1	AN ACT	
2	RELATING TO PUBLIC ASSISTANCE; ENACTING A NEW SECTION OF THE	
3	PUBLIC ASSISTANCE ACT TO REQUIRE THE SECRETARY OF HUMAN	
4	SERVICES TO ESTABLISH A PROGRAM TO PROVIDE HOME VISITING	
5	SERVICES TO MEDICAID-ELIGIBLE INFANTS, TODDLERS AND THEIR	
6	FAMILIES TO IMPROVE THE HEALTH OF NEW MEXICO FAMILIES;	
7	PROVIDING FOR RULEMAKING.	
8		
9	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:	
10	SECTION 1. A new section of the Public Assistance Act	
11	is enacted to read:	
12	"MEDICAID INFANT, TODDLER AND FAMILY HOME VISITING	
13	PROGRAM	
14	A. Consistent with federal law and subject to the	
15	appropriation and availability of state and federal funds,	
16	the secretary shall establish an infant, toddler and family	
17	home visiting program.	
18	B. The medical assistance division of the	
19	department shall work with eligible home visiting program	
20	providers to execute provider participation agreements and,	
21	in accordance with department rules, establish procedures for	
22	establishing home visiting providers as eligible for	
23	reimbursement for furnishing home visiting services to	
24	medical assistance recipients.	
25	C. A home visiting program shall:	SB 1 Page

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1 (1) use home visiting as a primary service 2 delivery strategy; 3 (2) include regular, voluntary visits provided in the homes of infants and toddlers, from birth to 4 5 three years of age, and their families; (3) be evidence-based or standards-based and 6 grounded in relevant, empirically based best practices that 7 8 are designed to produce and measure the following outcomes: 9 improvement of infant, toddler and (a) 10 parental health outcomes; 11 (b) positive parenting practices; (c) healthy parent and child 12 relationships; 13 child well-being and prevention of (d) 14 15 adverse childhood experiences; enhanced social-emotional 16 (e) development; 17 support of cognitive development in (f) 18 infants and toddlers; 19 20 (g) increased school readiness; and (h) delivery of a variety of 21 information, education, developmental, referral and other 22 supports to an infant or toddler and the infant or toddler's 23 family; 24 (4) have comprehensive home visiting 25 SB 175 Page 2

1 standards that ensure high-quality service delivery and 2 continuous quality improvement; 3 (5) have demonstrated significant, sustained 4 positive outcomes; 5 (6) follow program standards that the 6 secretary has established by rule and that specify the purpose, outcomes, duration and frequency of home visiting 7 services; 8 (7) follow research-based curricula and 9 10 protocols; employ well-trained and competent staff 11 (8) and provide continual professional supervision and 12 development relevant to the specific program or model being 13 delivered; 14 15 (9) demonstrate strong links to other community-based services; 16 (10) continually evaluate performance to 17 ensure fidelity to the program standard; 18 (11) collect data on program activities and 19 20 outcomes; and (12) be culturally and linguistically 21 appropriate. 22 D. The human services department and the children, 23 youth and families department shall cooperate to: 24 25 (1) ensure that the home visiting services SB 175 Page 3

1 provided under this section align with children, youth and 2 families department standards for home visiting and are not 3 duplicative in the provision of services; 4 develop a mechanism for reimbursing home (2) 5 visiting program providers for services to prevent 6 duplicative payments and to maximize available federal funding, including federal funding for any services that are 7 8 federally reimbursable through the medical assistance 9 division, including: 10 (a) case management services; (b) licensed practitioner services; 11 (c) preventive services; 12 services that meet federal 13 (d) requirements under the early and periodic screening, 14 15 diagnostic and treatment benefit; rehabilitative services; 16 (e) (f) therapy services; 17 home health services as recommended 18 (g) or prescribed by a physician; 19 20 (h) health homes for individuals with chronic conditions; and 21 (i) extended services to pregnant 22 women; and 23 determine the target population of 24 (3) children and families that will be eligible for home visiting 25 SB 175 Page 4 services provided under this section as available state and federal funding permit each year.

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E. The secretary shall adopt and promulgate rules in accordance with the provisions of this section.

F. In consultation with New Mexico's Indian tribes, nations and pueblos, providers of home visiting services and one or more experts in home visiting, the department shall:

9 (1) jointly develop an outcomes measurement
10 plan to monitor outcomes for infants, toddlers and families
11 receiving services through home visiting programs;

12 (2) develop indicators that measure each
13 outcome measure established pursuant to Paragraph (3) of
14 Subsection C of this section; and

(3) complete and submit the outcomes
measurement plan by December 1, 2017 to the governor,
legislative finance committee, the legislative health and
human services committee and the chief executive of each
Indian tribe, nation and pueblo in the state.

G. Beginning July 1, 2018, and by July 1 each year thereafter, the department shall produce a written report on annual outcomes of the home visiting programming implemented pursuant to this section to the governor, the chief executive of each Indian nation, tribe and the pueblo in the state, the legislative finance committee and the legislative health and

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1	human services committee. The annual outcomes report shall	
2	include:	
3	(1) achieved outcomes in each area outlined	
4	in Paragraph (3) of Subsection C of this section, as measured	
5	by the outcomes measurement plan; and	
6	(2) data regarding:	
7	(a) the cost per family served;	
8	(b) the number of families served;	
9	(c) demographic data of families	
10	served;	
11	(d) percentages of families served in	
12	rural, tribal and urban areas;	
13	(e) recommendations for health outcome	
14	and program quality improvements; and	
15	(f) recommendations to ensure that	
16	reimbursement is effective and maximizing federal match	
17	dollars."	SB 175 Page 6
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