
Behavioral Health Services for Native Americans Living in New Mexico

**Leveraging SAPT Block Grant Funds
among both Tribal and Urban Native
American Providers**

August 22nd 2008



Some NM Demographics...

According to the 2006 Census:

- New Mexico's population is 1.96 million
- This population is relatively rural (*15 persons per square mile*) when compared to the national average (*almost 80 persons per square mile*)
- Native Americans represent 9.8% (or 192,000) of this population, and are often located in rural or frontier areas of the State, both on- and off-reservation lands
- There are 22 Tribal Nations in NM



Some Tribal Demographics...

In NM, over 160,000 reside on tribal Lands (see Census 2000 Map):

- **Navajo Nation:**
 - Extends into AZ, UT, and CO States
 - Population is almost 300,000– 107,000 of whom live in NM

- **2 Apache Tribes:**
 - Mescalero, with a population of 4,000
 - Jicarilla, with a population of 2,800

- **19 Pueblos:**
 - Ranging in population from 650 to 10,000
 - Most Pueblos have under 2,000 residents



NM Behavioral Health System

The State provides behavioral health related services through Its:

- Behavioral Health Purchasing Collaborative
- Human Services Department (HSD):
 - Medicaid Assistance Division (MAD)
 - Behavioral Health Services Division (BHSD)
- Department of Health (DOH)
 - Office of Substance Abuse Prevention
- Children, Youth and Families Department (CYFD)
- Local DWI services within 33 Counties



The Collaborative

The Collaborative was created from the 2004 Legislature:

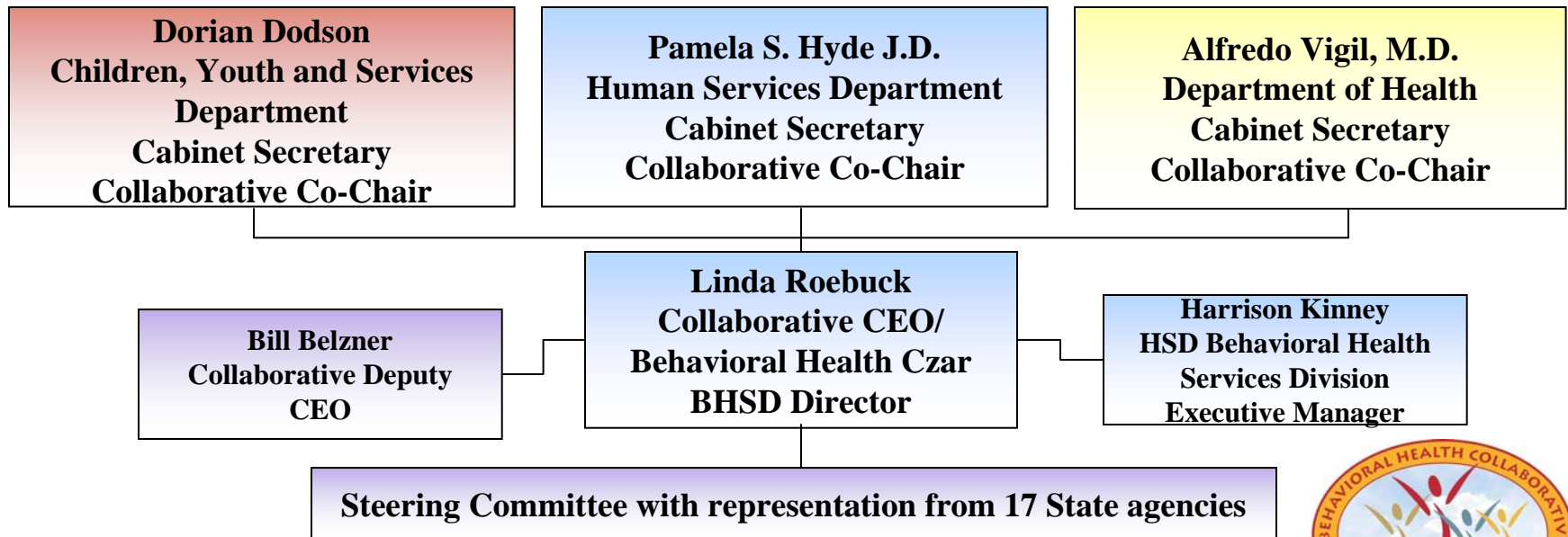
- By statute, 15 State agencies involved in behavioral health collaborate to work as one; it reports to the Legislature through the Legislative Finance Committee
- Its primary focus is to increase access to recovery-oriented services; key goals are to 1) support recovery and resiliency, 2) promote mental health, 3) prevent or reduce adverse behavioral health effects, 4) support consumers in participating fully in their communities, and 5) manage funds effectively and efficiently
- The Collaborative oversees a budget of \$400 million, including funds designated for treating and preventing substance abuse (see handout)



The Collaborative Continued

The Collaborative is a cabinet-level group co-chaired by 3 Departments:

- The Collaborative CEO receives input from 15 State agencies and commissions through a Steering Committee with 22 representatives.



The Collaborative Continued

The Collaborative is also guided by the Behavioral Health Planning Council (BHPC):

- The BHPC is an Advisory Council whose mission is to advocate for adults, adolescents and children with behavioral health issues, including serious mental illness
- The BHPC reviews and makes recommendations on SAPT Block Grant Application, among others
- Currently, the BHPC has 80 members, each appointed by Governor Bill Richardson
 - 34% of these members are providers, and
 - 66% are consumers, family members and advocates



The Collaborative Continued

Since 2007, the BHPC has also ensured that its membership include Its 15 Local Collaboratives (LCs) in New Mexico:

- LCs are communities comprised of local providers, consumers, family members and advocates who promote local consumer- and family- driven behavioral health systems.
- LCs advise the BHPC on 1) setting legislative priorities, 2) quality and coordination of services, 3) identifying and prioritizing local service needs and gaps, 4) training and technical assistance, among other activities
- Over half the members of the BHPC are also members of an LC; each LC may have up to 3 representatives on the BHPC



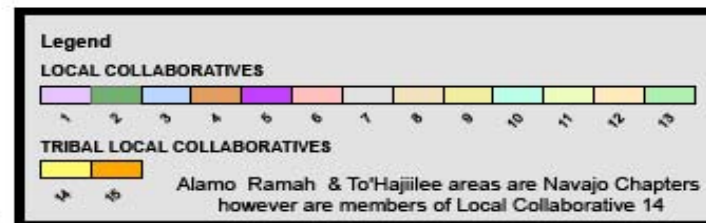
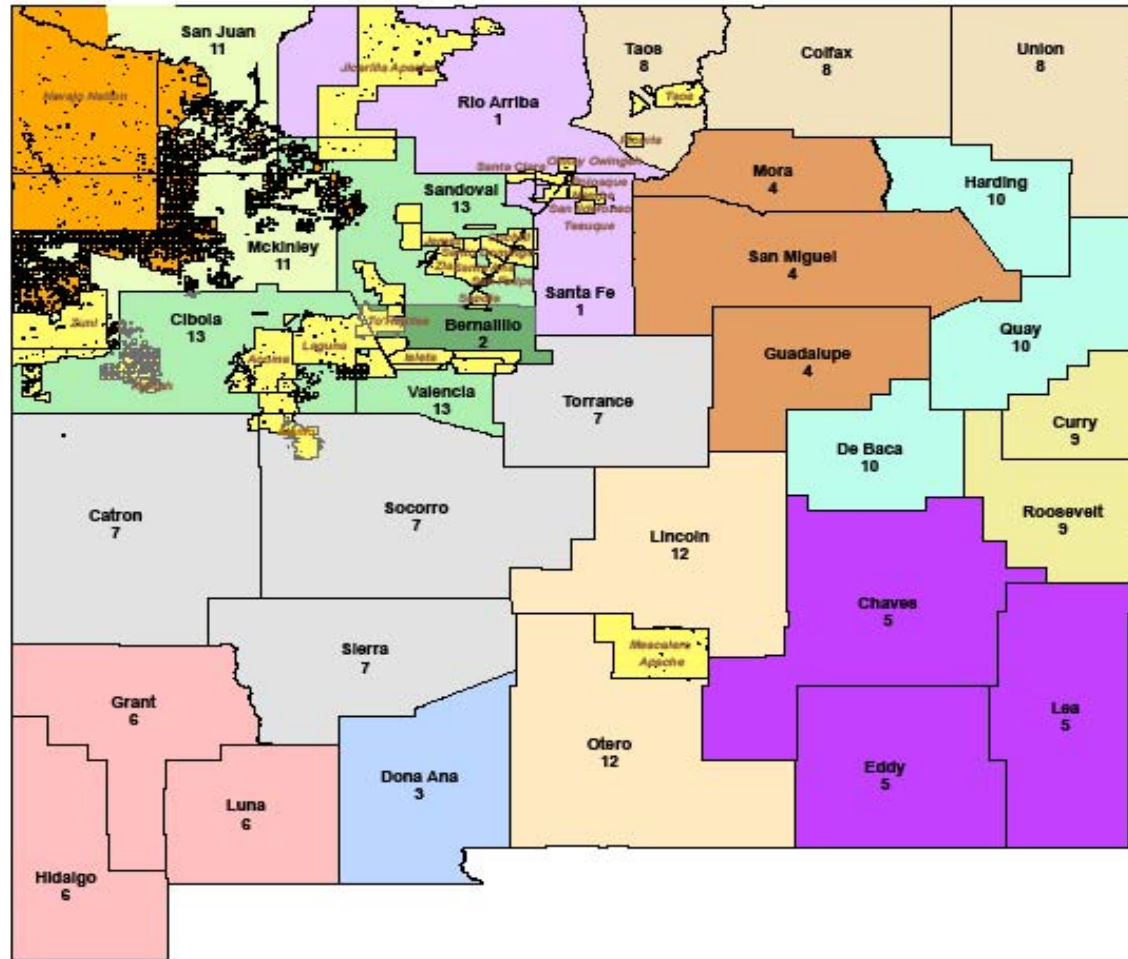
The Collaborative Continued

Currently, LCs 14 and 15 represent all Native American communities in New Mexico:

- Expansion plans are underway to include up to 3 more Native American LCs
- The BHPC also has 5 subcommittees, one of which is designated Native American and has representation from LCs 14 and 15; it is co-chaired by State's Indian Affairs Department and meets every 2 months
- The State also utilizes several Cross-Agency Team (CAT) staff to assist all LCs with their unique and diverse capacity building and resource development needs

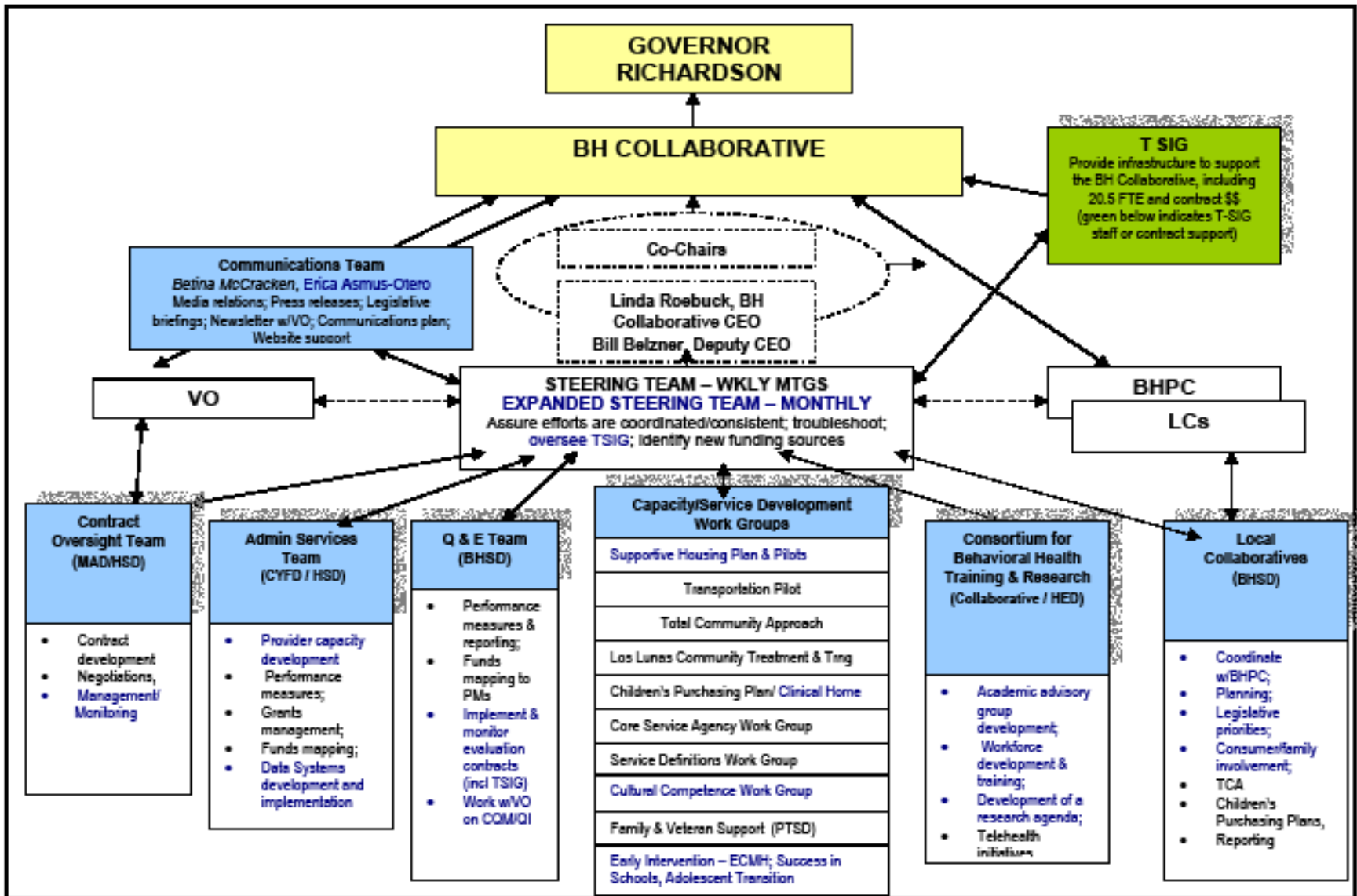


The 15 LCs and 33 NM Counties



Source New Mexico Behavioral Health Collaborative

The Collaborative Organization



The Collaborative Continued

The State's system of public behavioral health services began July 1, 2005:

- The Collaborative contracted a 'Statewide Entity' (SE), ValueOptions (VO), to manage the new service delivery system and its funds, including the NM network of providers, until June 30, 2009.
- VO has a Native American Office as one of its 6 Regional Offices, that works with 31 Native American and Tribal providers, as well as IHS, LCs 14 & 15, and others to deliver behavioral health substance abuse and prevention services
- The State is currently engaging in a Request-For-Proposals (RFP) process to contract a SE for July 1, 2009 until June 30, 2013.
- The RFP was posted online on August 8, 2008 along with several supporting documents and a procurement library, at: www.bhc.state.nm.us/newsresources.html



The Collaborative Continued

Based on experiences of the past 4 years, the new SE contract will place more emphasis on:

- Unifying a data system and developing data infrastructure, especially for LCs
- Increasing LC involvement in oversight and evaluation of the behavioral health system
- Improving cultural competency – to this end, the Collaborative recently engaged in a SE RFP Tribal Consultation process, utilizing the State’s Health and Human Services (HHS) Tribal Protocol (2005)



The Consultation Protocol

The State's Health and Human Services (HHS) Tribal Consultation Protocol came out of an executive order by Governor Bill Richardson:

- The order directed state agencies and departments to develop plans for consulting the 22 tribes and pueblos in health and health care matters
- A State-Tribal work group developed the protocol and Its 7 key principles to working together (see handout)
- Participating HHS State departments include 1)Health, 2)Human Services, 3)Children, Youth and Families, 4)Aging and Long-Term Services, & 5)Indian Affairs



BHSD at HSD Continued

BHSD oversees a variety of programs that include Tribal and Native American Agencies – a few are:

- **Access To Recovery (ATR)** provides vouchers to clients for purchase of substance abuse clinical treatment and recovery support services. New Mexico was again awarded this grant by SAMHSA in 2007 to operate in 4 Counties and Five Sandoval Indian Pueblos Incorporated
- **Co-Occurring Disorders (COD)** State Incentive Grant, in partnership with UNM, has been training Native American providers on co-occurring disorders since 2007
- **Total Community Approach (TCA)** is a partnership between the Collaborative and 4 LCs dealing with high rates of substance abuse; LC 15 (Navajo Nation) is a partner and coordinates a variety of providers to deliver TCA services



BHSD at HSD

BHSD provides behavioral health treatment services & recovery support for adults not receiving Medicaid:

- The total BHSD budget is almost \$54 million in State and federal funds; SAPT funding accounts for \$4.33 million
- BHSD allocates just over \$1.7 million to Native American substance abuse treatment – of which \$1.3 million is from the SAPT Block Grant
- This year, VO was also able to allocate \$200,000 to Tribal and Native American agencies through its ‘Community Reinvestment’ funds



BHSD at HSD Continued

SAPT Block Grant funds leverage the Behavioral health services of 5 Native American and Tribal agencies:

- **Five Sandoval Indian Pueblo Incorporated (FSIPI)** receives \$105,050/yr to provide outpatient treatment for consumers from pueblos in the area with co-occurring disorders.
- **Na’Nizhoozhi Center Incorporated (NCI)** receives \$426,500/yr to operate a residential treatment program oriented to traditional Native American practices, for homeless Native American consumers
- The Navajo Nation’s **Department of Behavioral Health Services (DBHS)** receives \$71,625/yr to provide Comprehensive Specialized Navajo Traditional Treatment (CSNTT) services for Navajo consumers with substance abuse issues and co-occurring disorders.
- **Eight Northern Indian Pueblos Incorporated (ENIPI)** receives \$586,431/yr to operate New Moon Lodge, a residential treatment program for adult male consumers from tribes across New Mexico State.
- **First Nations Community Healthsource (FNCH)** receives \$114,695/yr to provide outpatient counseling and case management services for urban Native American consumers with substance abuse and co-occurring disorders.



MAD at HSD

MAD administers the Medicaid and Insure NM! Programs:

- As of March 2008, Native American comprised about 18% (or 79,000) of the total Medicaid enrollment (over 437,000) in the State
- The Native American Liaison provides technical assistance and support for Tribes and Indian Health Service (IHS) regarding Medicaid
- Over 30 IHS and Tribal 638 facilities are now enrolled as Medicaid providers for outpatient and inpatient behavioral health services in the State



Prevention at DOH

The Office of Substance Abuse Prevention is the Single State Authority (SSA) for substance abuse prevention services:

- The Office is nationally recognized as a leader in the development of state of the art prevention programs; it continues to foster a comprehensive prevention system by building many partnerships across public, private, and not-for-profit agencies
- All prevention models use SAMHSA's evidence-based practices



Prevention at DOH

The Office supports 7 substance abuse prevention programs across the State that primarily serve over 800 Native American youth and their families:

- 6 of these programs provide direct services and environmental strategies and 4 programs utilize 'Project Ventura' curricula – an evidence-based experiential model developed specifically for Native American youth
- The total prevention budget is \$8.15 million in State and federal funds; the Office allocated almost \$1.2 million to Native American substance abuse prevention – of which almost \$287,000 was from SAPT Block Grant funding



Questions & Comments?

For questions about:

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