

MINUTES OF THE
SANTA FE COUNTY
HEALTH POLICY & PLANNING COMMISSION

March 3, 2017

Santa Fe, New Mexico

I. This regular meeting of the Santa Fe County Health Policy & Planning Commission (HPPC) was called to order by Judith Williams at approximately 9:05 a.m. on the above-cited date at the Santa Fe County Community Services Department Conference Room, 2052 Galisteo Street, Santa Fe.

II. The following members were present:

Members Present:

Judith Williams
John Abrams
Vivian Heye
Bonnie Keene
Don Reece
Carolyn Roberts
Anna Voltura

Member(s) Excused:

Kim Straus
Reena Szczepanski
[Four vacancies]

County Staff Present:

Patricia Boies, Director, Health Services Division
Kyra Ochoa, Health Services Staff
Kathleen Schwartz, RN, Mobile Health Van
Hvtce Miller, County Manager's Office
Julia Valdez, Constituent Liaison

Others Present:

Anna Hansen, Commissioner	Desiree Valdez, NMDOH
Jim Breland, PMS	Julian Duran, BCBS
Terrie Rodriguez, NMAHC	Michael Munson, Life Circle
Rachel Wexler, NMDOH	Julie Sanchez, City of Santa Fe
Betty Sisneros Shover, NAMI	Sophie Andar, Life Link
Mary Feldblum, Health Security for New Mexicans	

III. Introductions

Those present introduced themselves.

IV. Approval of Agenda

Commissioner Abrams moved to approve and Commissioner Heye seconded. The motion to approve the agenda passed without opposition.

V. Approval of Minutes

January 6, 2017: Commissioner Reece moved approval. Commissioner Abrams seconded and the motion to approve the January minutes passed by unanimous voice vote.

VI. Matters of Public Concern

None were presented.

VII. Presentations

A. Update on Health-Related Issues in the 2017 Legislation Session

Ms. Boies called the commissioners' attention to a list of bills staff is currently tracking:

- The New Mexico Grown Fresh Fruit and Vegetables for School Meals [HB 208, SB 379] is part of the healthy food consumption priority of the *Health Action Plan*. The BCC has supported this legislation through a resolution, and funding has been provided in past years. It has not been funded this session, and its future is uncertain.
- Dental Therapy [HB 264] has been endorsed by the HPPC and the BCC supported this legislation. The bill is going "great guns" through the Legislature and there is reason to hope it will pass this year.
- Health Council Funding [HB 150, SB 33] has passed in committee.
- Alcohol Taxes Save Lives and Money [HB 398, SB 314] is still in committee.
- Patient Safe Staffing Act [HB288, SB 281]. This legislation received support during this week's BCC meeting. Commissioner Hansen reported that this would improve care and encourage nurse retention.
- 1/16 GRT for Medicaid [HB 490]: This bill would have required that additional County health care assistance funding ("indigent funds") be turned it over to the state. Ms. Boies testified against this in Committee, as did Commissioner Williams. The bill was tabled but could be resurrected
- Omnibus Tax Bill [HB 202, SB 433] would include gross receipts tax on non-profit hospitals; the Senate bill would sunset after two years.

Commissioner Williams noted that SB 433 is supported by the Hospital Association. Hvtce Miller said they prefer the sunset clause, however, bond raters are looking for a more sustainable revenue stream. He agreed that there would be steps taken to institute the additional 1/16 GRT.

Terrie Rodriguez said funding for the Health Council Bill was tabled in the House Appropriations and Finance Committee. However, there is a joint memorial intended to raise awareness of health councils.

A discussion ensued about the taxation on hospitals and/or patient providers. It was unclear at this point which facilities would be included. Commissioner Williams recommended reviewing the fiscal impact statements.

VII. B. New Mexico Health Security Act, SB 172 and HB 101

Mary Feldblum spoke for a coalition of 150 state organizations promoting a long-term, paradigm-shifting solution to the health care system. A bill has been introduced in both houses to allow research into a state self-insurance program that would cut down on complexity and administrative costs. She described how the plan would work and who it would exempt. With a risk pool of 1.8 million economies of scale could be achieved. There would be freedom of choice of doctors and hospitals and would include mental health, acupuncture, etc. A citizen board would administer the system and premiums would be on a sliding scale. Revenue, instead of going to insurance companies in other states would stay in the state.

Before the legislature is a proposal to investigate the costs of such a program. No appropriation is required as the expenses of the study would be paid by foundations. However, legislative endorsement would help bring the foundations on board. Studies in the past, according to Ms. Feldblum, have shown that hundreds of millions of dollars would be saved. It is anticipated the proposed fiscal analysis would take 18 months. Implementation would be contingent on the fiscal analysis. The second phase would consist of modeling based on data gathered which would demonstrate where contingencies and modifications would need to occur. Models exist for states with small populations. She mentioned the proposed plan is not an imitation of Canada's plan or any other existing model.

Commissioner Hansen commended Ms. Feldblum for her persistence and long-standing work on the problem. Ms. Feldblum noted she had talked to numerous groups throughout the state and received positive feedback, however resistance is to be expected from the insurance companies. The plan is good for hospitals but not for plans since it is a private delivery system. One would be able to choose one's own doctor and your own specialist. Ms. Feldblum spoke of "surprise bills" where people in networks, who think they are covered turn out not to be. Ms. Ochoa gave the example of St. Vincent's ER.

There was a discussion of Green Mountain Care which was an attempt at a single-payer system in Vermont that suffered from faulty assumptions. This demonstrates the importance of crunching the numbers and fleshing out the details. She reiterated that the first phase was basically a feasibility study. Commissioner Voltura recommended looking into PCORI (Patient-Centered Outcomes Research Institute) grants.

Ms. Feldblum listed some of the diverse organizations involved in the coalition. She reiterated that behavioral health and drug treatment would be included. Commissioner Heye

spoke about unmet needs which have never been quantified. Ms. Feldblum said the infrastructure has to be built using coordination of care.

Ms. Boies asked about the undocumented. Ms. Feldblum said they are included with proof of one year of residency. Somos un Pueblo Unido is on board.

Ms. Rodriguez asked about the status of the bills at the legislature and Ms. Feldblum said there has been a good bipartisan response but that the governor was certain to veto them.

VIII. Matters from the Commission and Staff

A. Director's Report

Ms. Boies brought up the following:

- Conflict of Interest forms are due from commission members
- Several applications have come in in response to the advertisements to fill the vacancies; interviews are now taking place. A representative from District 1 is still being sought
- The mobile health van continues to offer flu shots
- In response to the concerns about CHRISTUS and the Sobering Center, the BCC has requested that the HPPC hold a special meeting to discuss the matter. She will look into scheduling.
- An RFP has been issued by the City's Human Services Committee soliciting proposals from non-profits; she sits on that committee and will send out the RFP for forwarding to potential applicants
- Pam Hyde continues to work on the gap analysis and will be holding town halls. She distributed the Town Hall schedule for March and April
- She distributed a sheet of talking points in support of the dental bill

Ms. Ochoa stated she met with IT consultant Hilary Hamlin from HealthCare Perspectives along with many providers in order to discuss connectivity. She is recommending a two-pronged approach: determining what data is needed and maximizing care coordinated.

B. Other Matters from the Commission

Commissioner Reece noted that the Stanley Cyclone Center will be opening in April in the southern part of the county and he suggested a HPPC meeting could be held there, perhaps June 2nd.

Commissioner Williams said she would like to have someone bring in evidence-based models for sobering in light of the upcoming meeting on the Sobering Center.

Ms. Sisneros Shover announced NAMI will be having a new support group at the Quaker House on Thursday afternoons.

X. Possible Future Agenda Items.

- Discussion of detox models
- Accountable health care
- Feedback from town halls

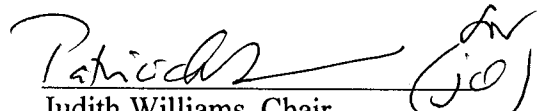
XI. Announcements

A. Next HPPC meeting Friday, April 7, 2017, 9 a.m., Community Services Department Conference Room, 2052 Galisteo Street

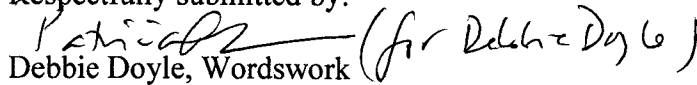
XII. Adjournment

This meeting was declared adjourned at approximately 10:45 a.m.

Approved by:


 Judith Williams, Chair
 Health Policy & Planning Commission

Respectfully submitted by:


 Debbie Doyle, Wordswork (for Debbie Doyle)

COUNTY OF SANTA FE) HEALTH POLICY & PLAN M
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I Hereby Certify That This Instrument Was Filed for
 record On The 12TH Day Of April, 2017 at 09:32:11 AM
 and Was Duly Recorded as Instrument # 1822809
 of The Records Of Santa Fe County

Witness My Hand And Seal Of Office
 Deputy  County Clerk, Santa Fe, NM
 Geraldine Salazar

