Stemming the state’s mental health and substance abuse crises
Hospitals play a critical role

Fast Facts*

New Mexico’s hospitals are on the front lines of serving the crush of thousands of behavioral health patients, those suffering from mental illness and substance use disorder (SUD), many times co-occurring and all too often ending in tragedy. Once stabilized and released, patients, left without coordinated access to mental health providers and services, continue to churn in and out of hospital emergency departments (EDs).

- New Mexico hospitals provided over 73,400 days of care for patients hospitalized with a mental illness primary diagnosis.
- Over 25% of New Mexico ED patients are diagnosed with behavioral health or substance-related diagnoses.
- Over 32% of high school students report feelings of sadness or hopelessness, a known risk factor for depression, suicide attempts, cigarette smoking, binge drinking and illicit drug use.
- Of New Mexico’s overdose deaths involving prescription opioids and heroin, 72% involved prescription opioids.
- New Mexico has the highest rate of alcohol related death and ranks 17th in drug overdose deaths nationwide.

* Find our sources on page 4.
Behavioral health advancement: A NMHA top 2020 policy priority

New Mexico Hospital Association (NMHA) and its 46 member hospitals, stand ready to partner with others to stem our state’s behavioral health and substance abuse crises. We believe that current system gaps must be addressed with broad coordinated approaches and funding focused on optimal patient care.

NMHA supports:

- Robust reimbursement and enhanced funding by Medicaid and other payers for behavioral health facilities, programs, providers and services recognizing that hospitals are “Always There - Ready to Care.”

- Mental health provider workforce gains and statewide access to behavioral health services. Access should allow hospitals to reliably refer and connect patients to services in and outside the hospital setting.

- Accurate accounting of who is providing mental health services, the nature of the services, provider licensure processes and qualifications, current and number of mental health providers needed to meet demand.

Identifying mental illness, substance abuse and co-occurring behavioral health disorders, NM EDs take the lead

In New Mexico, over 25% of ED visits include at least one behavioral health diagnosis. Patients with substance use disorder, driven by their addictions, also present at EDs seeking prescription medications. In response, the NMHA has done the following:

- NMHA facilitated implementation of the statewide Emergency Department Information Exchange (EDie), a groundbreaking partnership between payers and providers. EDie is an IT exchange platform that allows ED providers to identify high-risk, high-use patients with substance misuse and mental health issues and deliver them to timely, appropriate services. The quality and consistency of the information input into the platform is critical to its success.

- NMHA, through its Behavioral Health Task Force, developed the Emergency Department Opioid Risk-Reduction Strategies and Prescribing Guidelines. These guidelines provide hospitals clear direction in establishing and implementing protocols for addressing opioid use and abuse and prescribing within EDs.

Funding for New Mexico hospitals to further implement proactive solutions like these is one key strategy to addressing our state’s behavioral health and substance abuse challenges.

Who is the New Mexico Hospital Association (NMHA)?

- Represents 46 hospitals, including behavioral health hospitals, on state and federal legislative and regulatory public policy issues
- Partners with others to improve the health status of New Mexico residents through best practices and innovation
- Authoritative source for hospital data used in public policy initiatives (e.g. hospital quality data)
- Advocates for the common good and collective interests of members and patients
Webinar training: Opioid use disorder in the ED

NMHA is actively supporting state-wide training for emergency departments by offering nursing professional development contact hours for training. In collaboration with New Mexico Department of Health and New Mexico Rural Hospital Network, NMHA hosted a December 2019 five module webinar series training on management of opioid use disorders (OUDs). The recorded webinar series features topic experts and is available on demand. Topics included:

- Neurobiology of opioid use disorder (OUD)
- Medication Assisted Treatment (MAT) in the ED
- Stigma of OUD and words that change a culture
- Tools to use in the ED for OUD
- Stages of change in OUD

NMHA: Collaborating with others to make a difference

NMHA is engaged in the following efforts.

**Neonatal opioid withdrawal treatment** - NMHA is proud to be an active member of the New Mexico Perinatal Collaborative (NMPC) which is leading an initiative to improve care to infants with Neonatal Opioid Withdrawal Syndrome (NOWS). Through site visits to educate local clinicians and annual meeting presentations, the NMPC intends to improve outcomes for babies by developing standardized structured guidelines for recognition and intervention.

**Behavioral Health Collaborative** - Created in 2004, the Behavioral Health Collaborative brings together several state agencies and multiple resources across state government to create a single behavioral health care and services delivery system that promotes mental health, emphasizes prevention, early intervention, resiliency, recovery and rehabilitation, while managing funds efficiently, and ensuring availability of services throughout the state. Its vision includes assisting behavioral health recipients in participating fully in the lives of their communities. This cabinet-level group represents 15 state agencies and the governor’s office. NMHA closely monitors the work of the Collaborative and seeks to contribute hospital perspectives.

**Overdose Prevention and Pain Management Advisory Council (NM DOH)** - New Mexico’s Overdose Prevention and Pain Management Advisory Council is charged with reviewing the current status of overdose prevention and pain management standards and education efforts for both consumers and professionals. It provides recommendations on pain management and clinical guidelines. The council was created under the state Pain Relief Act in 2012. NMHA attends regular meetings.

**Bridges 2 Wellness (B2W), Promoting Integration of Primary and Behavioral Health Care Advisory Council** - The advisory council provides advice on the B2W program, a multi-million, multi-year grant given to Grant and Lea Counties from the federal Substance Abuse and Mental Health Services Administration (SAHMSA). Supported by New Mexico Human Services Departments and the University of New Mexico, the grant is intended to significantly increase collaboration between behavioral health and primary care providers through increasing health promotion, coordination of care and integration services. These services focus on improving the overall health and wellness of adults with mental illness and substance use disorders who also have chronic physical health conditions.

**Pew Charitable Trusts, NM Opioid Treatment and System Research** - NMHA staff and its members are in ongoing communication with representatives from the Pew providing them insights on substance use and behavioral health as related to hospitals. The governor’s office and state legislature asked Pew to analyze New Mexico’s substance use disorder treatment system. Their approach includes data analysis and interviews with key stakeholders. The goal is to produce policy recommendations that will improve the substance use disorder treatment system, harm reduction services, and recovery support services.
Components of effective mental health services

Hospitals and community partners, with a skilled workforce, additional support, resources and unified coordination, could more broadly provide the following services.

- Full implementation of the Emergency Department Information Exchange (EDIE) and Emergency Department Opioid Risk-Reduction Strategies and Prescribing Guidelines

- Medication Assisted Treatment (MAT) – MAT, including opioid treatment programs (OTPs), combines behavioral therapy and medications to treat substance use disorders. Federal law allows more types of providers (i.e. NPs, PAs, CNSs, CRNAs, and CNMs) to administer MAT. Presbyterian Española Hospital has implemented MAT.

- Warm hand-offs – Connecting patients at the initial point of care, through referral, to a mental health provider, peer support worker (i.e. person with “lived experience,” who has been successful in the recovery process), or other resources

- Behavioral health workforce – Robust funding and support for the recruitment and retention of a behavioral health workforce, to whom hospitals can reliably refer patients

- Transportation – Safe, reliable and timely transportation to and from mental health inpatient and outpatient facilities

New Mexico hospitals: Providing comprehensive psychiatric care

New Mexico’s hospitals provide more than 550 licensed beds designated for psychiatric patient care. All hospitals, however, serve patients with varying degrees of mental and/or behavioral health issues.

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<tr>
<th>Hospital</th>
<th>City</th>
<th>Designated Psych. Beds</th>
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<tr>
<td>Central Desert Behavioral Health Center</td>
<td>Albuquerque</td>
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<tr>
<td>Haven Behavioral Hospital of Albuquerque</td>
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<td>Lovelace Medical Center</td>
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<td>Presbyterian Kaseman Hospital</td>
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<td>University of New Mexico Hospital</td>
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<td>Gerald Champion Regional Medical Center</td>
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<td>Artesia General Hospital</td>
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<td>Mesilla Valley Hospital</td>
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<td>Eastern New Mexico Medical Center</td>
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<td>Gila Regional Medical Center</td>
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<td>CHRISTUS St. Vincent Regional Medical Center</td>
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<td>Total (approximate)</td>
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Sources: