



**BLUEPRINT for HEALTH  
NEW MEXICO**  
*Designing Better Health for Children & Families*



# HEALTH CARE REFORM IMPLEMENTATION WORK PLAN for New Mexico



Prepared for the  
**W.K. Kellogg Foundation**

Submitted by  
**Con Alma Health Foundation &  
the BluePrint for Health New Mexico Advisory Network**

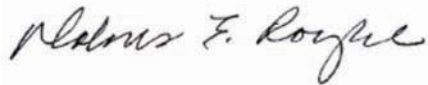
## ACKNOWLEDGEMENTS

Con Alma Health Foundation (CAHF) would like to thank the W.K. Kellogg Foundation for its grant support for the planning of a community engagement and capacity building strategy in New Mexico with an emphasis on Bernalillo, Doña Ana, San Juan and McKinley counties to influence Health Care Reform Implementation in New Mexico on behalf of vulnerable children and families.

We would also like to thank the Project Co-Directors (Roxane Spruce Bly and Charlotte Roybal), Project Team, Resource Team, Guiding Principles Committee, Implementation Planning Group and the other members of the BluePrint for Health New Mexico Advisory Network who contributed their time and expertise to this process.

Please feel free to contact me if you have any questions about BluePrint for Health New Mexico and/or the Health Care Reform Implementation Work Plan. I can be reached via email at [droybal@conalma.org](mailto:droybal@conalma.org) or phone (505) 438-0776 ext. 3.

Mil gracias,



Dolores E. Roybal, Executive Director  
Con Alma Health Foundation  
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*Con Alma Health Foundation's mission is to be aware of and respond to the health rights and needs of the culturally and demographically diverse peoples and communities of New Mexico. Con Alma seeks to improve the health status and access to health care services for all, and advocates for health policy which addresses the health needs of all New Mexicans.*

*BluePrint for Health New Mexico reflects these core values with a focus on advancing health equity.*

# ACKNOWLEDGEMENTS\*

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\*Organizational affiliations can be found in Appendix 1

## ACKNOWLEDGEMENTS

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\* Organizational affiliations can be found in Appendix 1

BluePrint for Health New Mexico  
Health Care Reform Implementation Work Plan for New Mexico

## EXECUTIVE SUMMARY

### *The Potential for Health Care Reform in New Mexico*

New Mexico offers much promise and potential for improving the health of children and families in the state through its strong history of determination and spirit of working together to solve problems. New Mexico's rich diversity and cultural traditions offer a unique laboratory to create innovative strategies for improving the health of children and families. As described throughout this document, there are a number of innovative and effective programs in New Mexico that are designed to improve the health of children and families, expand the workforce and ensure access to culturally and linguistically appropriate health care services. Some examples include Forward New Mexico, a workforce development pipeline program in Hidalgo County, and the University of New Mexico's Combined BA/MD Degree Program designed to address the physician shortage problem in NM by admitting high school students who, after completing their B.A. and other requirements, enter the School of Medicine and complete their M.D. degree. New Mexico has demonstrated success in developing and implementing robust community health worker or models across the state. Community members are trained to assist individuals with preventive care and health education, and to navigate the health care system.

Children and families in New Mexico face many socio-economic challenges that affect their ability to experience positive health outcomes. New Mexico has the second highest poverty rate in the nation with 1 out of 3 children living in poverty and more than half living in low-income households.<sup>1</sup> Only 2 out of 10 New Mexico 4th graders are proficient readers, placing New Mexico 47th in the nation for the percentage of teens who do not finish high school.<sup>2</sup> High dropout rates result in low levels of educational attainment with just 25.1% of New Mexicans age 25 or older possessing a bachelor's degree.<sup>3</sup>

Additionally, as a minority-majority state, New Mexico has the highest percentage of Hispanics in the U.S. (46% based on 2010 census), and 9.4% Native American. Although this diversity is valued in New Mexico, communities of color fare far worse than their white counterparts across a range of health indicators according to reports by the Joint Center for Political and Economic Studies.<sup>4</sup>

The correlation between poverty, educational attainment, and good health is evident when comparing health outcomes for New Mexico's children and others in the United States. New Mexico ranks 48 and 49 respectively in teen death and teen birth rates, and child death rates

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<sup>1</sup> Segal, Myra. Interactive briefing in Las Cruces, New Mexico. September 20, 2011.

<sup>2</sup> Ibid

<sup>3</sup> <http://quickfacts.census.gov/qfd/states/35000.html>

<sup>4</sup> <http://www.jointcenter.org>

increased by 20% between 2000 and 2007.<sup>5</sup> Developing solutions to these complex problems and ensuring that children, families, and communities in New Mexico benefit from the many opportunities that exist within the Affordable Care Act will require the capacity to successfully implement federal health care reform across the state and advance health equity for racially and ethnically diverse populations.

New Mexico faces significant challenges in implementing federal health care reform due to a number of barriers including workforce shortages, low rates of health insurance coverage, and the very remote, rural nature of the state. Currently, New Mexico ranks 32nd in the U.S. in the number of licensed, registered physicians per capita, and many of these physicians are either not active in the workforce or nearing retirement age. New Mexico needs at least 400–600 new primary care providers in order to provide adequate access. The disproportionate number of physicians, nurse practitioners, physician assistants and other “midlevel” providers in urban areas exacerbate workforce shortage issues. More than 23 percent of the state’s population lack insurance, the second highest uninsured rate in the nation. A majority of its small businesses do not and cannot afford to offer health insurance to their employees, and thousands of New Mexicans live in remote areas with limited or no access to health care services. As a state rich in ethnic, racial and tribal diversity, cultural and linguistic barriers prevent many New Mexicans from accessing culturally and linguistically appropriate health care services and may present challenges to ensuring that the benefits of health care reform are extended to those who need them the most.

Successful implementation of the Patient Protection and Affordable Care Act (ACA) could directly improve the health of children and families across New Mexico. The establishment of a Health Insurance Exchange in 2014 could increase access to affordable, high quality health coverage for thousands of children and their parents who are currently uninsured. The expansion of Medicaid eligibility to include all adults up to 133% of the federal poverty level, could provide many thousands of New Mexicans with the peace of mind that accompanies the

knowledge that paying for critically needed health care services will not be weighed against the need to pay for food, gas, or housing. The emphasis on accountability for quality and effectiveness could result in a health care system that is responsive to the needs of children and families and promotes the elimination of the health disparities that plague them. Finally, the new law provides many opportunities for communities to develop and implement health promotion, prevention, and wellness programs to improve the health of children and families in underserved communities across the state.

***“I was at Walgreens waiting in line for my prescription to be filled. A woman with a small child was turned away because her Medicaid had expired. We have to make it easier for New Mexico’s children and families to stay enrolled.”***

**—BluePrint for Health Resource Team Member**

<sup>5</sup> [http://datacenter.kidscount.org/Databook/2011/OnlineBooks/ForMedia/StateProfiles/KCDB2011\\_profiles\\_NM\\_FINAL-rev.pdf](http://datacenter.kidscount.org/Databook/2011/OnlineBooks/ForMedia/StateProfiles/KCDB2011_profiles_NM_FINAL-rev.pdf)

## *Engaging Communities to Improve the Health of Children and Families*

There have been previous activities designed to facilitate the implementation of health care reform in New Mexico. A key difference between BluePrint for Health and other efforts is its fundamental goal to ensure that implementation of federal health care reform leads to improved health outcomes for children and families. A core component of the project was to emphasize the needs of four counties in New Mexico with the largest concentrations of children living in poverty: Bernalillo, Doña Ana, McKinley and San Juan. Using funding provided through this project, the four targeted counties were able to complete the research and assessment necessary to address specific community health goals. More importantly, these community-based projects enabled the four counties to develop or expand their local capacity to implement health care reform by strengthening the knowledge base in their community and connecting them with technical expertise and support.

### *A Collaborative Initiative*

Recognizing that the complexities facing the state require innovative solutions and that no clear, easy answers exist, BluePrint for Health New Mexico employed a collaborative planning process designed to engage a diverse group of stakeholders to develop a plan to successfully implement the federal ACA with the goal of improving the health of New Mexico's children and families. Over a six-month planning period, BluePrint for Health New Mexico received funding through a grant from the W.K. Kellogg Foundation to the Con Alma Health Foundation, resulting in this implementation work plan.

### *Diverse Stakeholders*

The BluePrint for Health New Mexico Advisory Network, a stakeholder group reflecting New Mexico's vibrant diversity, was formed in June 2011 to provide guidance and strategic planning to help New Mexico implement health care reform. The BluePrint for Health New Mexico Advisory Network includes representatives from the community, private and non-profit employers, policy makers, government entities, businesses, advocacy organizations and providers. The project commissioned a BluePrint Resource Team to perform research and analysis to link the strategic plan to implementation action.

When initially approached, some Network members and stakeholders expressed reservations and skepticism about working together to develop a plan to implement health care reform. Their concerns centered on past experiences in which various stakeholders differed significantly regarding their roles in overseeing or participating in the implementation process. Despite these initial challenges, the Network was able to reach consensus in many areas, including the principles used to guide the planning process and overarching strategic goals and objectives. When discussing strategies and mechanisms to achieve the goals, there were areas of disagreement, but the Network members were able to develop mutually agreeable alternatives. As indicated in the document, there is still significant work to be done to create a unified voice across all stakeholder groups.

## ***Guiding Principles***

The initial accomplishment of BluePrint for Health New Mexico was the development of a set of shared guiding principles. The guiding principles served to ensure that any goals or strategies adopted for implementation reflected the values and priorities of the BluePrint for Health New Mexico Advisory Network and met the needs of children and families in New Mexico.

1. Maximize Health Coverage and Access
2. Improve Health Outcomes and Reduce Disparities
3. Ensure Transparency, Accountability, and Input Through Diverse Partnerships
4. Promote an Effective and Efficient Medicaid Program
5. Develop a Health Insurance Exchange with Affordable Options and Strong Provider Networks
6. Plan for Ongoing Strong Safety Net for Remaining Uninsured
7. Develop Strong Outreach and Education Programs
8. Ensure Strong Tribal Consultation and Partnership
9. Foster Effective Collaboration with the Business Community

## ***Focus Areas for Health Care Reform***

In an effort to focus the implementation work plan on key elements of reform that are most likely to result in improved health outcomes for children and families, Blueprint for Health New Mexico narrowed its focus to ten areas of successful health care reform implementation as designed by the National Academy for State Health Policy:

1. Be Strategic with Insurance Exchange
2. Regulate the Commercial Health Insurance Market Effectively
3. Simplify and Integrate Eligibility Systems
4. Expand Provider and Health System Capacity
5. Attend to Benefit Design
6. Use Your Data
7. Pursue Population Health Goals
8. Demand Quality and Efficiency from the Health Care System
9. Engage the Public in Policy Development and Implementation
10. Implications of Health Care Reform for Native Americans<sup>6</sup>

## ***Technical Research and Analysis to Support Implementation Plan***

As part of its activities BluePrint for Health New Mexico researched: opportunities to increase health care access for children and families; identified and coordinated current and past New Mexico health improvement efforts; reviewed existing New Mexico implementation efforts and identified future actions needed in New Mexico in order to take advantage of opportunities to develop health care community capacity; and, analyzed a number of issues related to planning

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<sup>6</sup> Not included in the National Academy for State Health Policy recommendations, but a focus for this project due the Indian-specific provisions of the Affordable Care Act



for a Health Insurance Exchange. Eighteen policy briefs and technical reports were prepared for use by the Advisory Network in developing the implementation work plan with each of the reports tied to one of the ten focus areas from the National Academy for State Health Policy.

### *A Unified Voice and Mechanism to Provide Input to the State as It Implements Reform*

In September 2011 the state of New Mexico submitted a Level I Health Insurance Exchange Establishment grant proposal to the federal government for \$34.3 million and anticipates receipt of the Level I grant by November 15, 2011. Previously, the state of New Mexico was granted a \$1 million Health Insurance Exchange planning grant. It is projected that up to 425,000 New Mexicans will be able to seek health care coverage through the Exchange.

The grant envisions substantial stakeholder participation in planning and development of the Exchange. BluePrint for Health New Mexico seeks to become a major mechanism for focused stakeholder input to the state's reform activities.

### *A Means to Advance Health Equity for Racially and Ethnically Diverse Populations*

As referenced in the landmark report by the Joint Center of Political and Economic Studies report, "Patient Protection and Affordable Care Act of 2010; Advancing Health Equity for Racially and Ethnically Diverse Populations, July 2010," ACA's provisions can reduce health disparities. BluePrint for Health New Mexico's implementation plan has a focus on health equity for racially and ethnically diverse populations.

## EXECUTIVE SUMMARY STRATEGIC GOALS AND OBJECTIVES

The following strategic goals and objectives were adopted by the BluePrint for Health New Mexico Advisory Network and are outlined in this Plan:

### *Goal 1: Increase Access to Health Coverage for Children and Families.*

**Objective 1:** Support the creation of a Health Insurance Exchange that has the authority to provide affordable, high quality health plans for individuals and small employers, as an independent quasi-governmental entity, with a board comprised of individuals who do not have a financial interest in the insurance products sold.

**Objective 2:** Maximize participation in the Exchange by ensuring that 90% of eligible children and families obtain coverage through the Exchange.

**Objective 3:** Increase Medicaid enrollment by 200,000 with an emphasis on under-enrolled children and families by December 31, 2014.

**Objective 4:** Develop mechanisms to finance health care for children and families who remain uninsured or ineligible to take advantage of the ACA.

### *Goal 2: Improve the Health of Children, Families and Communities*

**Objective 1:** Build capacity within local, state, county and tribal governments, *colonias*, health councils, the business community and community organizations to obtain funding for, and to develop and implement, affordable, accessible, quality prevention and wellness programs for children and families.

**Objective 2:** Develop a community-prioritized and data-driven system to guide health care funding decisions and quality improvement for children and families.

### *Goal 3: Increase Access to Health Care Services for Children and Families*

**Objective 1:** Promote strategies to ensure that by 2014 there will be an adequate provider infrastructure (including primary care, oral health, and behavioral health) to accommodate the large numbers of additional enrollees with an emphasis on tribal, *colonias* and rural access.

**Objective 2:** Develop strategies to decrease barriers to obtaining the right care at the right time, in the right place in a culturally and linguistically appropriate manner.

**Objective 3:** Develop partnerships to advocate for elimination of health inequities and promotion of health equity.

### *Implementation Action Plan*

The BluePrint for Health New Mexico Project Team developed a detailed three-year Implementation Action Plan with specific activities, timelines and budget requirements to facilitate achievement of the Strategic Goals and Objectives. The Implementation Action Plan is the portion of work that Con Alma Health Foundation proposes to do. Other activities will need to be prioritized and implemented by other partner organizations.

### *Link with Health Care Reform Implementation*

The Strategic Goals and Objectives outlined in this plan are directly tied to statewide implementation of health care reform and expected to lead to the improvement of health outcomes for children and families. Recognizing that due to capacity challenges New Mexico may have difficulty implementing reform across the state, the goals and objectives are designed to increase local community capacity, empowering them to address the unique needs that exist locally. In addition, many of the strategies are not contingent on the Affordable Care Act being upheld, but could be accomplished through the shared sense of purpose that has been established among the diverse stakeholders in the BluePrint for Health New Mexico Advisory Network.

### *Next Steps*

Con Alma Health Foundation will seek funding to achieve the Strategic Goals and Objectives. In particular, Con Alma Health Foundation expects to facilitate broad-based capacity building to include the expansion of the BluePrint for Health New Mexico Advisory Network and the strengthening of advocacy efforts drawing on local expertise around the state. The Strategic Goals and Objectives are expansive and include many aspects of health care reform implementation, but it is expected that many stakeholders and organizations will contribute to their achievement. Con Alma Health Foundation can serve as the convener to facilitate the ability of various entities to secure the resources necessary to achieve the goals and objectives. An action plan is included describing the role of the Con Alma Health Foundation in this process.

The BluePrint for Health New Mexico website and listserv will continue to serve as a mechanism for continuous communication with stakeholders across the state to update them on the progress made towards securing funding for the implementation phase and health care reform related activities and information.

The Resource Team reports and policy briefs (see [www.blueprintnm.org](http://www.blueprintnm.org)) can be used by stakeholders to develop outreach and education materials, inform policy decisions and increase local capacity to persuade and mobilize constituents in support of health care reform implementation across the state.

Advisory Network members can utilize the BluePrint for Health New Mexico database to maintain relationships and explore opportunities to form strategic partnerships and collaborations as they work to improve the health of children and families across the state.

## APPENDIX 1

### Individuals and Organizations Invited to Participate in the BluePrint for Health Advisory Network

<u>Name</u>	<u>Sector</u>	<u>Organization</u>	<u>County</u>
Debbie Maestas-Traynor	Employers	National Association of Women Business Owners	Statewide
Allan Oliver	Employers	New Mexico Green Chamber of Commerce	Statewide
Anthony (Tony) Martinez	Employers	Las Cruces Hispano Chamber, Doña Ana County Alliance, Molina Healthcare	Doña Ana
Bill (Billie) Lee	Employers	Gallup-McKinley County Chamber of Commerce	McKinley
Don Leonard	Employers	Leonard Tires, ABQ	Bernalillo
Dorothy Nobis	Employers	Farmington Chamber of Commerce	San Juan
Duane Trythall	Employers	Excel Staffing Companies	Bernalillo, Santa Fe
Mike Peacock	Employers	Native American businesses	Bernalillo
Ted Pedro	Employers	American Indian Chamber of Commerce	Statewide
Edna Lopez	Employers	Business Owner	Bernalillo
Gary Opendahl	Employers/ Provider	TBAB Health Care Services, Association of Commerce and Industry Health Committee	Bernalillo
Arthur Allison	Government	Secretary of Indian Affairs	Statewide
Maggie Hart Stebbins	Government	Bernalillo County Commission District 3	Bernalillo
Jim Parker	Government	Governor's Commission on Disability	Statewide

Lucille Ross	Non-Profit	McKinley Community Health Alliance	Bernalillo
Joseph Lucero	Government	NM Department of Health	Statewide
Debbie Armstrong	Government	New Mexico Medical Insurance Pool	Statewide
Liza Gomez	Government	San Juan County IHC Coordinator - Indigent Health Care	San Juan
Mike Nunez	Government	New Mexico Health Insurance Alliance	Statewide
Carol Bowman-Muskett	Government	County Commission and GMIC Health Board	McKinley
Catherine Torres, M.D.	Government	Secretary, New Mexico Department of Health	Statewide
Craig Dunbar	Government	Deputy Superintendent of Insurance, Public Regulation Commission	Statewide
Dede Feldman	Policy Maker	Senator, Chair, Interim Legislative Health and Human Services Committee	Bernalillo
Gary Williams	Government	Office of African American Affairs	Statewide
Gay Kernan	Policy Maker	State Senator – District 42	Chaves, Curry, Eddy, Lea & Roosevelt
Keith Gardner	Government	Chief of Staff for Governor Susana Martinez	Statewide
Ken Lucero	Non-Profit	RWJF Center for Native American Health Policy	Statewide
Lucky Varela	Policy Maker	State Rep, Chair Legislative Finance Committee	Santa Fe
Mary Kay Papen	Policy Maker	State Senator	Doña Ana

Michelle Lujan Grisham	Policy Maker	Bernalillo County Commissioner	Bernalillo
Paul Gutierrez	Government	NM Assoc. of Counties	Statewide
Priscilla Caverly	Government	Office of Health Care Reform	Statewide
Ruby Ann Esquibel	Government	Legislative Finance Committee	Statewide
Sidonie Squier	Government	Secretary, NM Department of Human Services	Statewide
Tom Taylor	Policy Maker	State Representative –	San Juan
Liz Stefanics	Policy Maker	Santa Fe County Commissioner	Santa Fe
Anthony Yepa	Government	Indian Health Service	Statewide
Barbara Alvarez	Government	Dept. of Indian Affairs	Statewide
Pamela Drake*	Non-Profit	San Juan County Partnership, Con Alma CAC member	San Juan
Regina Begay Roanhorse	Native American Stakeholder	Dine Local Collaborative	McKinley, San Juan, & Sandoval
Michael Bird	Native American Stakeholder	Bernalillo County Off- Reservation Native American Health Commission	Bernalillo
Nancy Martine-Alonzo	Native American Stakeholder	Albuquerque Area Indian Health Board	Tribal Consortium
Ray Daw	Native American Stakeholder	Navajo Nation Department of Health	McKinley, San Juan & Sandoval
Shelly Chimoni	Native American Stakeholder	All Indian Pueblo Council	Tribal Consortium

Patricia Montoya*	Non-Profit	New Mexico Medical Review Association, former CAHF Board of Trustees	Bernalillo
Ron Solimon	Non-Profit	Indian Pueblo Cultural Center	Bernalillo
Randal Lucero	Non-Profit	HIV/AIDS Advocacy Network	Bernalillo
Charles Alfero	Non-Profit	Hidalgo Medical Services	Hidalgo
Barbara Webber	Non-Profit	Health Action New Mexico	Statewide
Louise Kahn	Local Government	Bernalillo County Community Health Council	Bernalillo
Ruth Hoffman	Non-Profit	Lutheran Advocacy Ministry	Statewide
Silvia Sierra	Local Government	Doña Ana County Health Alliance	Doña Ana
Kimberly Ross Toledo	Non-Profit	Coalition for Healthy and Resilient Youth	McKinley
Lisa Schatz Vance	Non-Profit	Senior Citizens Law Office	Bernalillo
Ophelia Reeder	Local Government	McKinley Community Health Alliance	McKinley
Stan Cooper	Non-Profit	New Mexico AARP	Statewide
Dolores E. Roybal*	Non-Profit	Con Alma Health Foundation	Statewide
Michael Donnelly	Non-Profit	New Mexico AARP	Statewide
Jane Wishner	Non-Profit	Southwest Women's Law Center	Statewide
Judith Espinosa	Non-Profit	Policy Connections West	
Sireesha Manne	Non-Profit	New Mexico Center of Law and Poverty	Statewide

Kim Posich	Non-Profit	New Mexico Center of Law and Poverty	Statewide
Nick Estes	Non-Profit	New Mexico Voices for Children	Statewide
Anne Simpson, M.D.	Provider	African American Center for Excellence	Statewide
Eileen Goode	Non-Profit Provider Assoc.	New Mexico Primary Care	Statewide
Ina Burmeister	Provider	Rehoboth McKinley Christian Health Care Services	McKinley
Kathleen Bettinger	Provider	New Mexico Oral Health Advisory Council	Doña Ana
Lore Pease	Provider	El Centro Family Health	
Margaret Montoya	Provider	University of New Mexico Health Science Center	Statewide
Angela Townsend	Provider	Ben Archer Clinics	Doña Ana and Sierra
Cecilia Aragon	Provider	Center for Native American Health	Bernalillo
Dan Derksen, M.D.	Provider	Office of Health Care Reform, University of NM Health Sciences Center	Statewide
David Roddy	Provider	New Mexico Primary Care Association	Statewide
Jerry Harrison	Non-Profit Provider Group	New Mexico Health Resources, Inc.	Statewide
Jim Tryon, M.D.	Provider	NM Medical Society	Bernalillo
Karen Lautermilch	Provider	Rehoboth McKinley Christian Health Care Services	McKinley



Sherrick Roanhorse	Tribal Government	Chief of Staff, Office of the President, Navajo Nation	Navajo Nation
Susie Trujillo*	Provider	NM Behavioral Health Collaborative, Gila Regional Medical Center, Con Alma CAC member	Grant
Gayle Dine' Chacon,* M.D.	Provider/Native American Stakeholder	Surgeon General of the Navajo Nation, UNM Dept. of Family and Community Medicine, CAHF board member	Navajo Nation
Mark Mitchell	Tribal Government	Pueblo of Tesuque	Pueblo of Tesuque
Nelson Cordova	Tribal Government	Pueblo of Taos	Pueblo of Taos
Linda Siegle	Provider-Advocate	Resources for Change	Santa Fe
Michael Kaufman, M.D.	Provider	Taos Medical Group, American College of Physicians - NM Chapter	Taos
RA Richie Grinnell	Provider	Rear Admiral, Indian Health Service, ABQ Area Indian Health Service	Statewide
Rick Wallace	Provider	San Juan Regional Medical Center Inc.	San Juan
Saverio Sava M.D.	Provider	First Choice Community Healthcare Clinics, University of New Mexico Department of Family & Community Medicine	Bernalillo
Dick Mason	Non-Profit	NM Alliance of Health Councils & Sandoval County Community Health Council	Statewide & Sandoval County

\* Indicates Con Alma Health Foundation affiliation as a Board, Community Advisory Committee, or staff member.

## APPENDIX 2

### RESOURCE TEAM REPORTS AND OTHER RESOURCES

**Resource Team Reports: Resource team reports can be found on the BluePrint for Health New Mexico website at: [www.blueprintnm.org/resource-team-documents](http://www.blueprintnm.org/resource-team-documents)**

1. *Accountable Care Organizations and Federal Health Care Reform: A Search for New Payment Models that will Provide Better Care, Improve Health Outcomes and Reduce Cost*, Southwest Women's Law Center
2. *Acting on the Affordable Care Act of 2010 in Doña Ana County, New Mexico: Strategies for Implementation*, Doña Ana County Health Alliance
3. *Benefit Design for Children Under the ACA*, New Mexico Voices for Children
4. *The Benefits of the ACA for Children*, New Mexico Voices for Children
5. *Bernalillo County Healthcare Access and Resource Need*, Bernalillo County Health Council
6. *Consumer Navigation Under the ACA*, Southwest Women's Law Center
7. *Consumer Protections and Insurance Reforms Under the ACA: Maximizing Benefits to All New Mexicans*, Southwest Women's Law Center
8. *COOP Business Plan: Preliminary Analysis for Feasibility Study*, Health Action New Mexico
9. *Dual Eligible and Elderly Populations in New Mexico: Key Opportunities for Improved Access to Quality Health Care Under the ACA*, Michael C. Parks
10. *The Economic Benefits of Health Care Reform in New Mexico*, New Mexico Voices for Children
11. *Enrollment Strategies to Maximize Enrollment in Health Care Coverage under ACA*, New Mexico Voices for Children
12. *Health Benefit Exchange in New Mexico*, New Mexico Center on Law and Poverty
13. *Health Care Reform Policy Development in New Mexico*, Resources for Change
14. *Native American Guide to Health Care Reform*, Bernalillo County Off Reservation Native American Health Commission
15. *New Mexico Health Councils and Health Care Reform*, New Mexico Alliance of Health Councils

16. *Program and Funding Opportunities under the Patient Protection & Health Care Act of 2010*, McKinley Community Health Alliance

17. *San Juan County Healthcare Access and Resource Needs*, San Juan County Partnership

18. *Using Data, Quality, Outcomes & Transparency*, Policy Connections West

## OTHER RESOURCES

**Bernalillo County Place Matters:** [www.bcplacematters.com](http://www.bcplacematters.com)

**Con Alma Health Foundation:** The Heart and Soul of Health in New Mexico. Various policy and planning reports by the Con Alma Health Foundation can be found at: [www.conalma.org](http://www.conalma.org)

**Community Catalyst:** Because We All Should Have a Say in the Decisions that Affect Our Health. [www.communitycatalyst.org](http://www.communitycatalyst.org)

**Families USA:** The Voice for Health Care Consumers. [www.familiesusa.org](http://www.familiesusa.org)

**Health Action New Mexico:** Working for affordable, accessible, accountable health care for all people living in New Mexico: [www.healthactionnm.org](http://www.healthactionnm.org)

**HealthCare.gov:** A federal government website managed by the U.S. Department of Health & Human Services at: [www.healthcare.gov](http://www.healthcare.gov)

**Herndon Alliance:** Healing America's Health Care. [www.hernDoñalliance.org](http://www.hernDoñalliance.org)

**Joint Center for Political and Economic Studies:** *Patient Protection and Affordable Care Act of 2010: Advancing Racially and Ethnically Diverse Population*, July 2010. [www.jointcenter.org](http://www.jointcenter.org)

**Kaiser Family Foundation:** A leader in health policy analysis, health journalism and communication. [www.kff.org](http://www.kff.org)

**National Academy for State Health Policy:** *State Policymakers' Priorities for Successful Implementation of Health Reform* can be found at: [www.nashp.org](http://www.nashp.org)

**National Congress of American Indians, Policy Research Center:** *Investing in Tribal Governments: An Analysis of Impact and Remaining Need Under the American Recovery and Reinvestment Act*, March 2010. [www.ncaiprc.org](http://www.ncaiprc.org)

**New Mexico Office of Health Care Reform:** [www.hsd.state.nm.us](http://www.hsd.state.nm.us)

**New Mexico Voices for Children:** [www.nmvoices.org](http://www.nmvoices.org)

**New Mexico Health Equity Working Group:** <http://www.bcplacematters.com/new-mexico-health-equity-working-group>

**Small Business Majority:** Small Businesses Driving Practical Problems. [www.smallbusinessmajority.org](http://www.smallbusinessmajority.org)

**W.K. Kellogg Foundation:** Helping Communities Stand Up for Children. More info about work that W.K. Kellogg Foundation supports in New Mexico can be found here: [www.wk kf.org](http://www.wk kf.org)

# APPENDIX 3 BLUEPRINT FOR HEALTH NM INFORMATIONAL MATERIALS



## BLUEPRINT for HEALTH NEW MEXICO

Designing Better Health for Children & Families



### A BLUEPRINT TO DESIGN AND BUILD A COMPREHENSIVE STRATEGIC PLAN

#### YOUR VOICE IS RELEVANT

Healthcare reform can be complex and controversial partially because of the different views and needs of people with a stake in healthcare. Employers want to provide affordable coverage to their employees; communities want access to affordable quality care; state, local and tribal government want sound health policy decisions; nonprofits want equitable access for all New Mexicans; providers want to be able to deliver efficient quality healthcare that is evidence-based and patient-centered; and we all want healthier outcomes and the security and peace of mind of knowing we have coverage we can count on when we need it.

We invite you to contribute to the process and put stakeholders at the center of planning and designing a BluePrint for Health to meet New Mexico's unique needs.

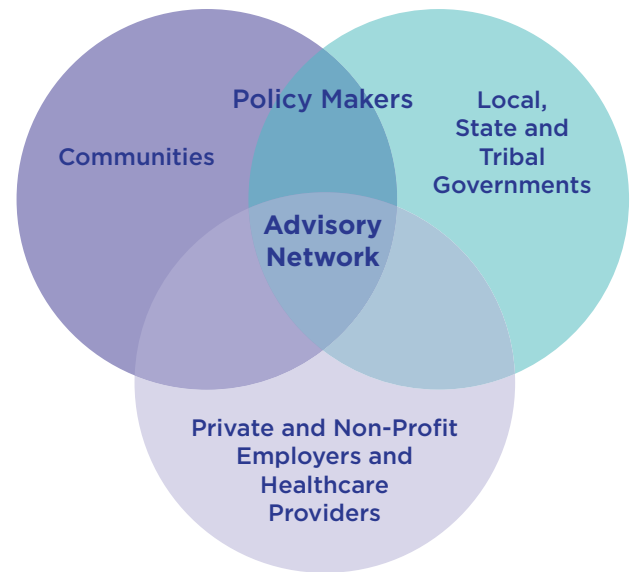
#### BACKGROUND

The W.K. Kellogg Foundation awarded Con Alma Health Foundation (CAHF) a six-month strategic planning grant to help guide New Mexico's implementation of the federal Patient Protection and Affordable Care Act (PPACA). Building on a decade of bringing people and organizations together to improve health, CAHF serves as an unbiased and trusted convener of stakeholders to develop shared and realistic goals, and leverage federal funding. Findings and recommendations will serve as a strategic BluePrint for New Mexico's state-specific implementation of the PPACA requirements.

#### MULTI-STAKEHOLDER GUIDANCE APPROACH

A BluePrint Advisory Network is being formed to provide guidance and strategic planning, designing and implementation advice to help implement healthcare reform in New Mexico.

The BluePrint Advisory Network will represent a broad and diverse range of interested and engaged stakeholders, including consumers, communities, private and non-profit employers and employees, healthcare providers executive and legislative policy makers, and local, state and tribal governments.



Advisory Network includes the Resource Team plus representatives from the community, private and non-profit employers, policy makers, and government entities.

Con Alma Health Foundation is committed to a community-based participatory driven process to expand involvement and ensure diverse stakeholder interests are included. The BluePrint Advisory Network will reflect New Mexico's vibrant diversity.



# BLUEPRINT for HEALTH NEW MEXICO

Designing Better Health for Children & Families



## GOALS

**Short Term:** To complete a work plan for statewide implementation of healthcare reform with an emphasis on improving health outcomes in four counties: Bernalillo, Doña Ana, McKinley and San Juan.

**Long Term:** To improve the health outcomes of vulnerable New Mexico children, families, and communities through the successful implementation of federal healthcare reform.

## ADVISORY NETWORK

The BluePrint Advisory Network will guide the planning and implementation process to develop common and realistic goals and build trust to:

Design and build a state-wide plan with emphasis on targeted communities to successfully implement healthcare reform as required by federal law.

Build community capacity and increase coordination to address community needs and implementation readiness.

## RESOURCE TEAM: LINKING PLAN TO ACTION

The BluePrint Resource Team will perform research and analysis to link the strategic plan to implementation action including, but not limited to:

Identification and coordination of current and past health improvement efforts in New Mexico

Opportunities to increase access to health care for children and families

Strategies to maximize federal resources for prevention programs and public health interventions

Review efforts by New Mexico toward implementation of the PPACA. Identify future actions needed in NM in order to take advantage of opportunities to develop community capacity relative to healthcare

## A BLUEPRINT TO BUILD COMMON GROUND, TRUST AND A CULTURE OF COLLABORATION

### Characteristics Needed:

- Community Focus
- Data Driven
- Accountability
- Diversity
- Consensus Building for Common Ground

### Meeting Frequency:

- Maximum of 5 Meetings
- First Phase: April - September, 2011

## PROJECT CO-DIRECTORS

If you have any questions, comments, or would like to be part of the Blueprint Advisory Network, please contact Project Co-Directors:

**Roxane Spruce Bly**  
roxane.bly@gmail.com / (505) 239-0240

**Charlotte Roybal**  
charlotte@policyconnections.org / (505) 930-0563

For more information, please go to [www.blueprintnm.org](http://www.blueprintnm.org)



CAHF's mission is to be aware of and respond to the health rights and needs of the culturally and demographically diverse people and communities of New Mexico. Con Alma seeks to improve the health status and access to healthcare services for all and advocates for a health policy that addresses the health needs of all New Mexicans. For more information, visit [www.conalma.org](http://www.conalma.org).



# BLUEPRINT for HEALTH NEW MEXICO

Designing Better Health for Children & Families



## FACT SHEET

### PROVIDING STAKEHOLDER INPUT FOR IMPLEMENTING THE PATIENT PROTECTION AND AFFORDABLE CARE ACT

Federal health care reform became law in March 2010 and requires significant stakeholder input into the implementation efforts in each state. The state will need input from a diverse range of stakeholders in order to move forward with designing better health for children and families. We all want healthier outcomes and the security and peace of mind knowing we have coverage we can count on when we need it. Past and present health care reform efforts will help all New Mexicans reach this goal.

BluePrint for Health New Mexico is a collaborative planning and design effort to provide communities the opportunity to make a difference in developing a state-wide work plan to implement the federal Patient Protection and Affordable Care Act (PPACA) with an emphasis on improving health outcomes in four counties: Bernalillo, Dona Ana, McKinley and San Juan. Ultimately, the goal is to improve health outcomes for vulnerable children and families across New Mexico through the successful implementation of health care reform.

Findings and recommendations will serve as a strategic BluePrint for New Mexico's state-specific implementation of the PPACA requirements.

### UNBIASED CONVENER OF DIVERSE STAKEHOLDERS

The W.K. Kellogg Foundation awarded Con Alma Health Foundation (CAHF) a six-month strategic planning grant to help guide New Mexico's implementation of the federal Patient Protection and Affordable Care Act (PPACA) to improve health outcomes for children and families.

Health care reform can be complex partially because of the many health care interests and needs.

Con Alma Health Foundation has invested more than \$10 million during the past ten years to improve the health of New Mexicans. Building on this decade of bringing people and organizations together to improve health, Con Alma Health Foundation has a reputation as an **unbiased convener** and the ability to **work collaboratively with diverse stakeholders** to develop shared and realistic goals.

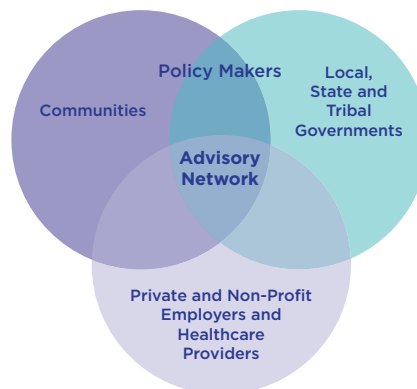


CAHF's mission is to be aware of and respond to the health rights and needs of the culturally and demographically diverse people and communities of New Mexico. Con Alma seeks to improve the health status and access to health care services for all and advocates for a health policy that addresses the health needs of all New Mexicans. For more information, visit [www.conalma.org](http://www.conalma.org).



### DIVERSE VOICES

Diverse voices add depth to the reform dialogue and Con Alma Health Foundation is committed to a community-based participatory driven process. Con Alma Health Foundation is committed to addressing and reducing health inequities and understands the factors that drive health inequities, including poverty, race, education, etc.



The BluePrint Advisory Network includes members of the BluePrint Resource Team plus local community input, private and non-profit employers, policy makers, and government entities.

Because people have different health care needs, BluePrint for Health New Mexico is taking a multi-stakeholder approach and is committed to a community-based participatory process to ensure diverse voices are included.

A **BluePrint Advisory Network** of diverse stakeholders will provide guidance and strategic planning and design advice to help New Mexico implement health care reform to improve health outcomes for children and families.

A **BluePrint Resource Team** will perform research and analysis to link the strategic plan to implementation action.

### PROJECT CO-DIRECTORS

Please contact either of the following BluePrint for Health New Mexico Project Co-Directors with any questions or comments:

**Roxane Spruce Bly**  
[roxane@policyconnections.org](mailto:roxane@policyconnections.org) / (505) 239-0240

**Charlotte Roybal**  
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For more information, please go to [www.blueprintnm.org](http://www.blueprintnm.org)



# BLUEPRINT for HEALTH NEW MEXICO

Designing Better Health for Children & Families



## Frequently Asked Questions

### What is BluePrint for Health New Mexico?

Federal health care reform became law in March 2010 and will expand coverage to an estimated 32 million Americans, including more than an estimated 275,000 New Mexicans when it is fully implemented in 2014.

BluePrint for Health New Mexico is a collaborative planning and design effort to develop a statewide work plan to successfully implement the federal Patient Protection and Affordable Care Act (PPACA) to improve the health of New Mexico's children and families.

### How is BluePrint for Health New Mexico being funded?

The W.K. Kellogg Foundation awarded Con Alma Health Foundation (CAHF) a six-month strategic planning grant (April-September) to help guide New Mexico's implementation of the federal Patient Protection and Affordable Care Act (PPACA).

### Why was Con Alma Health Foundation selected?

Health care reform can be complex and sometimes controversial partially because of various stakeholders' different views and health care needs.

Con Alma Health Foundation has invested more than \$10 million during the past ten years to improve the health of New Mexicans. Building on this decade of bringing people and organizations together to improve health, Con Alma Health Foundation has a reputation as an *unbiased convener* and the ability to *work collaboratively with diverse stakeholders*.

### What is the short term goal of BluePrint for Health New Mexico?

The short term goal is to complete a work plan for statewide implementation of health care reform focusing on children and families with an emphasis on improving health outcomes in four counties: Bernalillo, Doña Ana, McKinley and San Juan.

### What is the long term goal of BluePrint for Health New Mexico?

The long term goal is to improve health outcomes for vulnerable children and families across New Mexico through the successful implementation of health care reform.

### Who will be involved with BluePrint for Health New Mexico?

*BluePrint Advisory Network*, a diverse stakeholder group, has been formed to provide guidance and strategic planning to help New Mexico implement health care reform. A *BluePrint Resource Team* will perform research and analysis to link the strategic plan to implementation action.

## How is Blueprint for Health New Mexico different from other implementation efforts?

Because people have different views and health care needs, Blueprint for Health New Mexico is taking a multi-stakeholder approach and is committed to a local community-based participatory process to expand involvement and ensure diverse stakeholder interests are included.

**Blueprint Advisory Network** will reflect New Mexico's vibrant diversity and will guide the planning and implementation process to build trust and develop common and realistic goals.

**Blueprint Advisory Network** includes representatives from the community, private and non-profit employers, policy makers, government entities, and members of the Resource Team.

## How will community needs and input be used to change our health care system?

Local community organizations will be asked for their input. Blueprint for Health New Mexico is a collaborative planning and design effort to provide communities the opportunity to make a difference in developing a statewide work plan to implement federal health care reform with an emphasis on improving health outcomes in four counties: Bernalillo, Doña Ana, McKinley and San Juan. Local community representatives in these four counties are part of the Resource Team and will be asked for their input through the planning process. The New Mexico Alliance of Health Councils is also a member.

## How will the root causes of health inequity be addressed in the work plan?

The Con Alma Health Foundation promotes health equity by supporting greater access to health care and improved quality of health care for all New Mexicans with a special emphasis on people of color and rural and tribal communities. Blueprint for Health New Mexico reflects this core value by acknowledging and incorporating innovative strategies to address the root causes of health inequity, including poverty, race, education, etc.

## What is the Blueprint Resource Team?

A **Blueprint Resource Team** will perform research and analysis to link the strategic plan to implementation action. The Blueprint Resource Team will research opportunities to increase health care access for children and families; identify and coordinate current and past New Mexico health improvement efforts; review existing New Mexico implementation efforts and identify future actions needed in New Mexico in order to take advantage of opportunities to develop health care community capacity. The Blueprint Resource Team will also develop strategies to maximize federal resources for prevention programs and public health interventions. The Resource Team includes individuals and non-profits with legal, data research and policy analysis expertise. Reports from the Blueprint Resource Team will be available by late fall, 2011.

## What will the Blueprint Advisory Network do?

The **Blueprint Advisory Network** will guide the planning and implementation process to design and build a statewide plan with emphasis on vulnerable children and families and targeted communities to successfully implement health care reform as required by federal law. The plan will be data driven and community and common ground focused. The Blueprint Advisory Network will build capacity and increase coordination to address community needs and implementation readiness.

## When will Blueprint for Health New Mexico finalize their efforts?

The strategic planning grant is currently scheduled to be completed the end of September.



## How will a statewide plan be developed in such a short time?

BluePrint for Health New Mexico has four planning phases that are anticipated to be completed later this fall.

**Assessment** – Profile community needs, resources, and readiness to implement health care reform, and identify strategies that lead to successful implementation. The assessment phase also includes an inventory and analysis of current New Mexico reform implementation efforts. The resulting report will make recommendations for statewide implementation; legislative initiatives, lessons learned including stumbling blocks or barriers such as workforce development, infrastructure, political climate; opportunities for moving forward with statewide implementation strategies.

**Capacity Building** – Mobilize and/or build capacity to address needs and implement reform. The capacity phase aims to create and maintain partnerships and to pursue a common agenda.

**Planning** – Develop a work plan with shared goals, objectives and performance targets, and select policies, programs, activities and strategies to implement the work plan.

**Implementation** – Implement work plan including programs, policies, activities, and strategies. A staffing plan will be developed to support the collective effort and serve as the backbone for the initiative. Implementation of the work plan does not happen in this six month phase.

**Evaluation** – Monitor and evaluate the planning process by collecting and analyzing data, evaluate capacity building and group interaction.

## The law is expansive and complex. How will this project focus on so many aspects of health care reform?

Blueprint for Health New Mexico has narrowed its focus to 10 areas of successful implementation as designed by the National Academy for State Health Policy (see [http://www.nashp.org/sites/default/files/state.policymaker.priorities.for\\_.health.reform.pdf](http://www.nashp.org/sites/default/files/state.policymaker.priorities.for_.health.reform.pdf))

Each focus area will include opportunities for New Mexico. Reports on each focus area will be included in the overall plan.

**Be Strategic with Insurance Exchange** – Review executive, legislative and federal implementation issues for potential insurance exchange structure; develop eligibility and enrollment policy recommendations with a focus on exempt populations, e.g. Native Americans; and identify opportunities for community-based educational outreach.

**Regulate the Commercial Health Insurance Market Effectively** – Focus on protection for children and analyze the federal consumer protection requirements; the Superintendent of Insurance's authority to enforce insurance reforms; and summarize existing and required consumer complaint procedures and satisfaction systems.

**Simplify and Integrate Eligibility Systems** – Develop strategies to increase enrollment and access to publicly funded health coverage programs for children and families, and develop seamless transition strategies between Medicaid, state plans, etc.

**Expand Provider and Health System Capacity** – Map and compare New Mexico's current and 2014 implementation health care systems with a focus on coverage, quality, and access.

**Attend to Benefit Design** - Consider Medicaid benefit redesign with an emphasis on improved health outcomes for children.

**Focus on the Dually Eligible** - Consider Medicaid benefit redesign with an emphasis on improved health outcomes for dual-eligible and elderly population enrollees.

**Use Your Data** - Analyze new required data collection provisions and develop recommendations to combine different source data and prioritize health disparities and related minority health data and gaps; recommend system data to monitor population health; prioritize health improvement and health disparity for progress tracking.

**Pursue Population Health Goals** - Identify early childhood federal funding opportunities and recommend child-focused statewide implementation plan; review Accountable Care Organization opportunities; review resource opportunities and implementation suggestions to fill potential progress gaps for Community Improvement Plans; and develop community-based participatory performance measure and community meetings for Doña Ana County Health Alliance.

**Engage the Public in Policy Development and Implementation** - Build upon and expand public involvement and input; analyze economic impacts of federal reform, including Medicaid expansion; review Consumer Oriented and Operated Plans (CO-Ops) opportunities; and report on past and existing reform implementation efforts as opportunities to move forward.

**Native American Focus** - Review statewide federal health care reform implementation for Native Americans, Native communities, and Tribal governments; identify increased access to health care services opportunities, including development of financing mechanisms and improving Indian health systems; and identify funding opportunities for tribal communities, tribal organizations, consortiums and urban Indian health programs.

**Demand Quality and Efficiency from the Health Care System** - Improve overall system delivery with health care metric quality outcomes, public health improvement, and quality/transparency indicators to inform consumers, businesses, and purchasers when inefficiencies and higher costs occur.

## **How will data be used to make decisions?**

The strategic plan will be evidence based and data driven. We will bridge data to prioritize health disparities. Data regarding community health already exists. BluePrint for Health New Mexico will analyze existing data and the new required data collection provisions to develop recommendations to: combine different source data and prioritize health disparities and related minority health data and gaps; recommend system data to monitor population health; prioritize health improvement and health disparities for progress tracking.

## **What about the cultural implications of using data?**

We are aware communities own their own data and there are cultural sensitivities to sharing data. BluePrint for Health New Mexico will work with stakeholders to ensure that decisions related to implementation of reform are based on sound and current data. There are numerous provisions in the PPACA requiring collection of new data. BluePrint for Health New Mexico will analyze these provisions and develop strategies and recommendations to combine data from different sources and select priority areas for analysis, including disparities and related minority health data or lack thereof.

## What happens once a Strategic Plan is developed?

The strategic plan will be distributed and presented across the state to an expanded list of policy makers, community groups, private and non-profit employers, and government entities to build strong acceptance of the plan.

## Isn't it the State's role to develop an implementation plan for health care reform?

Yes, but new federal law requires significant stakeholder input into the implementation efforts in each state. Input from a diverse range of stakeholders will be valuable to the state in order to move forward. This is not a competition or a race. We all want healthier outcomes and the security and peace of mind of knowing we have coverage we can count on when we need it. Past and present health care reform efforts will help all New Mexicans reach these goals.

## How will this effort coordinate with the New Mexico Office of Health Care Reform?

BluePrint for Health New Mexico invited the New Mexico Office of Health Care Reform (OHCR) to serve on the Advisory Network. It is anticipated both initiatives will share data, information and progress status as each move forward with their work.

## The Governor has called for a repeal of the health care reform law. How will this be addressed?

The current law will result in several sweeping changes in 2014, e.g. expansion of Medicaid, creation of Health Insurance Exchanges. While efforts to repeal the law have been initiated around the country, it is still critical for NM communities to plan for implementation in order to ensure it meets the needs of the thousands of people who will be affected by these changes.

## Will information, data and reports be shared with the public?

Yes. BluePrint for Health New Mexico is committed to community discussion and discourse. The final reports and work plan will be available on the BluePrint for Health New Mexico website currently in development. It is anticipated the website will serve as an information depository and provide links to health care reform initiatives and the public, private and government organizations working to improve health outcomes.

## Who can I contact if I have questions or comments?

Please contact either of the following BluePrint for Health New Mexico Project Co-Directors:

**Roxane Spruce Bly**

Roxane.bly@gmail.com / (505) 239-0240

**Charlotte Roybal**

charlotte@policyconnections.org / (505) 930-0563

## How can I keep informed about BluePrint for Health New Mexico efforts?

For more information, please go to [www.blueprintnm.org](http://www.blueprintnm.org)



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Funded support by





Graphic Design: Triple L, Ink Graphic Design

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NOVEMBER 2011

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