

New Mexico
STATE-TRIBAL
COLLABORATION ACT
2017 ANNUAL REPORT



HUMAN
SERVICES
D E P A R T M E N T

Brent Earnest, Cabinet Secretary



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HUMAN SERVICES DEPARTMENT WEBSITE

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



SECTION I

EXECUTIVE SUMMARY

The Human Services Department (HSD) has worked to set a strong foundation of collaboration and communication with the 23 New Mexico Tribes, Pueblos and Nations. Each year the Secretary acknowledges the provision for conducting consultation in compliance with Senate Bill 196, the State Tribal Collaboration Act (STCA), and renews commitment to the HSD *State-Tribal Consultation, Collaboration and Communication Policy*.

Outlined in this report are highlights of programs and services to the Tribes, Pueblos, and Nations, and to all Native Americans in New Mexico. Data on the numbers of Native Americans served by programs such as Medicaid/Centennial Care, Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), Low Income Energy Assistance Program (LIHEAP), behavioral health services and child support, are included in this report along with information on trainings, outreach and consultations.

Consultation, communication and collaboration are at the core of the HSD State-Tribal Policy. The Department has worked with tribal leadership to create Native American standing committees and work groups for the purpose of identifying concerns and problem solving. HSD decision-makers, Tribal leadership appointees and Indian Health Service (IHS) management continue to work on issues of common concern. The Medical Assistance Division (MAD) and Income Support Division (ISD) Native American Technical Advisory Committee (NATAC), and the Behavioral Health Services Division (BHSD) Native American Sub-Committee (NASC) are examples of on-going efforts to strengthen communication and collaboration. Standing committees and work groups are designed to give the Tribes, Pueblos, and Nations an opportunity to meet with executive management early on in the process of policymaking and department initiatives that may have Tribal implications, and to keep Tribal leadership informed of committee activities.

Government-to-government consultation with New Mexico Tribes, Pueblos and Nations is a vital process that aims to create effective collaborations and to inform State and Tribal decision-makers. In the State Fiscal Year (SFY) 2017, the Medical Assistance Division (MAD) sent eleven Tribal notifications to request comment on proposed Medicaid State Plan Amendments and two Tribal notifications from ISD on the Cash Assistance and Supplemental Nutrition Assistance Program (SNAP). HSD participated in the STCA Annual Summit.

The Human Services Department strives to improve the government-to-government relationship. As we move into a new fiscal year, HSD looks to assess its consultation practice by consulting with tribal leaders and Department executive management.



SECTION II
CONTACT INFORMATION

HSD's Native American Liaisons interact closely with Tribal communities, facilitate consultations and collaborations, and are a direct resource to Tribal leadership.

HSD OFFICE OF THE SECRETARY (OOS)

Brent Earnest, Cabinet Secretary

Sean Pearson, Deputy Secretary - Michael Nelson, Deputy Secretary

Vacant - Native American liaison

2009 South Pacheco - PO Box 2348

Santa Fe, NM 87504

Office: 505-827-7750

Fax: 505-827-6286

Medical Assistance Division (MAD)

Nancy Smith-Leslie, Director
Theresa Belanger, Native American Liaison
P.O. Box 2348
Santa Fe, NM 87504-2348
Office: 505-827-3122
Toll free: 1-888-997-2583
Fax: 505-827-3185

Income Support Division (ISD)

Mary Brogdon, Director
2009 South Pacheco, P.O. Box 2348
Santa Fe, New Mexico 87504
Office: 505-827-7203
Fax: 505-827-7203

Behavioral Health Services Division (BHSD)

Wayne Lindstrom, Ph.D.
P.O. Box 2348
Santa Fe, New Mexico 87504
Office: 505-476-9258
Fax: 505-476-9277

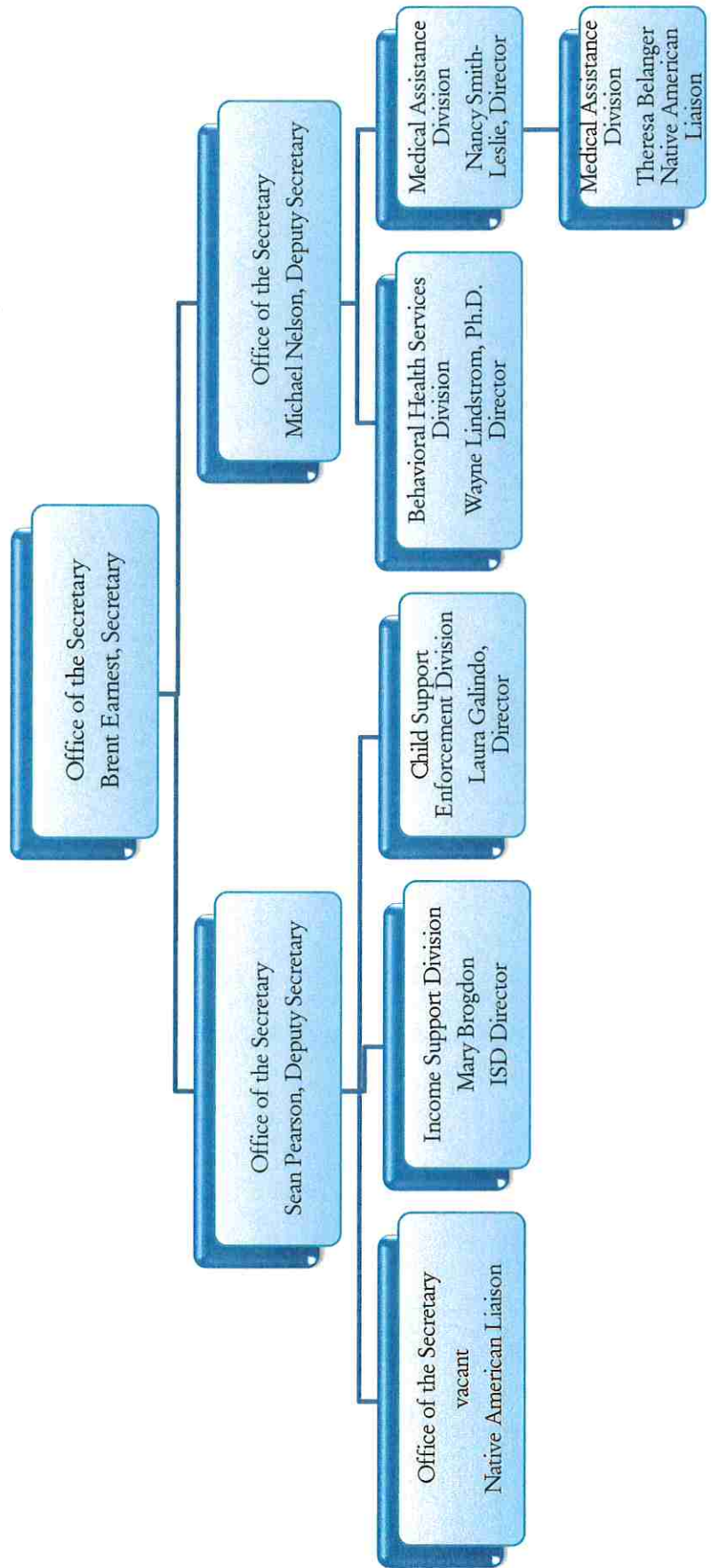
Child Support Enforcement Division (CSED)

Laura Galindo, Director
P.O. Box 2348
Santa Fe, NM 87504
Inside New Mexico: (800) 288-7207
Outside New Mexico: (800) 585-7631



HSD MANAGEMENT ORGANIZATION CHART

HSD Department wide organizational chart can be found at http://www.hsd.state.nm.us/Office_of_the_Secretary.aspx





SECTION III

AGENCY POLICY PROMOTING STATE-TRIBAL RELATIONS

History

1953 – NM Commission on Indian Affairs is created by State statute. The Office of Indian Affairs (OIA) established to serve as a vehicle between the State governor/legislature and the twenty-two Indian Tribes, Pueblos, and Nations in New Mexico.

2003 – The Governor signed Order No. 2003-022, elevating the OIA to the Indian Affairs Department (IAD), a cabinet-level agency.

2004 – House Bill 39 establishes the Indian Affairs Department by legislative statute, elevating the IAD from a state agency to a State Department. IAD becomes a cabinet-level department with a Secretary of Indian Affairs, further strengthening state-tribal government-to-government relations.

2009 - Senate Bill 196 signed into law, thus enacting the State-Tribal Collaboration Act (STCA). The STCA is a statutory commitment of New Mexico state government to work with NM Tribes, Pueblos, and Nations on a government-to-government basis to better collaborate and communicate on issues of mutual concern.

In 2009, the HSD Cabinet Secretary signed the *HSD State-Tribal Consultation, Collaboration and Communication Policy* into effect on behalf of the Department. All succeeding Secretaries have reaffirmed their endorsement of the HSD Policy and the Departments commitment to consult, collaborate and communicate with Tribes.

See more on HSD employee training and orientation to the STCA and the HSD State-Tribal Consultation, Collaboration and Communication Policy later in this report.

The Human Services Department State-Tribal Consultation, Collaboration and Communication Policy posted on the HSD website at <http://www.hsd.state.nm.us/> and attached to this report.

Attachment I



The Mission of the Human Services Department:
 To reduce the impact of poverty on people living in New Mexico by providing support services that help families break the cycle of dependency on public assistance.

SECTION IV PROGRAMS AND SERVICES

http://www.hsd.state.nm.us/About_the_Department.aspx

Human Services Department

The New Mexico Human Services Department maintains a commitment to improve the overall quality of life for all New Mexicans. This includes the State’s Native American population, living both on and off Tribal lands. Providing access to our programs and strengthening our relationship and partnership with New Mexico Native American Tribes, Pueblos and Nations is an HSD priority.

HSD manages a \$6.64 billion dollar budget of state and federal funds and administers services to more than 900,000 low-income New Mexicans in the following programs.



- Medicaid and Children’s Health Insurance Program (CHIP)
- Supplemental Nutrition Assistance Program (SNAP)
- SNAP Education Program (SNAP-Ed)
- Temporary Assistance for Needy Families (TANF)
- The Emergency Food Assistance Program (TEFAP)
- School Commodity Foods Program
- Meals for Homeless People
- General Assistance for low-income individuals with disabilities
- Community Services Block Grant (CSBG)

The programs are administered through four Program Divisions:

Click to follow links.

- 1 [Medical Assistance Division](#)
- 2 [Income Support Division](#)
- 3 [Child Support Enforcement Division](#)
- 4 [Behavioral Health Services](#)



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- Refugee Resettlement Program (RRS)
- Low-Income Home Energy Assistance Program (LIHEAP)
- Child Support Establishment and Enforcement
- Behavioral Health Services (mental illness, substance abuse and compulsive gambling)



MEDICAL ASSISTANCE DIVISION (MAD)

http://www.hsd.state.nm.us/Medical_Assistance_Division.aspx

Currently, 40 percent of New Mexicans (approximately 898,000 individuals including approximately 385,000 children) receive health insurance through Medicaid, the Children’s Health Insurance Program (CHIP), or other medical assistance programs administered by the Human Services Department’s Medical Assistance Division. This represents an increase of 46,000 total recipients from last calendar year. The 2017 state fiscal year budget for the Medicaid program was \$5.5 billion in (state and federal funding).

The agency is committed to working with Native American Medicaid recipients, Indian Health Service, Tribal and Urban Health Programs (ITU) and other stakeholders to provide quality health care to Medicaid-eligible Native Americans in New Mexico, either through the Medicaid managed care program, known as Centennial Care, or through Fee-For-Service (FFS).

The total Native American FFS expenditures for calendar year (CY) 2016 was approximately \$352 million. The largest expenditures were for outpatient/physician claims, followed by inpatient claims.

Nursing facility expenditure for Native Americans enrolled in Centennial Care in CY 2016 was approximately \$27 million. The total expenditure for Native Americans receiving Centennial Care Community Benefit Personal Care Services was almost \$59 million.

The Medical Assistance Division has begun its fifth year of meeting with the Native American Technical Advisory Committee (NATAC). The purpose of this committee is to have members identify concerns, make recommendations on how to best address these concerns and to track the progress of our efforts with Centennial Care services. There are 16 Tribal appointments to this Committee, and this year new members were added to the advisory committee from San Felipe, Santo Domingo, and Zia Pueblo, the Navajo Nation, and the Fort Sill Apache Tribe. The NATAC expanded its purpose last year to include Income Support Division programs and services. The NATAC meets quarterly in Albuquerque and has been a successful advisory committee for the Department.

**NATIVE AMERICANS ENROLLED
IN MEDICAID**

Total 134,849

Fee-For-Service	89,778
Centennial Care	45,071
Managed Care Organizations (MCO)	
➤ Molina (MHNM)	10,886
➤ United Health Care (UHC)	10,721
➤ Presbyterian Health Plan (PHP)	13,230
➤ Blue Cross Blue Shield (BCBSNM)	10,234



The Human Services Department held a formal Tribal Consultation on June 23, 2017 with New Mexico's Tribes, Pueblos, Nations and Indian Health Service to discuss the draft 1115 Waiver Renewal concept paper titled Centennial Care 2.0. This draft concept paper can be viewed at <http://www.hsd.state.nm.us/centennial-care-2-0.aspx>

The Medical Assistance Division also requested comment from Tribal leadership on fifteen proposed rule changes and state plan amendments. The written "Tribal Notification Guides" can be viewed at <http://www.hsd.state.nm.us/providers/written-tribal-consultations.aspx>

During the past fiscal year, the Native American liaison for Medicaid participated in six outreach events in Tribal communities throughout the state to provide information about FFS Medicaid, Centennial Care, and to answer questions about Medicaid services. The Tribal liaison was asked to speak numerous times on the CMS guidance regarding 100% Federal Medical Assistance Percentage (FMAP) for Native Americans who receive services through an IHS or Tribal 638 facility, CareLink New Mexico health homes, and Medicaid eligibility requirements.

The Medical Assistance Division continues to work with Indian Health Service, Tribal 638 clinics and interested parties to implement federal policy related to the 100% FMAP for Native Americans who receive services through an IHS or Tribal 638 for certain Medicaid services. The CMS guidance requires the following:

- The Medicaid patient must have an established relationship with IHS/Tribal facility;
- A written care coordination agreement is required between the IHS/tribal facility and the non-IHS/tribal facility providers; and
- The non-IHS/tribal facility's member record must be shared with the IHS or Tribal facility.

It is important to the Medical Assistance Division to minimize the administrative burdens as much as possible with IHS/Tribal facilities in any new process related to this initiative. Considering the current budgetary challenges facing the State, any additional revenue generated by this initiative will help to sustain continued growth in the Medicaid program.



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MEDICAL ASSISTANCE DIVISION (MAD)		
Name	Tribes, Pueblos, Nations Represented	Attendee Title (Tribal leadership, staff and programs.)
(Summit, consultations, conferences, trainings, workshops, committees.)		
Quarterly Native American Tech. Advisory Committee meetings (NATAC)	Appointments from each Tribe/Pueblo/Nation	Tribal appointees – currently 16 participants
Shiprock Health Fair	Shiprock Chapter House	Navajo community
Acoma Senior Health Fair	Acoma Pueblo	Acoma community
Mescalero Health Fair	Mescalero	Tribal community
Sandia Health Fair	Sandia Pueblo	Sandia community
Laguna Health Fair	Laguna Pueblo	Laguna community
Zuni Health Fair	Zuni Pueblo	Zuni community
Centennial Care 2.0 Roadshow	Navajo	Farmington community
NM Primary Care Assn. Working with Tribes/Pueblos/Nations of NM	All	Albuquerque
Presentation on 100% FMAP	All Pueblo Council of Governors, Alb. Area IHS Quarterly Tribal Consultation	Albuquerque
Meeting with CHRs regarding Care Coordination	Albuquerque	Albuquerque
Health Home Expansion for Tribal Communities	Bernalillo and Sandoval County Tribal BH programs	Sandoval County
Meeting with Acoma Pueblo on FFS billing	Acoma Pueblo	Behavioral Health program
Formal Tribal Consultation	All	Tribal leadership/appointees
Medicaid presentation at the UNM Center for Native American Health	All	All Tribes
MAD On-going Meetings with Indian Health Service		
100% Federal Medical Assistance Percentage (FMAP) Training	Navajo, Pueblo, urban populations	Albuquerque Area IHS and Navajo Area IHS, Medical Assistance Division, All Pueblo Council of Governors (APCG) Health Committee
Quarterly IHS Revenue meeting	Albuquerque area and Navajo area	Albuquerque & Navajo Area IHS
Quarterly meetings with ISD	McKinley County	Gallup IHS
Purchase Referred Care quarterly meeting	Albuquerque Area IHS	Albuquerque



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Medicaid presentation at the annual CMS/IHS training	Navajo area	NAIHS
Medicaid presentation at the annual CMS/IHS training Albuquerque IHS	Albuquerque area	AAIHS
Tribal Notification Letters sent:		
7/18/2016	Medicaid Home and Community Based Services Settings Transition	16-10
7/18/2016	NM Statewide Transition Plan draft	16-11
12/01/2016	Proposed Amendments to 8.308.12 NMAC Community Benefit	16-12
8/25/2016	Access Monitoring Review Plan for FFS recipients	16-13
10/28/2016	Mi Via 1915(c) Home and Community Based Services Waiver	16-14
12/01/2016	Developmentally Disabled DD 1915(c) Home and Community Based waiver	16-17
12/21/2016	Managed Care Policy Manual	16-18
2/07/2017	NM Medicaid Copayment Proposal	17-01
2/24/2017	NM Licensed Birth Centers	17-02
3/17/2017	NM Compliance with the Federal Covered Outpatient Drug Rule	17-03
3/31/2017	NM Alternative Benefits Plan	17-06
*All Tribal Notification letters can be seen at http://www.hsd.state.nm.us/providers/written-tribal-consultations.aspx		

**INCOME SUPPORT DIVISION (ISD)**http://www.hsd.state.nm.us/Income_Support_Division.aspx

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. In 2017, ISD served over 1 million individuals at our 35 offices statewide.

NATIVE AMERICAN RECIPIENTS BY PROGRAM AND TRIBAL RESIDENCE – SFY 2017
 (as of May 17, 2017)

Tribal Residence	Education Works	General Assistance	TANF	LIHEAP	SNAP
Acoma	11	4	83	221	836
Alamo Navajo	-	10	94	286	10,820
Canoncito Navajo	-	1	3	4	79
Checkerboard Navajo	-	3	66	171	8,926
Cochiti	4	-	35	16	171
Isleta	-	8	43	159	457
Jemez	4	2	91	5	582
Jicarilla Apache	-	4	54	13	778
Laguna	-	9	132	43	1,616
Main Reservation Navajo	-	10	91	178	9,943
Mescalero Apache	-	13	180	399	1,442
Nambe	-	-	28	39	155
Ohkay Owingeh	-	-	3	5	25
Picuris	-	1	-	3	10
Pojoaque	-	-	1	3	8
Ramah Navajo	-	-	2	6	214
San Felipe	-	16	130	223	1,158
San Ildefonso	-	-	4	4	23
San Juan	-	-	1	6	127
Sandia	-	-	1	9	71
Santa Ana	-	-	4	6	23
Santa Clara	-	-	32	101	363
Santo Domingo	-	4	64	275	1,275
Taos	-	4	26	79	195
Tesuque	-	1	4	3	13
Tohajiilee Navajo	-	-	4	9	99



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Zia	-	-	25	-	208
Zuni	-	1	17	13	3,198
Unknown	104	288	3,696	9,506	55,070
Total	123	379	4,914	11,785	97,885

Food Distribution Program on Indian Reservations (FDPIR)

FDPIR is a Federal program that provides benefits to low-income households, including the elderly, living on Indian reservations and to Native American families residing within a 15 mile radius of specific Pueblos.

ISD, Indian Tribal Organizations (ITO's), FDPIR sites, and the Navajo Nation interact to reduce concurrent receipt of SNAP and FDPIR benefits and to ensure neither program provides benefits to individuals with an Intentional Program Violations (IPV's).

It is noted that in July 2016, Food Nutrition Services (FNS) approved Five Sandoval Indian Pueblos, Inc., to expand its service area to include Valencia County. Services are provided to Native Americans regardless of Tribal affiliation or residence – Native Americans do not have to reside within Pueblos or reservations to be eligible for FDPIR benefits through this expansion.

Technology updates continue to improve methods for the distribution and exchange of mandated information between ISD and FDPIR sites.

NM HSD has implemented a telephonic validation for ITO FDPIR sites via the Customer Service Center (CSC) with the Policy and Program Development Bureau (PPDB) located at the Central Office in Santa Fe, NM as the secondary validation option. CSC and PPDB staff is able to validate receipt or non-receipt of SNAP benefits and identify possible incidences of dual participation in a timelier manner. Through the use of telephonic validation, data provided is accurate and up-to-date thereby reducing the dual participation.

Memorandum of Agreements (MOAs) finalized in January 2016, are intact with Eight Northern Indian Pueblos Council, Inc., Zuni Pueblo, Pueblos of Acoma, Five Sandoval Pueblos, Inc., and the Navajo Nation in conjunction with the Food Distribution Program on Indian Reservations (FDPIR) sites. These MOA's are legal binding agreements signed by Tribal Governors, the President of the Navajo Nation as well as the Cabinet Secretary and General Counsel of the NM Human Services Department.

ISD AGREEMENTS WITH TRIBES, PUEBLOS, NATIONS, AND INDIAN HEALTH SERVICE*ISD Out-Stationed Workers*

HSD makes available on-site services to Native Americans through placement of out-stationed workers in IHS hospitals and Service Units. ISD provides trained, full time Family Assistance Analyst employees to work on location for the purpose of accepting and processing applications for various program services including SNAP (formerly, Food Stamps), General Assistance, Temporary Cash Assistance, and Medicaid.



GOVERNMENTAL SERVICES AGREEMENTS for On-Site Placement Of HSD/ISD Eligibility Workers	
LOCATIONS	Albuquerque IHS Acoma-Cañoncito-Laguna Pueblo of Zuni Southwestern Indian Polytechnic Institute (SIPI)

ISD Temporary Assistance to Needy Families (TANF)

Federally recognized Indian Tribes can apply for funding to administer and operate their own TANF programs. This option is described under section 412 of the Social Security Act, as amended by Pub.L.104-193. TANF gives federally recognized Indian Tribes flexibility in the design of welfare programs that promote work and responsibility and strengthen families. Similar to states, they receive block grants to design and operate programs that accomplish one of the four purposes of the TANF program. The NM HSD Income Support Division has Agreements with the Pueblo of Zuni, and the Navajo Nation to operate their own TANF program. Kewa (Santo Domingo) Pueblo operates their own TANF program with direct funding from the United States Health and Human Services Department Administration for Children and Families. HSD does not have an agreement with Kewa Pueblo at this time.

The four purposes of the TANF program are:

- Provide assistance to needy families so that children can be cared for in their own homes
- Reduce the dependency of needy parents by promoting job preparation, work and marriage
- Prevent and reduce the incidence of out-of-wedlock pregnancies
- Encourage the formation and maintenance of two-parent families

ISD Food Distribution Program on Indian Reservations (FDPIR)

FDPIR is the acronym for the Food Distribution Program on Indian Tribes, Pueblos and Nations, which provides USDA Foods to low-income households residing on Reservations or Pueblos, and to households residing in designated areas near Reservations or Pueblos with a Native American household member.

Many households participate in FDPIR as an alternative to the SNAP because they do not have easy access to SNAP offices or authorized food stores. New Mexico SNAP and FDIPR are mandated to perform cross-program checks to alleviate dual participation and eligibility of Intentional Program Violators.



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FDPIR Sites

Site	Location	Service Areas:
Eight Northern Indian Pueblos Council, Inc. (ENIPC)	Santa Fe County – Nambe, NM	Nambe, Tesuque, Pojoaque, San Ildefonso, Santa Clara, Ohkay Owingeh (San Juan), Taos, Picuris. This FDPIR site also serves Native Americans and Non-Native Americans living with a Native American residing within a 15 mile radius of the aforementioned Pueblos.
Five Sandoval Indian Pueblos, Inc. (FSIP)	Sandoval County - Bernalillo, NM	Cochiti, Jemez, Zia, Sandia, Santa Ana, Kewa (Santo Domingo), San Felipe, Isleta and Valencia County (provides services to Native American Indians residing off reservation)
Zuni	McKinley County	Zuni Pueblo
Acoma	Cibola County	Acoma Pueblo and Laguna Pueblo; Bibo, Bluewater Village, Cubero, Grants, Milan, San Fidel, San Rafael, and Seboyeta. This site serves Laguna and Acoma Pueblo Tribal members residing off the Pueblos in the areas mentioned above.
Navajo Nation	Window Rock, AZ	McKinley County, Cibola County, San Juan County and Ft. Defiance, AZ and Teec Nos Pos, AZ residing within The Navajo Nation.

ISD Food and Nutrition Services Bureau (FANS)

FANS Bureau administers the USDA Commodity Foods Program for eligible school entities participating in the National School Lunch Program (NSLP) and the Supplemental Nutrition Assistance Program - Education (SNAP-Ed) nutrition education grant program, managed by the Department of Health.

The Field Support Bureau and Food and Nutrition Services Bureau staff work with the New Mexico Farmer's Market Association in addition to local Farmer's Markets to allow the use of EBT cards in communities statewide to encourage healthy eating. The Double Up Bucks is a program funded by the USDA and the State Legislature that allows for purchasing double value on fruits and vegetables at the farmers markets and selected grocery stores.

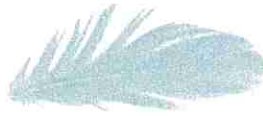


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Commodity food is delivered by the FANS Bureau to schools at Acoma, Cochiti, Isleta, Jemez, Jicarilla Apache, Kewa, Laguna, Mescalero Apache, Nambe, Navajo Nation, Ohkay Owingeh, Picuris, Pojoaque, San Felipe, San Ildefonso, Sandia, Santa Ana, Santa Clara, Taos, Tesuque, Zia and Zuni. These schools served meals to approximately 30,000 Native American children each school day covering approximately 20% of their food costs.

Tribal Notification Letters sent:	Name
3/28/2017	Proposed Amendments to the New Mexico Administrative Code (NMAC) for SNAP
5/23/2017	Request for comment on the NMAC amendments for Cash Assistance Program Regulations and SNAP



CHILD SUPPORT ENFORCEMENT DIVISION (CSED)

http://www.hsd.state.nm.us/Child_Support_Enforcement_Division.aspx

The mission of the Child Support Enforcement Division (CSED), derived from Title IV-D of the Federal Social Security Act, is to enhance the well-being of children by assuring that assistance in obtaining support, including financial and medical, is available to children. Locating parents, establishing paternity, determining support obligations, and monitoring and enforcing those obligations, accomplish this. Successfully completing these activities improves the quality of the life of children, increases the number of families who achieve self-sufficiency, and helps break the cycle of dependency on public assistance.

In SFY2017, there were more than 68,000 families with child support cases in New Mexico, of which approximately 6,000 were Native American. CSED, New Mexico's IV-D agency is required by federal and state laws to help families receiving Temporary Assistance for Needy Families (TANF) and Medicaid, by establishing a court order, and enforcing the court order by collecting and disbursing child support payments. Families who are not receiving TANF or Medicaid may also apply to CSED for services.

Tribal Collaborations

CSED has had a long collaborative relationship with the Navajo Nation that stems back to 1993 when the State and the Nation entered into its first Joint Powers Agreement (JPA) for operating the child support program on the Navajo Nation, one of the first agreements of its kind in the United States. The JPA, renewed in November 2015, provides:

- Access to, and the use of, the NM Child Support Enforcement System (CSES);
- Centrally located services providing access to state & federal case registries, including the Federal Parent Locator Service (FPLS);
- Timely responses to referrals from Constituent Services;
- Central receipt and disbursement services through the CSED State Disbursement Unit (SDU);
- CSED Customer Service Information Center with in-state and out-of-state toll free numbers and an Automated Voice Response System (AVRS);
- New hire reporting services, automatic income withholdings, federal and state tax referral and intercept services, and Financial Institution Data Match (FIDM) services;
- Credit bureau reporting;
- License suspension and passport denial;
- Child support training; and
- Technical assistance and procedural guidance, including Help Desk Services and other computer support.



CSED is in full support of Tribes and Pueblos wishing to develop and operate their own Tribal Child Support IV-D Programs, and will provide technical assistance upon request.

In State Fiscal Year 2016, CSED visited with the Zuni IV-D program in an effort to discuss the transfer of cases that were originally set up through the State CSED program, prior to the implementation of the Zuni IV-D program. The cases are now Zuni under jurisdiction and will be transferred to and worked through the Zuni IV-D program.

CSED also provides child support services to Tribes and Pueblos across New Mexico by:

- Establishing and enforcing child support orders through Tribal courts – based on the Tribe or Pueblo's own laws and customs;
- Registering Tribal court orders in state district courts as appropriate (when a child lives off-reservation);
- 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 court orders, requesting assistance from other states to establish paternity and support for Tribal members;
- Providing services to custodial tribal members living on or off Tribal lands – so long as the non-custodial parent lives off Tribal lands;
- Providing data and reports to Navajo Nation;
- Alamogordo CSED office communicates with the Mescalero Apache Tribe IV-D Program as needed; and
- CSED re-established communication with the Pueblo of Zuni Child Support Office.

CSED has a dedicated attorney from the Albuquerque North Office that is licensed to practice in Zia, Acoma, Isleta, and Laguna Pueblos. The CSED attorney appears before the tribal court judges from these Pueblos regularly. Tribal judges, court staff, and parties often call upon the attorney when questions arise regarding child support cases that involve Tribal members and/or basic child support matters. CSED also has a dedicated Child Support Legal Assistant that handles 353 active cases for Zia, Acoma, Isleta, and Laguna Pueblos.

CSED currently has a Memorandum of Understanding (MOU) with the Zia Pueblo, and is in the process of obtaining MOUs with the three other Pueblos that CSED is currently working with to obtain child support court orders through the Tribal courts.

**CSED State Fiscal Year 2016**

CROWNPOINT – Navajo Nation IV-D				Total Collections SFY 2016
MONTH	Cases	% of Cases with Orders	Children	
June-16	4192	29.7%	7089	\$1,277,258.02

SHIPROCK – Navajo Nation IV-D				Total Collections SFY 2016
MONTH	CASES	% of Cases with Orders	Children	
June-16	1493	61.7%	2525	\$1,334,826.42

ACOMA				Total Collections SFY 2016
MONTH	CASES	% of Cases with Orders	Children	
June-16	105	73.3%	160	\$152,795.54

ISLETA				Total Collections SFY 2016
MONTH	CASES	% of Cases with Orders	Children	
June-16	90	82.2%	130	\$127,315.71

LAGUNA				Total Collections SFY 2016
MONTH	CASES	% of Cases with Orders	Children	
June-16	129	77.5%	185	\$212,598.84

ZUNI				Total Collections SFY 2016
MONTH	CASES	% of Cases with Orders	Children	
June-16	29	86.2%	55	\$76,203.19

ZIA				Total Collections SFY 2016
MONTH	Cases	% of Cases with Orders	Children	
June-16	2	100%	2	\$747.00



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Brent Earnest, HSD Cabinet Secretary

HSD OFFICE OF THE SECRETARY Includes the INCOME SUPPORT DIVISION & CHILD SUPPORT ENFORCEMENT DIVISION		
Name (Summit, consultations, conferences, trainings, workshops, committees.)	Tribes, Pueblos, Nations Represented	Attendee Title (Tribal leadership, staff and programs.)
OOS, ISD, BHSD, and MAD participated in the STCA Annual Summit. HSD Secretary Earnest and DOH Secretary Lynn Gallagher presented on 'Health', one of the four Summit topics.	Tribal Governors, Presidents and Chairman	Tribal leadership
OOS and MAD – Tribal Leadership Consultation on proposed Medicaid State Plan Amendments (SPAs) to implement reductions to Medicaid provider payments.	All Tribes, Pueblos and Nations invited. <ul style="list-style-type: none"> Laguna, Tesuque, Cochiti, Navajo Area IHS, Albuquerque Area IHS, Ohkay Owingeh, Navajo Nation. 	Tribal leadership or their designee
Participation in the All Indian Pueblo Council of Governors Consultation with US Department of Agriculture, Food and Nutrition Services	All Indian Pueblo Council of Governors	Pueblo Governors
Navajo Social Services Conference <i>All HSD liaisons presented on HSD programs and services</i>	Navajo Nation	Navajo health and social services directors, managers and staff
Native American Technical Advisory Committee (NATAC) – Quarterly meetings Expanded NATAC in 2016 to include the Income Support Division	Mescalero, Laguna, Zuni, Jemez, San Ildefonso, Cochiti, Santa Clara, Isleta, Ohkay Owingeh, Taos, Sandia, Acoma, Santa Ana, Tesuque, San Felipe, Zia.	Tribal designees appointed by their Governor, President, or Chairman
ISD Food Distribution Program on Indian Reservations (FDPIR) – Quarterly Meetings	Zuni; Acoma Eight Northern Pueblos Council; Five Sandoval Pueblos	Tribal FDPIR Program Directors/Managers and certification staff
Consultation meeting on Supplemental Nutrition Assistance Program (SNAP)	Tesuque Pueblo	Governor and Council Members
Change in Supplemental Nutrition Assistance Program (SNAP) work requirements for Able Bodied Adults Without Dependents (ABAWDS). March 2016 Notice to tribal	Notice to all Tribes, Pueblos and Nations	Written notice to all Governors, Presidents and Chairman



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Name	Tribes, Pueblos, Nations Represented	Attendee Title (Tribal leadership, staff and programs.)
<p>(Summit, consultations, conferences, trainings, workshops, committees.)</p> <p>leadership informing all Tribes, pueblos and nations that ABAWDs who receive SNAP do not have to meet the Able Bodied Adult Time Limit Requirement from January 1, 2016 – December 31, 2016.</p> <p>CSED meeting with Zuni Pueblo Child Support on child support cases, jurisdiction, collections and establishing collaboration and communications.</p>	<p>Zuni Child Support Title D IV Program</p>	<p>Zuni Child Support Title D IV Program staff, Tribal Court Administrator and Judge</p>



BHSD Consultation

BEHAVIORAL HEALTH SERVICES DIVISION (BHSD)

http://www.hsd.state.nm.us/Behavioral_Health_Services_Division.aspx

The purpose of the BHSD is to manage the adult public behavioral health service system. BHSD currently has a staff of 30 that focuses on developing strategies for mental health promotion and substance abuse prevention and treatment for individuals in NM. In its role as the state mental health and substance abuse authority, BHSD works in partnership with MAD to oversee contracts with the four Medicaid MCOs and to ensure provision through New Mexico's behavioral health statewide system of Medicaid benefits. In addition, the Director of BHSD also serves as the CEO of the NM BH Collaborative that coordinates services across State Departments. As a result, BHSD is actively engaged in a number of projects that include collaboration with the Children, Youth, and Families Department; the Department of Health, the Department of Indian Affairs, the Corrections Department, and the Department of Veterans Services.

BHSD staff work with Native American and tribal providers on the following federal grants and state programs:

- **Substance Abuse Prevention and Treatment (SAPT) Block Grants:** SAPT is a Substance Abuse and Mental Health Services Administration (SAMHSA) block grant that funds planning, implementing and evaluating activities/services to prevent and treat substance abuse. Community-based providers receive these funds through BHSD to help support their substance abuse treatment services and primary prevention activities, including traditional healing services. Programs that serve Native American communities funded under these grants are:
 - SAPT Block Grant Fund
 - Eight Northern Indian Pueblos Council, Inc.
 - First Nations Community Healthsource
 - Na' Nizhoozhi Center, Inc.
 - Navajo Nation Department of Behavioral Health
 - SAPT Block Grant – Prevention Fund
 - Mescalero Apache Tribe
 - Native American Community Academy
 - Santo Domingo Pueblo
 - San Juan County Partnership Inc.
 - County of McKinley
- **Native American Services Fund:** BHSD allocates a portion of its state general funds (SGF) to support seven Native American and tribal



providers who offer a range of behavioral health prevention and treatment services.

- Native American Services Fund
 - Five Sandoval Indian Pueblos Inc.
 - First Nations Community Healthsource
 - Hozho Center for Personal Enhancement
 - PMS – Totah Behavioral Health Authority
 - Pueblo of Isleta
 - Pueblo of Zuni
 - The Life Link
- **Other programs serving Native Americans receiving Non-Medicaid funding are:**
 - State General Fund (SGF)-Substance Abuse Fund
 - Eight Northern Indian Pueblos Council Inc.
 - First Nations Community Healthsource
 - Five Sandoval Indian Pueblos, Inc.
 - First Nations Community Healthsource
 - Four Winds Recovery Center, Inc.
 - Healing Circle Drop in Center
 - Hozho Center for Personal Enhancement
 - Na Nizhoozhi Center Inc.
 - Rehoboth McKinley Christian Health Care
 - San Juan County
 - Navajo Nation Department of Behavioral Health Services
 - SGF-Mental Health, Native American Program Fund
 - First Nations Community Healthsource
 - Jail Diversion
 - Pueblo of Jemez
 - Supportive Housing Fund
 - First Nations Community Healthsource
 - Zuni Housing Authority
 - Veteran's Programs through The Life Link
 - Kewa Veteran Outreach



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- **Native American Suicide Prevention**

BHSD suicide prevention efforts are supported by state general funds and a federally-funded grant (NM Suicide Prevention) in concert with the National Strategy for Suicide Prevention. Two suicide prevention summits were held in 2017: a Youth Summit, "Youth Voices: Honoring Life, Creating Choices," attended by approximately 90 youth and youth mentors representing 13 Tribes; and a Crisis Response Summit, "Weaving Partnerships for Community Wellness & Response," with over 100 participants representing 15 Native American communities.

BHSD partnered with UNM Health Sciences Center to provide on-site suicide prevention trainings, which were offered to staff at Gallup Indian Medical Center. Native American facilities also participated in monthly Question, Persuade, Refer (QPR) trainings conducted by NMSP grantees, as a way of creating a statewide learning community on suicide prevention. Additional training webinars were broadcast through the IHS network to connect with a wide range of IHS providers.

BHSD recently applied for a second iteration of the NM Suicide Prevention Grant, to pilot a comprehensive suicide prevention model for adults in McKinley County. If funded, the proposed project will begin in the fall of 2017.

- **Behavioral Health Investment Zones (BHIZ)**

Two investment zones, in Rio Arriba and McKinley counties, were established based on the highest composite NM death rates due to drug overdoses, alcoholism, and suicide. McKinley BHIZ efforts have focused on providing intensive services to the top 200 individuals with repeated placement in protective custody and/or public inebriation. Successes in FY17 include renovation and opening of Gallup's Detox Center, offering therapeutic and case management services; creation of partnerships for provision of residential treatment, transitional living services, job placement and education programs; an improved electronic health record system; and staff recruitment and training for critical positions to enhance service provision and coordination.

- **Opioid Use Initiatives**

BHSD manages a number of intersecting and complementary opioid use initiatives through the following grants: Partnership for Success (PFS), Prevent Prescription Drug/Opioid Related Deaths (PDO), Strategic Prevention Framework for Prescription Drugs (SPF Rx), and Opioid Strategic Targeted Response Initiative (STR). San Juan College participates in PFS' Higher Education Prevention Consortium, aimed at reducing youth prescription drug abuse and underage drinking. PDO supports overdose death prevention through training and naloxone distribution to first responders and other key community sectors. SPF Rx promotes collaboration and awareness for reducing over-prescribing of opioids. And just underway, the STR initiative will utilize a hub and spoke model to support expansion of opioid prevention, treatment and recovery services, and will include a needs assessment of tribal communities and training on buprenorphine and naloxone.

- **Opioid Treatment Programs**

There are sixteen Opioid Treatment Programs (OTPs) operating in NM, serving approximately 5,400 patients. Of these, nine are located in Albuquerque, including a courtesy dosing clinic at the Metropolitan Detention Center. Clinics are also located in Belen, Santa Fe,



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Espanola, Farmington, Las Cruces, Roswell and Rio Rancho. There are currently three provider organizations pending approval to operate as an OTP. Locations identified for these prospective providers include Albuquerque, Espanola and Gallup.

- **The PAX Good Behavior Game (GBG)**
PAX GBG is an evidence-based practice, demonstrated to increase students' self-regulation, self-control, and self-management. The program has been found to reduce disruptive behaviors, hyperactivity, and emotional symptoms. Long-term outcomes include reduced need for special education services; reductions in drug and alcohol addictions, serious violent crime, suicide contemplations and attempts, and initiation of sexual activity; and increases in high school graduation rates and college attendance. Implementation of PAX GBG in Bureau of Indian Education schools is planned for FY18, with an emphasis on building whole school programming to support a PAX environment within each school. Planning is currently underway to expand this program to include Bureau of Indian Affairs Schools.
- **Certified Peer Support Workers (CPSWs)**
BHSD oversees certification of Peer Support specialists through the Office of Peer Recovery & Engagement (OPRE). There are currently 210 Certified Peer Support Workers in New Mexico. Seven peer support trainings were offered in FY17, including a training held for the Pueblo of San Felipe, at which many tribal community members were trained and certified as CPSW's. Residents of the Mescalero Apache Community participated in CPSW trainings in Roswell, NM, January 2017 and Las Cruces, NM, May 2017. An upcoming CPSW training is scheduled to be held in Gallup, NM, October 30 – November 3, 2017. This training was arranged with the generous assistance and hospitality of Rehoboth McKinley Christian Healthcare Services. The hope is to train and certify peers from the Gallup and surrounding areas to include the Navajo Nation, Zuni, Ramah, Crownpoint, and participants from as far north as Shiprock and Farmington.
In addition to extending trainings to more communities throughout the state, OPRE is exploring the creation of specialized peer certifications for family members, veterans, and others.
- **CareLink NM Health Homes**
NM's Health Homes project, CareLink NM, was implemented in April of 2016 with two health home pilot sites in San Juan and Curry Counties. Health Homes serve members with chronic behavioral health conditions, utilizing an integrated behavioral, physical and social health model, with local community agencies assuming the MCO's care coordination and disease management responsibilities. CareLink NM Health Homes is currently expanding to nine additional counties in New Mexico which included outreach to Tribal communities and providers. One Tribal health center applied to be a CareLink NM Health Home provider for Native Americans in Sandoval County and was selected to start January 1, 2018.
- **Treat First Initiative**
The Treat First model of care is an innovative approach to clinical practice improvement. The organizing principle is to ensure a timely and effective response to a person's needs as a first priority. It is structured as a way to achieve immediate formation of a therapeutic



relationship while gathering needed historical, assessment and treatment planning information over the course of a small number of therapeutic encounters. One of the primary goals has been to increase client engagement while decreasing the number of members who are "no shows" for the next scheduled appointment because their needs were not met upon initial intake. BHSD has been piloting the Treat First approach in 13 community-based treatment programs statewide over the last year and a half. The model has demonstrated to be effective in enhancing client engagement; reducing the number of no shows; increasing the number of individuals served; increasing the quality of assessment and treatment plans; and, in some cases, escalating the case closure rate and reducing cost. In FY18, BHSD anticipates reaching out to tribal communities interested in participating in the Treat First Initiative.

- **Integrated Quality Services Review (IQSR)**

IQSR provides a case-based appraisal of frontline practice used for organizational learning and development to improve results in agencies providing integrated primary and behavioral health care service. A multi-method approach is used that includes in-depth case practice reviews applying qualitative measures, focus group interviews, and integration of other sources of information into a discovery-oriented inquiry process. IQSR provides ground-level, real-time, rapid assessment and feedback used by local and state agencies to strengthen frontline case practice, improve training and supervision capacities, and adapt practice to complex, every-changing conditions. An IQSR will be offered to any Native agency selected to be a Health Home.

- **Clinical Reasoning and Case Formulation**

Clinical Reasoning & Case Formulation places an emphasis on treatment planning. The training includes a focus on how to resolve pressures to increase productivity and efficiency that can result in quick completion of treatment plans without the benefit of sound clinical reasoning and a thoughtful case formulation. Building on successful training in Clinical Reasoning & Case Formulation to over 40 Navajo clinical staff in spring 2016, BHSD will be reaching out to determine ongoing interest in training in FY18.

BHSD Trainings

- **Medical Detoxification**

The state continues its efforts to increase capacity for evidence-based, medically-managed detoxification in community hospitals. An educational summit entitled "'Demystifying Hospital and Ambulatory Based Detoxification and Withdrawal'" was held in June 2016. Subsequent trainings were held at three locations in FY17, including Gallup. The event in Gallup was very well attended, with 50 participants, including hospital leadership, pharmacists, physicians, nurses and partners from the Indian Health Services and the Veteran's Administration. Future trainings will be posted on the Network of Care.

- **Certified Peer Support Worker (CPSW) Training**

The Office of Peer Recovery & Engagement (OPRE) conducts Peer Support Specialist Trainings across the state. In FY17, OPRE offered seven trainings throughout the state, including one for Pueblo of San Felipe. An upcoming CPSW training is scheduled in Gallup October 30-November 3, 2017.



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- **Telehealth Webinars**

BHSD has partnered with UNM's Consortium for Behavioral Health Training and Research to provide telehealth webinars to educate clinicians working in rural, and Native American communities.

BHSD Resources

- **Network of Care (NoC)**

The Network of Care is a resource for individuals, families and agencies concerned with behavioral health. It provides information about behavioral health services, laws, and related news, as well as communication tools and other features. Regardless of where you begin your search for assistance with behavioral health issues, the Network of Care helps you find what you need – it helps ensure that there is “No Wrong Door” for those who need services.



SECTION V

TRAINING AND EMPLOYEE NOTIFICATION

Cultural Competency Training

The HSD encourages employees to attend the Cultural Competency Training (CCT) offered through the State Personnel Office (SPO) and the IAD. In SFY2017 the Department worked collaboratively with SPO and IAD to offer CCT to staff in the ISD field offices utilizing the HSD teleconference equipment. Onsite and teleconferencing enabled 233 HSD employees to participate in the Cultural Competency Training in SFY2017.

In addition to CCT, HSD developed an internal training on the *State-Tribal Collaboration Act and HSD State-Tribal Consultation, Collaboration and Communication Policy*. Department executive and mid-level management employees, whose work involves initiating programmatic actions and/or policy changes that have tribal implications, are required to complete this training. This training is offered on the Department Blackboard training website. In SFY2017, 97 managers completed this training.

HSD also purchased the DVD film *Canes of Power* and the copyright permission to place the film on Blackboard. *Canes of Power* is a documentary about the sovereign nation status of the Pueblo Indian Nations of New Mexico. The film is available for viewing by all HSD employees.



Employees are notified about the requirements and schedule for Cultural Competency Training and the availability of HSD internal trainings on Blackboard. Periodic announcements are placed on 'The Wire' the Department's SharePoint, and in the 'HotSpot' a weekly publication of HSD.



SECTION VI

STATE – TRIBAL CONSULTATION, COLLABORATION, AND COMMUNICATION POLICY (STCA)

The HSD State-Tribal Consultation, Collaboration, and Communication Policy (STCA) can be found at http://www.hsd.state.nm.us/Native_American_Liaison.aspx

See Attachment I



STCA Report Closing Statement

The New Mexico Human Services Department submits to the New Mexico Department of Indian Affairs, the 2017 HSD State–Tribal Collaboration Report.

Brent Earnest, Secretary

August 28, 2017

Date

Human Services Department

