

MINUTES OF THE
SANTA FE COUNTY
HEALTH POLICY & PLANNING COMMISSION

August 2, 2013

Santa Fe, New Mexico

This regular meeting of the Santa Fe County Health Policy & Planning Commission (HPPC) was called to order by Chair Judith Williams at approximately 9:00 a.m. on the above-cited date at the Health & Human Services Conference Room, 2052 Galisteo Street, Santa Fe, New Mexico.

Roll call indicated the presence of a quorum as follows:

Members Present:

Judith Williams, Chair
John Abrams
Allan Bendorf
James Bond
Bertha Blanchard
Bryan Conkling
Shirlee Davidson
Vivian Heye
Reena Szczepanski

Member(s) Excused:

Kathleen Rowe, Vice Chair
Catherine Kinney
Sun Vega
[One Vacancy]

Staff Present:

Rachel O'Connor, Director, Community Services Department
Patricia Boies, Health Services Division Director
Teresa Casados, Senior Services Division Director

Others Present:

Jeff Thomas, Southwest CARE Center
Shelley Mann-Lev, Santa Fe Prevention Alliance
John Cassidy, La Familia
Bruce Tassin, CHRISTUS St. Vincent
Kathy Armijo-Etre, CHRISTUS St. Vincent
Terri Rodriguez, City of Santa Fe

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III. INTRODUCTIONS

Those present introduced themselves.

IV. APPROVAL OF AGENDA

Commissioner Blanchard moved approval of the agenda. Her motion was seconded by Commissioner Bond and passed by unanimous voice vote.

V. APPROVAL OF MINUTES: July 12, 2013

Chair Williams noted that the minutes reflect the corrections that were made.

Commissioner Bond moved approval of the July minutes. His motion was seconded by Commissioner Conkling and passed by unanimous voice vote.

VI. MATTERS OF PUBLIC CONCERN

None were presented.

VII. DIRECTOR'S REPORT

Ms. O'Connor highlighted the following:

- Contractor Nandini Kuehn is finalizing her work while staff works on the matrix
- Priorities have emerged: health care reform and the County's role in Medicaid AND Health Insurance Exchange enrollment, and opioid addicted and overdose issues
- Responses to proposals for the opioid addiction RFP are due mid-August
- A County jail facility discharge position is under consideration, to be trained in Narcan and health insurance enrollment
- DOH is developing a protocol for Narcan distribution
- Research reveals a reduction in jail recidivism when health care is available upon release
- In 2012, 1,338 inmates were identified as opiate-addicted

In regard to the discharge position the following points were noted:

- DOH will partner in this effort
- It's a very smart health initiative
- With demonstrated results this could serve as a national model
- The position would help with referring individuals for health care assistance
- In the pre-hospital environment Narcan is ubiquitous in the drug-using population and is a highly valued street drug
- HPP Commissioners Heye and Szczepanski offered to work on the job description for the Corrections discharge position

- The tie-in with the Suboxone program was highlighted
- Part of the syringe exchange program includes Narcan training and distribution. Suboxone, Subutex and Narcan have street value.

Ms. O'Connor referred to a fact sheet [*Exhibit 1*] regarding Sole Community Provider ("SCP") as proposed in Centennial Care. She reminded the HPPC of the State's miscalculation in the SCP upper payment resulting in a reduction of available funds for counties to match to provide to the SCPs. CMS has reduced State payment from approximately \$400 million to \$69 million.

In response to the reduction, the State has created the Uncompensated Care Pool to replace the SCP funding. The allocation to hospitals is based on bed number. Hospitals with over 200 beds will receive zero in funding. CHRISTUS St. Vincent is one of four New Mexico hospitals falling into the zero funding category. (The others are in San Juan, Las Cruces, and UNM/Albuquerque). The state plans on increasing the Medicaid rate for the four affected SCPs; however, the second 1/8 would be taken from the counties and used to match that Medicaid increase. Santa Fe County uses what is referred to as the "second 1/8" of the GRT for the SCP and community-based programs. This would impact Santa Fe County's community-based health programs. Ms. O'Connor noted that the counties bear statutory responsibility to provide indigent care and that Santa Fe County will monitor this complicated situation and fight to retain the second 1/8.

VII. Presentations/Discussion

A. The Vision Ahead for Christus St. Vincent

Bruce Tassin, CSV CEO, said the negotiations between HSD and CMS had relatively little input from the counties and the Hospital Association. The state's 1115-waiver application for Centennial care for Medicaid expansion brought up the allocation problem – leveraging of the match was above the true identified indigent population of the state. HSD and CMS agreed upon a "bridge" or ramping down to the appropriate level of federal money coming into the state. A bridge for SCP funds through to January 1, 2014 has been established. The four hospitals excluded from the new Uncompensated Care Pool and expected to receive the increased Medicaid rate currently serve three-quarters of the state's population. Mr. Tassin said there will be a severe impact on the state's SCP and community-based programs.

No other mechanism for matching dollars has been identified.

Mr. Tassin said without a correction, CSV will receive \$8 million less annually. CSV will have to consider adjustments in services and/or staff. Discussions will go up to the Governor to determine how more funds can be provided. He characterized the situation as a challenge in working with HSD to develop a safety net for every provider in the community.

Mr. Tassin spoke about the partnership between Christus and St. Vincent Hospital stating Christus has loaned CSV money at 3.62 percent for the overall capital improvement.

Referring to CSV's three-year plan, Mr. Tassin said they are looking to:

- Reinvest in the community-based workforce through SFCC - critical thinking module; CERNER computer system access

- Evaluate needs of the customer - community needs assessment
- Upgrade the facility - focus on patient rooms, upgrade lift equipment
- Prepare for sustainability in health care reform - population health

Chair Williams asked how the hospital was addressing the changes in behavioral health. Ms. Armijo-Etre said she was working with Ms. O'Connor to be strategic in leveraging the available funds. Adolescent behavioral health has been earmarked for particular attention and an increase in in-patient acute health care related to dual-diagnosis with a substance abuse mental health issue has been seen. Mr. Tassin said the 11-bed in-patient behavioral health unit has been underutilized.

Responding to Commissioner Davidson, Mr. Tassin confirmed that CSV aspires to attain magnet status.

Copies of the Community Health Profile were provided to the Commissioners by Christus St. Vincent.

B. Senior Services Update

Teresa Casados, Senior Services Director, said the County operates seven senior congregate facilities with 17 staff members. The County provides transportation services, congregate and home delivered meals to seniors in the county. Last year the County provided 56,000 meals. Frozen meals are also provided to homebound seniors. The centers are located in Eldorado, Edgewood, Rio en Medio, El Rancho, Santa Cruz, and Chimayo, and the Rufina location prepares and serves meals. Funding is obtained through the Area Agency on Agency (AAA) funneled through the Older Americans Act.

Noting the New Mexico ranks 8th in the nation for food insecurity, Ms. Casados said the County is requesting funding to provide 65,000 meals from the AAA this year. Last year the County received funding to provide transportation. She said as the department grows the County will seek funding for additional services that currently the City of Santa Fe provides. She said the state hotline has a senior resource center that provides excellent response and follow-up.

VII. Matters from the Commission

A. Other Matters from the Commission

Patricia Boies noted that the pertussis vaccine will be available at the County Fair, where DOH is partnering with the Community Services Department and using the mobile health van.

Commissioner Conkling advocated outreach to local emergency personnel to identify objectives that align with the priorities identified in the action plan. Study groups could be convened and internal assessment to identify contribution of time and manpower to the plan objectives. There was Commission consensus that it was a good idea.

Terri Rodriguez, City of Santa Fe, announced that the City passed the LEAD (Law Enforcement Assistance Diversion) Program. The project is modeled after a program in Seattle and will be developed within the next six months for the implementation of a three-year pilot project. The project will keep low-level substance abuse individuals out of the courts and jails and instead in treatment and employment. The City has committed \$100,000 to the project the first year and \$250,000 thereafter. Ms. O'Connor said the County would be a partner in this project.

IX. Announcements

A. Next HPPC meeting: Friday, September 6, 2013, 9 a.m., at Santa Fe County Health & Human Services Division Conference Room, 2052 Galisteo Street, Suite B

X. Adjournment

This meeting was declared adjourned at approximately 11:05 a.m.

Approved by:

Judith Williams (pd)
Judith Williams, Chair
Health Policy & Planning Commission

Submitted by:

Karen Farrell (pd)
Karen Farrell, Wordswork

COUNTY OF SANTA FE)
STATE OF NEW MEXICO) ss

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I Hereby Certify That This Instrument Was Filed for
Record On The 16TH Day Of October, 2013 at 09:12:57 AM
And Was Duly Recorded as Instrument # 1720718
Of The Records Of Santa Fe County

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

