Mexico's largest food bank, spanning 16 counties and serving numerous tribal communities through its extensive partner network of food pantries.

RRFB has started making strides to get out to conduct in-person outreach within Tribal communities. More recently, RRFB was able to distribute information on their SNAP/public benefits

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assistance line to community members in Jemez and Isleta Pueblo, and the Torreon Chapter House on the Navajo Nation reservation. At these three outreach events, the RRFB team distributed approximately 1,353 resources. These resources included SNAP outreach material (information on how to apply and number to call to get assistance with the SNAP application), RRFB distribution information, behavioral/mental health resources (NM Crisis Assistance Line/AGORA), Animal Humane Pet Food Bank information, etc.

SNAP Employment and Training Program (SNAP E&T)

The goal of the SNAP E&T program is to assist SNAP recipients to gain skills, receive training and experience that will increase their ability to obtain regular employment. By participating in the E&T program, individuals are offered support services to make completion of the E&T program a reality.

SNAP E&T is collaborating with tribal liaisons to provide services to tribal communities and rural areas. Over the last year, the E&T program staff and tribal liaisons met once a month to discuss and plan outreach in tribal communities.

Between October and April of FY224 SNAP E&T Team attended Tribal outreach events in Dulce, Mescalero, San Ildefonso, Nambe Pueblo, Sandia Pueblo, and was an exhibitor at the Native American Partnership Conference.

SNAP E&T Team attended the Native American Outreach and Education Contractor Training. The team also presented the E&T Program and funding with Laguna Pueblo representative, and traveled to Laguna Pueblo and met with Laguna Pueblo representatives and further discussed E&T and Laguna Pueblo partnership.

Supplemental Nutrition Assistance Program- Education (Snap Ed)

The goal of SNAP-Ed is to improve the likelihood that persons eligible for SNAP will make healthy food choices within a limited budget and choose physically active lifestyles consistent with the current DGA and the USDA food guidance.

SNAP-Ed works with the following implementing agencies to provide direct outreach and education supporting tribal initiatives for healthier food choice, nutrition, and dietary selections.

SNAP-Ed Implementing Agencies (IA):

- New Mexico State University (NMSU) / ICAN (Ideas for Cooking and Nutrition)
- Department of Health (Obesity Nutrition and Physical Activity (DOH ONAPA))
- Kids Cook! (KC!)
- Cooking with Kids (CWK)
- University of New Mexico PRC
 - CHILE Plus
 - Social Marketing
 - Evaluation

Through our tribal outreach we hope to establish new relationships and partnerships to expand collaboration with additional tribes throughout New Mexico.

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NMSU ICAN partnerships include Food Distribution Program on Indian Reservations (FDPIR) sites, Nambe Pueblo, Santa Ana Pueblo and Isleta Pueblo. The Acoma Pueblo FDPIR site will soon be a NM ICAN partnership site. In partnership with Zuni Pueblo Senior Center, Acoma Pueblo Senior Center, Mescalero Elderly Center, and Mescalero Food bank NMSU/ICAN began the process of creating the “Seed to Supper” program that is inclusive of all tribes and cultures in NM.

New Mexico Dept of Health (NMDOH) and Office of Nutrition and Physical Activity (ONAPA) facilitated a healthy meal training using traditional and cultural ingredients for 13 senior centers and health education staff at Kewa Pueblo.

Cooking with Kids Partnership with Ohkay Owingeh Tribal school and Native American Chef Naranjo.

Kids Cook! partnership with Native Health Initiative Running Medicine, A health initiative in various Native Communities.

CHILE Plus is a training for Head Starts and Early Childcare centers that includes several Tribal Head Starts.

HSD Communication and Marketing collaborated with SNAP-Ed Program manager to develop culturally appropriate communication for potential partners. A new partnership was formed with Laguna Pueblo and the Aging and Long-Term Services Division to bring program awareness SNAP-ED to older adults. A partnership with Laguna Pueblo to develop culturally relevant *Eat Smart Play Hard* books for students, which included the addition of Pueblo youth cartoon characters. QR codes for a link to hear their spoken language that pairs with the word search, and updated recipes and colors. This program will be piloted in Fall 2024.

The Emergency Food Assistance Program (TEFAP)

TEFAP is a federal program that helps supplement the diets of people with low income by providing them with emergency food assistance at no cost. USDA provides 100% American-grown USDA Foods and administrative funds to states to operate TEFAP.

For FY24, New Mexico TEFAP was awarded a **Reach & Resiliency Grant**. HSD was awarded \$558,080 for the first round of the TEFAP Reach and Resiliency Grant. The first round of the grant focused on creating infrastructure and expanding into rural and tribal areas. HSD applied and was awarded \$924,895 for the 2nd round of the grant and will focus on collaborating on distributions at the following tribal sites:

- | | | |
|----------------------------|----------------------------|------------------------|
| ○ Jicarilla Apache | ○ Sheep Springs Chapter | ○ San Ildefonso Pueblo |
| ○ Tohatchi Chapter House | House | ○ Taos Pueblo |
| ○ Pinehill Chapter House | ○ Santa Ana Pueblo | ○ Isleta Pueblo |
| ○ Thoreau Chapter House | ○ Jemez Pueblo | ○ PMS Cuba Clinic |
| ○ Acoma Pueblo | ○ Kewa Pueblo | ○ Torreon |
| ○ Laguna Pueblo | ○ Mescalero Apache | ○ San Felipe Pueblo |
| ○ Breadsprings Chapter | ○ Torreon Chapter House | ○ Nambe Pueblo |
| House | ○ Ojo Encino Chapter House | ○ Pojoaque Pueblo |
| ○ Chichiltah Chapter House | ○ Counselor Chapter House | ○ Ohkay Owingeh Pueblo |

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- Santa Clara Pueblo
- Shiprock
- Zuni Pueblo

Food Distribution for the School Breakfast Program (SBP) and National School Lunch Program (NSLP)

USDA designates the Human Services Department (HSD), Income Support Division, Food and Nutrition Services Bureau (FANS) as the state distributing agency responsible for the distribution of USDA Foods to the School Food Authorities in New Mexico.

Foods available from the United States Department of Agriculture (USDA) are used to supplement a SBP and NSLP. The program has delivered USDA food to 155 schools statewide and feeds approximately 168,643 students a day for a total of 30,355, 819 total lunches.

Food and Nutrition Services (FANS) provided USDA foods monthly to the following tribal SFAs:

- | | | |
|-----------------------------|------------------------------|--------------------------|
| ○ Alamo Navajo School | ○ Mariano Lake Community | ○ Khapo Community School |
| ○ Baca Community School | School | (Santa Clara Pueblo) |
| ○ Beclabito Day School | ○ Mescalero Apache School | ○ Santa Fe Indian School |
| ○ Borrego Pass School | ○ Naneelzhiin Ji Olta School | ○ Shiprock Associated |
| ○ Bread Springs Day School | ○ Navajo Preparatory School | Schools, Inc. |
| ○ Chichiltah Jones Ranch | Inc. | ○ HAAK'U Community |
| Community School | ○ Nenahnezad Community | Academy (Sky City) |
| ○ Chooshgai Community | School | ○ Taos Day School |
| School CHOOSHGAI | ○ Ohkay Owingeh | ○ Tohajiilee Day School |
| COMMUNITY SCHOOL | Community School | ○ Tohaali Community |
| ○ Crownpoint Community | ○ Ojo Encino Day School | School |
| School | ○ Pine Hill Ramah Navajo | ○ Tse Il Ahi Community |
| ○ Crystal Boarding School | School Board | TSIYA DAY SCHOOL |
| ○ Dzilth na O Dith Hle | ○ Pueblo Pintado School | ○ Wingate Elementary |
| Community School | ○ San Felipe Pueblo | School |
| ○ Isleta Elementary School | Elementary School | ○ Wingate High School |
| ○ Jemez Day School | ○ San Ildefonso Day School | |
| ○ Lake Valley Navajo School | ○ Sanostee Day School | |

Commodity Supplemental Food Program (CSFP)

CSFP provides supplemental USDA Foods to seniors (60+ years old) who are low-income (Federal Poverty Level at 130% or below). ISD is the implementing state agency responsible for managing CSFP. ISD contracts with the following agencies to provide monthly or bi-monthly food packages in 30 counties.

- ECHO, Inc. in Farmington, and Albuquerque
- Loaves & Fishes, Inc. in Las Cruces
- The Salvation Army Roswell Corps (Mescalero Senior Center is located in the Salvation Army Roswell service area)
- Food Bank of Eastern New Mexico

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The warehouse monthly caseload allotted by USDA is 10,169 for the state. CSFP serves an average of 10,275 individuals monthly. From July 2023 through April 2024, we have served 102,749 individuals for the year. CSFP has sites in the following tribal communities:

- Jemez Springs Senior Citizen Center
- Pena Blanca Community Center
- Pueblo de San Idelfonso Senior Center
- Crownpoint Chapter House
- Lake Valley Senior Center
- Gallup Community Senior Center
includes limited homebound
distribution.
- Naschitti
- Chama Municipal Offices
- Jicarilla Apache Tribe CHR
- Aztec Senior Center
- Beclabito Chapter House
- Huerfano Chapter House
- Nageezi Chapter House
- Sheep Springs Chapter House
- Two Grey Hills Chapter House
- Mescalero Senior Center

Child Support Services Division (CSSD)

[Child Support Overview - New Mexico Health Care Authority \(nm.gov\)](https://nm.gov/child-support-overview)



CSSD administers the state and federal program to establish parentage, establish child and medical support orders, and enforce those orders. Its primary role is to maximize the collection of child support for all eligible New Mexico children. CSSD is required by federal and state law to provide free child support services to families receiving TANF and Medicaid. Families who are not receiving TANF or Medicaid may also apply to CSSD for services. In FY24, there were 49,932 families with child support cases in New Mexico, approximately 2,745 were Native American.

CSSD Services for Tribes:

- CSSD provides child support services to Tribes, Nations and Pueblos across New Mexico by:
- Establishing and enforcing child support orders through tribal courts – based on the Tribe, Nation’s or Pueblo’s own laws and customs.
- Registering tribal court orders in state district courts as appropriate (when a child lives off-reservation).

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- Registering state court orders in tribal courts when appropriate (when a child lives on-reservation).
- Submitting tribal court orders to other states for enforcement of child support court orders, requesting assistance from other states to establish parentage and support for tribal members.
- Providing services to custodial tribal members living on or off tribal lands –as long as the non-custodial parent lives off tribal lands.

Tribal Collaboration

CSSD is in full support of Tribes, Nations and Pueblos interested in developing and operating their own Tribal Child Support IV-D Programs and provide technical assistance upon request. CSSD entered into its first Joint Powers Agreement for operating the child support program on the Navajo Nation since 1993, the first of its kind in the nation. This agreement is renewed annually. This agreement provides assistance to the Navajo Nation IV-D program through services such as the use of the Child Support Enforcement System (CSES), the State Disbursement Unit (SDU), Information Technology, the Consolidated Customer Service Center (CCSC), and CSSD Training Unit.

There are two other Tribal IV-D programs in New Mexico, the Mescalero Apache Tribe, and the Zuni Tribe. The State CSSD works with the Zuni and Mescalero tribes on cases, but no agreement is in place such as the one with the Navajo Nation.

In addition to the work with the Tribal IV-D programs, CSSD has Memorandum of Understanding (MOU) agreements with several Pueblos through program called the Native American Initiative (NAI). The NAI program provides a dedicated attorney that is licensed to practice in Zia, Acoma, Isleta, Laguna, and Santa Ana Pueblos. The agreement with Santa Ana Pueblo is the most recent, which was negotiated during SFY23, and finalized in December 2022. The CSSD attorney appears before the tribal court judges from these Pueblos regularly.

Tribal judges, court staff, and parties often call upon the CSSD attorney when questions arise regarding child support cases involving Tribal members and/or basic child support matters.

CSSD also dedicates Child Support Legal Assistants (CSLA) to 244 active cases for Zia, Acoma, Isleta, Laguna, and Santa Ana Pueblos.

CSSD Native American Caseload by Tribe-State Fiscal Year 2023

Location	Cases	Cases w/orders (%)	Children	Total Collections (SFY2024)
Acoma	76	90.8	114	\$152,228.20
Isleta	65	90.8	109	\$153,442.19
Laguna	99	89.9	149	\$238,372.41

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Zia	3	66.7	4	\$1,440.50
Crownpoint Navajo Nation IV-D	1836	45.9	3039	\$1,038,841.05
Shiprock Navajo Nation IV-D	632	87.7	1,059	\$1,032,959.46
Santa Ana	12	100	1	\$13,986.00
Mescalero	33	42.4	42	\$27,772.34

Table 3: CSSD Native American Caseload as of 2024

Native American Technical Advisory Committee (NATAC)

The Native American Technical Advisory Committee (NATAC) began in September 2012. It was designed to give Tribes, Pueblos, and Nations an opportunity to meet and discuss issues of mutual concern and interest on a quarterly basis. NATAC is comprised of appointees by Tribal leaders, Indian Health Service (IHS) and HSD representatives working on issues of common concern and policy making with the Medical Assistance Division (MAD), Behavioral Health Services Division (BHSD) and the Income Support Division (ISD). The following Tribes/Nations/Pueblos have a designated representative on the NATAC for 2024:

- Pueblo of Laguna
- Pueblo of Nambe
- Ohkay Owingeh
- Pueblo of Picuris
- Pueblo of San Felipe
- Pueblo of San Ildefonso
- Pueblo of Santa Ana
- Santo Domingo Pueblo
- Pueblo of Taos
- Navajo Nation
- Ft. Sill Apache Tribe
- Jicarilla Apache Nation
- Mescalero Apache Tribe

HSD held four NATAC meetings in FY2024 on September 18, 2023, December 18, 2023, March 11, 2024, and June 17, 2024. The meeting minutes and agenda can be found on the HSD website at:

[Native American Technical Advisory Committee - New Mexico Human Services Department \(nm.gov\)](https://www.nm.gov/nat-ac)

In FY23, NATAC members asked for more input into developing the agenda for each meeting. NATAC schedules a pre-meeting two weeks prior to the NATAC meeting date to develop the agenda. The agenda has two new agenda items for each meeting – “Billable Services for Tribes” and “Community Health Representative (CHR) Billing”. NATAC continues to have Medicaid updates by the Medical Assistance Division Director and Behavioral Health Services Division. The following goals are established by the NATAC committee and continue to be a priority moving in FY24:

- **Goal 1:** Increase BH services for Native Americans including community-based services for adults and children.
- **Goal 2:** Increase Medicaid reimbursable provider types (e.g. case managers, community health representatives, care coordinators) and services for IHS and Tribal Clinics.

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- **Goal 3:** Increase the number of long-term care options.
- **Goal 4:** Increase Native American enrollment in Medicaid.

Tribal Notifications

The Health Care Authority continues to be in compliance with the State-Tribal Collaboration Act by ensuring tribal notification and consultation are timely provided to tribal leaders.

In FY24 the Human Services Department held a tribal listening session on Turquoise Care, the new name for New Mexico Medicaid, replacing the former name Centennial Care. MAD sent out 26 written tribal notifications to tribal leaders and announced the listening sessions and welcomed any opportunities to host a formal tribal consultation. The breakdown is as follows:

Behavioral Health	Long Term Services/Supports	Medicaid (Enhanced Medicaid Rate, Health Homes, Medicaid rules, Demonstration waiver)	Other (Medicaid audit, rates, lactation)
6	5	11	4

To view a list of tribal notifications that have been sent out in FY24, click on the following link:

<https://www.hsd.state.nm.us/providers/written-tribal-consultations/>

Agency Efforts to Implement the State-Tribal Collaboration Act (STCA)

In 2009 Senate Bill 196 was signed into law, enacting the State-Tribal Collaboration Act, also known as STCA. It is a statutory commitment by New Mexico State government to work with Tribes, Nations and Pueblos on a government-to-government basis on issues of mutual concern. HSD developed its own State-Tribal Consultation, Collaboration and Communication Policy that aligns with Indian Affairs Department and Senate Bill 196. Through this policy, HSD seeks to improve partnerships and communication with New Mexico tribes.

The HSD Tribal Liaisons, in partnership with the State Personnel Office and the HSD Training Department offer training that focuses on the importance of building relationships with tribal communities and tribal entities. The State Personnel Office offers a training tool called “Building Cultural Equity with Native Nations”. For FY 24, 42 staff completed the training. Additionally, HSD completes a new hire orientation for all new employees to the agency. The Tribal Liaisons completed STCA training for FY24 to 114 new agency staff.

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Department Summary

In summary, HSD has now transitioned to the HCA effective July 1, 2024. This transition marks a significant milestone for the people of New Mexico. The HCA will work toward our vision of providing health care and safety net services to all New Mexicans. It is the HCA's intent to be a respectful, transparent, and collaborative partner with all Tribes, Nations and Pueblos. Our four pillars approach to work with tribal partners is a testimony to our commitment to a brighter and healthier future for our tribal beneficiaries and communities.

- **Prioritize** Tribes, Nations, and Pueblos regarding available and upcoming state funding opportunities—i.e., communication and sustainability of such funding.
- **Promote** tribal health equity by recognizing and respecting self-determination in tribal health and safety net concerns as prioritized by Tribes, Nations, and Pueblos.
- **Build** trusting relationships with Tribes, Nations, and Pueblos by being visible in communities and connecting with individuals to offer available HSD resources.
- **Provide** agency-wide training of the unique government-to-government relationship for a better understanding of State and Federal obligation to Tribes, Nations, and Pueblos.

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Key Agency Contact Information

The following information is a list of key individuals who are working diligently to administer and provide guidance to 15 divisions within the Health Care Authority. For any questions or concerns, please feel free to contact division staff or the tribal liaisons. We value your input immensely and look forward to our continued collaboration under the New Mexico Health Care Authority.

Human Services Department Key Contact Information



Kari Armijo, Cabinet Secretary
Kari.Armijo@hca.nm.gov



Kathy Slater-Huff, Deputy Secretary
katherine.slater-huff@hca.nm.gov



Kyra Ochoa, Deputy Secretary
Kyra.Ochoa@hca.nm.gov



Alex Castillo Smith, Deputy Secretary
alex.castillosmith@hca.nm.gov



Alanna Dancis, DNP, Chief Medical Officer
Alanna.Dancis@hca.nm.gov



Betina McCracken, Child Support Services Director
Betina.McCracken@hca.nm.gov



Nick Boukas, Behavioral Health Services Director
Nick.Bokus@hca.nm.gov



Dana Flannery, Medicaid Director
Dana.Flannery@hca.nm.gov

HSD Key Contact Information

Niki Kozlowski
Income Support Division Director
| Niki.kozlowski@hca.nm.gov



Marina Piña
Director of Communications & Marketing
Marina.Pina@hca.nm.gov



Shelly Begay, MS, MLS
Tribal Liaison- Office of the Secretary
Diné
505.470.2731
Shelly.Begay@hca.nm.gov



Brandi Reano, MPH
Tribal Liaison-Behavioral Health Services Division |
Diné/Kewamew
505.795.1084
brandi.reano@hca.nm.gov




Theresa Belanger, MA
Tribal Liaison-Medicaid Assistance Division
Sault Ste. Marie Tribe of Chippewa Indians
505.670.8067
Theresa.Belanger@hca.nm.gov

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STCA Report Closing Statement and Signature

The Human Services Department now the Health Care Authority hereby respectfully submits its State-Tribal Collaboration (STCA) Report for Fiscal Year 2024 to the Department of Indian Affairs:

<div>DocuSigned by:  <small>C20980BE482542B...</small></div>	7/31/2024
Kyra Ochoa, Deputy Secretary for Kari Armijo, Cabinet Secretary, Health Care Authority	Date