

MINUTES OF THE
SANTA FE COUNTY
HEALTH POLICY & PLANNING COMMISSION

June 3, 2016

Santa Fe, New Mexico

I. This regular meeting of the Santa Fe County Health Policy & Planning Commission (HPPC) was called to order by Chair Reena Szczepanski at approximately 9:00 a.m. on the above-cited date in the Santa Fe County Community Services Department conference Room, 2052 Galisteo Street, Santa Fe.

II. The following members were present:

Members Present:

Reena Szczepanski, Chair
John Abrams
Kim Straus
Vivian Heye
Bonnie Keene
Carolyn Roberts
Anna Voltura
Judith Williams

Member(s) Absent:

Don Reece
[Four vacancies]

County Staff Present:

Patricia Boies, Director, Health Services Division
Kati Schwartz, Mobile Health Van Program, RN
Lupe Sanchez, DWI Program
Michael Spanier, CSD
Wendy Dubois, Division Intern

Others Present:

Jack Thomas, SW Care Center	Ramona Flores-Lopez, PMS
Gerry Fairbrother, retired Health services	Lupe L. Salazar, Barrios Unidos
Desiree Valdez, NM DOH	Tom Starke, NAMI, SF Health Alliance
Julian E. Duran, BCBS NM	Ron Hale, NM Alliance of Health Councils
Shelley Mann-Lev, SFPA	Maire Claire Voorhees, SFPA
Jeff Thomas, Southwest Care Center	Jay Jolly, La Familia
Sylvia Barela, Santa Fe Recovery Center	Crista Trujillo, DOH

III. Introductions

Those present introduced themselves.

IV. Approval of Agenda

Upon motion by Commissioner Abrams and second by Commissioner Roberts, the agenda was unanimously approved.

V. Approval of Minutes

Commissioner Straus moved to approve the minutes as presented. His motion was seconded by Commissioner Abrams and passed by unanimous voice vote.

VI. Matters of Public Concern

Sylvia Barela, Santa Fe Recovery Center, reported that they currently have 23 beds; 15 for men and 8 for women. The Center is planning an expansion to include a treatment center specifically for women that will allow them to bring their children five years and under with them. Initially there will be 16 additional beds and the Center hopes to open this service early 2017.

Tom Starke reported on Santa Fe Behavioral Health Alliance activities noting their work with different behavioral health agencies and courts to get people with mental illness out of the criminal justice system. The County has been very supportive and hired two re-entry specialists for the jail and is in the process of hiring a re-entry specialist to help with access to resources within the community.

The Alliance will work with Tiffany Wynn from Santa Fe Mountain Center to conduct a trauma informed response workshop using SAMHSA materials for individuals dealing with people with mental illness.

The Alliance is interested in a New York City program that teaches behavioral health providers the fundamentals of the criminal justice system.

Desiree Valdez, NM DOH, informed the Commission that a final version of the Health System Innovation process is available. The federal funding for the project is no longer available. DOH is working on the availability of funding for health councils next year. She noted that she is working with the pueblos of San Ildefonso and Santa Clara to expand the accessibility to fresh fruits and vegetables for those communities.

VII. Presentations

A. "Alcohol Taxes Saves Lives and Money"

Chair Szczepanski reminded the Commission that this item came before them in November and there were a number of questions that the presenters are now returning to answer.

Shelley Mann-Lev thanked the HPPC for their astute questions they posed at the November meeting and said she hoped the following presentation would gain HPPC's endorsement of the initiative to raise alcohol taxes. She noted this is a state initiative.

1) In regard to the regressive nature of an excise tax, Ms. Mann-Lev offered the following points:

- All sales taxes are by nature regressive
- Relevant to the issue is that consumers pay in proportion to how much they consume
- The majority of drinkers have the ability to regulate how much they drink
- Seven percent of the population have alcohol use disorders
- Although this may not be the case in New Mexico, national literature shows excessive or binge drinking is higher amongst higher income people
- The harms of excessive drinking disproportionately harm people with lower income
- Those with lower incomes will benefit the greatest from increased tax via reduction in consumption and funding Medicaid expansion

Ms. Voorhees reminded the HPPC that the Santa Fe Prevention Alliance advocates the tax be used for treatment, prevention and Medicaid.

Ms. Mann-Lev said McKinley County did increase the alcohol tax (5 cents) in the 1990s and those funds were used solely for treatment. The statewide proposal is an increase of 25 cents per drink: to get significant benefit you have to make a significant change.

Commissioner Straus recommended that the Alliance provide information/data to the legislature about McKinley.

Ms. Voorhees mentioned data showing a significant drop in alcohol related deaths in Alaska when the liquor tax was imposed there.

It was also recommended that the Alliance review New Mexico Voices for Children's one-page summary on taxes that should be fixed to better fund services. Ron Hale was slated to provide assistance in this area.

2) The impact of the price increase on youth alcohol consumption given that youth often don't buy alcohol:

- Research shows that increasing the price of alcohol results in a decline in underage drinking
- If the price is higher, people will be less likely to share alcohol with youth
- Based on surveys, high school students get most of their alcohol from family and friends

The tax is by volume and paid at the wholesale level, using the existing structure.

Commissioner Heye expressed concern that taking away one source for "getting high" may escalate the use of a substitute drug. Ms. Mann-Lev said according to the YRRS (Youth Risk and Resiliency Survey) data, there is evidence of a reduction in underage alcohol use and there is not a big increase in other substances.

Highlighting other communities that have enacted the tax and their results should be added to the report. Ms. Voorhees mentioned that with the increase in alcohol tax, Maryland saw a significant drop in STDs among their youth.

Ms. Mann-Lev said there is considerable price elasticity with alcohol – when the price goes up, consumption goes down.

3) The third issue was that correlation does not mean causation: how do we know that an increase in alcohol tax will cause alcohol consumption to decline:

- All the data on the impact of alcohol tax increases is correlational, and there is a strong scientific consensus that the relationship is causative based on the studies and the price sensitivity of alcohol

Recognizing there will be a loud lobby from the liquor industry against this tax, for purposes of negotiation, the suggestion to “go for broke” and ask for 50 cents a drink was offered. It was also noted that the tax has not been increased for 25 years, 25 cents is modest in terms of inflation.

In a state where there is little economic growth, the alcohol industry, including breweries and spirits distilleries, is growing in New Mexico.

Chair Szczepanski said she met with Ms. Mann-Lev earlier to discuss concerns regarding the initiative and while they are not severe enough to prevent her support, she would like them noticed and addressed in the initiative information: the lack of availability of treatment, the lack of robust treatment options, and the potential problem of a substance substitution market.

Mr. Hale said the NM Alliance of Health Councils has not taken a formal position endorsing the initiative; however, they have asked all the councils to have the conversation.

Santa Fe County DWI Program director Lupe Sanchez said the DWI Planning Council has supported the resolution.

Commissioner Straus moved that the HPPC endorse the Alcohol Taxes Save Lives & Money Resolution [*Exhibit 1*]. Commissioner Roberts seconded and the motion passed without opposition, with Commissioner Heye abstaining.

Speaking from professional experience, Commissioner Heye said when one substance is not available another is turned to. She said not enough is being done to address the underlying causes.

Starting a conversation with the liquor industry as the first step to the excise tax was mentioned.

Commissioner Straus moved to advance the HPPC endorsement to the Santa Fe County Board of Commissioners. Commissioner Roberts seconded and the motion passed with Commissioner Heye’s abstention.

VII. C. Health Care Assistance Program Use of Fund Balances
[Exhibit 2: Funding proposal 2017-2019 and 2017-2018]

Chair Szczepanski characterized this discussion as critical in protecting and addressing the use of the Health Care Assistance Program \$3.3 million fund balance.

Ms. Boies said with the changes that have occurred in health care, the provider programs and extension of Medicaid, the Health Care Assistance Program formerly known as the indigent program, has built up a non-recurring fund balance. The BCC has expressed desire that the money support the priorities of the *Health Action Plan*, including through contracts such as the PMS Crisis Response Team and low birth weight prevention initiatives. Providers continue to be reimbursed for services to the medically indigent.

Ms. Boies said the state is projecting a shortfall in terms of funding Medicaid and other components of the state budget and may go after counties' indigent funds. Santa Fe County wants to ensure that the balance of \$3.3 million in the fund will be spent in ways that will increase the capacity of providers to serve more residents more effectively, to invest in the infrastructure for the system of care in Santa Fe County, and to bolster behavioral health programs.

Staff presented a proposal [Exhibit 2] which provides two alternatives: spending the funds over three fiscal years, or spending the fund over two fiscal years. The fund balance would augment current contracts and programs and fund the implementation of a data system for better provider navigation and coordination within Santa Fe County, as well as fund new programs and contracts. She acknowledged the assistance of Pam Hyde in developing the proposals which included:

- Health Services provider contracts
- Health Services provider claims
- System alignment initiatives: Gap/needs analysis, provider alignment/mapping, data analysis and IT consultation
- Operating – program manager with administrative and behavioral health understanding
- IT coordination system to improve navigation, peer coordination and case management, such as the Pathways system
- Corrections re-entry program – Community Health Care Assistance Program funds those positions
- Behavioral health peer program – peer supported place supervised by a therapist for people with behavioral health issues; UNM is conducting a similar program and they have been found effective and evidence-based
- Zero Suicide Grants – evidence-based approach ensuring that providers are screening for potential suicides; both PMS and CSV are interested
- MAT incentives - Medication Assisted Treatment will pay for physician training in Suboxone, etc. and increase the number of licensed doctors
- Dental Solution Plan – serves as a placeholder to address dental needs in the County

Commissioner Abrams expressed concern that the IT coordination system funding was not adequate. Ms. Boies said she based the figures on information obtained from Pathways that included software, training and subscriber fees, although Pathways would not necessarily be the provider selected. Commissioner Abrams said the line item appears to be deficient in “care and feeding” or “keeping the lights on” for the IT project. Someone has to shepherd the program who has experience in data analysis, service system, etc. The support for this program needs to be recurring funding to ensure the program is sustainable in the County. Commissioner Straus suggested staff discuss the coordinating system with County IT.

The funding proposal is not reliant on the Accountable Health Communities Grant award which will not be announced until the end of the year.

A discussion about the State appropriating these funds from counties ensued and it was noted that the legislature failed to do its job to find money from the correct sources for Medicaid.

Ms. Boies characterized the plans as ambitious and requiring a great deal of administrative work.

“Above all we want to preserve these funds,” stated Chair Szczepanski. She expressed her strong preference for the three-year plan because it may allow for more sustainability. Administrative support is very important and that should be highlighted in the HPPC’s recommendation to the BCC.

Prefacing her motion with the statement that the HPPC wants to protect these funds for County use, Commissioner Williams introduced the following motion:
The HPPC approves and recommends to the BCC the use of the funds as outlined by staff in the three-year plan:

- To increase the capacity of providers to serve more residents more effectively
- To strengthen the alignment with the *Health Action Plan*
- To invest in the infrastructure for the system of care in Santa Fe County
- To strengthen and build on behavioral health programs
- To preserve and protect funding to ensure that it is used for evidence-based, identified County health-related purposes

The HPPC supports the three-year plan as sustainable and manageable by staff; however, it is essential that the administrative capacity be supported to manage the increase in projects and infrastructure (for data collection and analysis) to ensure the programs best meet the needs of county residents. Commissioner Roberts seconded.

A friendly amendment was accepted, added justification to the use of these funds as follows:

- The proposed funding supports the economic engine of health care, the fastest growing segment of Santa Fe County’s economy
- The funding proposal creates new jobs
- These programs and services are identified in and consistent with the Santa Fe County *Health Action Plan*

- These programs and services are preventive in nature and many are not currently covered by Medicaid
- The programs will enhance the County's ability to coordinate care and measure its effectiveness
- There is a preference for the three-year plan because it will enhance the ability to administer and implement the programs and allow the County to measure their progress

The motion as amended passed by unanimous voice vote.

VIII. Matters from the Commission and Staff

A. Director's Report

Ms. Boies reported on the following:

- The City okayed the Presbyterian Medical Center La Soleras project
- 1,200 kids are enrolled in the Imagination Library
- Teen Court has been awarded \$225,000 for the summer youth education and recreation program
- County community centers are being utilized for early voting

IX. Future Agenda Items

A. Possible Agenda Items for Future Meetings

The following topics were mentioned:

- LARC(Long-Acting Reversible Contraception)– delayed parenting

X. Announcements

A. Next HPPC meeting Friday, July 1, 2016, 9 am, same place

XI. Adjournment

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

COUNTY OF SANTA FE)
STATE OF NEW MEXICO) ss

HEALTH POLICY & PLAN M
PAGES: 7

Approved by:

I Hereby Certify That This Instrument Was Filed for
Record On The 6TH Day Of July, 2016 at 02:07:06 PM
And Was Duly Recorded as Instrument # 1798183
Of The Records Of Santa Fe County

Witness My Hand And Seal Of Office
Geraldine Salazar

Deputy *Laura Hernandez* County Clerk, Santa Fe, NM

Reena Szczepanska
Reena Szczepanska, Chair
Health Policy & Planning Commission

Respectfully submitted by:

Karen Farrell
Karen Farrell, Wordswork



Santa Fe County
HPPC: June 3, 2016