

HOUSE BILL 94

56TH LEGISLATURE - STATE OF NEW MEXICO - SECOND SESSION, 2024

INTRODUCED BY

Kathleen Cates and Tara L. Lujan

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

AN ACT

RELATING TO LABOR; REQUIRING THE HEALTH CARE AUTHORITY

DEPARTMENT TO COLLECT AND REPORT DATA RELATING TO THE DIRECT

CARE WORKER WORKFORCE; REQUIRING A BIENNIAL PERSONAL CARE

SERVICES COST STUDY; REQUIRING THE HEALTH CARE AUTHORITY

DEPARTMENT TO IMPLEMENT THE COST STUDY'S RECOMMENDATIONS;

MAKING AN APPROPRIATION.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

- SECTION 1. [NEW MATERIAL] DEFINITIONS.--As used in Sections 1 through 3 of this 2024 act:
- A. "department" means the health care authority department;
- B. "direct care worker" means a non-administrative employee of a personal care service provider agency who spends the majority of the employee's work hours providing personal .226589.1

.226589.1

1

2

3	to an individual to assist with the instrumental activities of
4	daily living; and
5	D. "personal care service provider agency" means an
6	entity that:
7	(1) has entered into a medicaid provider
8	participation agreement with the medical assistance division of
9	the department and:
10	(a) is contracted with a managed care
11	organization to provide personal care services to medicaid
12	recipients; or
13	(b) provides personal care services to
14	medicaid recipients through fee-for-service arrangements;
15	(2) is reimbursed for personal care services
16	provided to individuals covered by medicaid; and
17	(3) employs direct care workers to provide
18	personal care services to individuals covered by medicaid.
19	SECTION 2. [NEW MATERIAL] DATA COLLECTION AND
20	REPORTING
21	A. By April 1, 2025, and annually thereafter, each
22	personal care service provider agency shall submit data to a
23	third-party contractor engaged by the department, in a form and
24	manner prescribed to the department, regarding direct care
25	workers. The data shall include:

care services to individuals;

C. "personal care service" means services provided

.226589.1

1

2	direct care workers employed at any time during the previous
3	calendar year;
4	(2) the percentage of the previous calendar
5	year that each employee was employed at the agency;
6	(3) the total length of employment for each
7	employee as of the end of the previous calendar year;
8	(4) disaggregated demographic information on
9	direct care workers that includes:
10	(a) age;
11	(b) gender;
12	(c) race and ethnicity; and
13	(d) education level;
14	(5) the hourly wage paid to each direct care
15	worker during the previous calendar year;
16	(6) employee benefits provided to direct care
17	workers in the previous calendar year; and
18	(7) the number of vacant direct care worker
19	positions that the personal care service provider agency had
20	not filled as of the end of the previous calendar year.
21	B. The format for data reporting shall provide for
22	sufficient confidentiality to protect both an individual direct
23	care worker's identifying information and an individual
24	personal care service provider agency's identity.
25	C. The department shall review and analyze the data

C. The department shall review and analyze the data

(1) the number of full-time and part-time

submitted by personal care service provider agencies and submit a report by September 1, 2025, and September 1 of each subsequent year, to the legislative health and human services committee, the legislative finance committee and the governor concerning the direct care workforce. The report shall include:

- (1) the total number of full-time and parttime direct care workers in the state;
- (2) a demographic analysis of the direct care worker workforce;
- (3) the highest, lowest and average hourly wage paid to direct care workers;
- (4) the average length of employment for direct care workers;
- (5) the vacancy and turnover rates for direct care workers; and
- (6) the availability and type of benefits provided by personal care service provider agencies to direct care workers.
- SECTION 3. [NEW MATERIAL] COST STUDY AND RATE
 DETERMINATION.--
- A. The department shall contract for an independent biennial cost study for the purposes of determining the cost of providing personal care services and recommending reimbursement rates for personal care service provider agencies to cover .226589.1

those costs. The contract for the initial cost study shall be executed no later than December 31, 2024. Recommended reimbursement rates from the cost study shall include consideration of the following factors:

- (1) the additional costs that would be incurred by personal care service provider agencies if direct care workers employed by personal care service provider agencies were to be paid at least one hundred fifty percent of the state minimum wage;
- (2) recent and projected changes in costs due to factors that include direct and indirect costs, inflation and changes in the applicable minimum wage; and
- (3) direct care worker vacancies that affect personal care service provider agency costs.
- B. The department's budget request for each fiscal year shall include sufficient funding to implement the most recent cost study's recommended reimbursement rates that would allow all direct care workers employed by personal care service provider agencies to be paid at least one hundred fifty percent of the state minimum wage.
- C. If sufficient funds have been appropriated to implement the reimbursement rates recommended by the most recent cost study, the department shall adjust capitation payments to managed care organizations to allow the managed care organizations to pay in-network personal care service .226589.1

provider agencies the cost study's recommended reimbursement rates for personal care services, subject to approval by the federal centers for medicare and medicaid services. If the department determines that there is not a sufficient level of funding to support capitation payments that fully implement the personal care service reimbursement rates recommended by the most recent cost study, the department shall adjust the capitation rates as favorably as possible based on the level of funding available, subject to approval by the federal centers for medicare and medicaid services.

SECTION 4. APPROPRIATION.--Four hundred thousand dollars (\$400,000) is appropriated from the general fund to the health care authority department for expenditure in fiscal year 2025 to contract for an independent cost study that determines the cost of providing personal care services and recommends reimbursement rates that are sufficient to cover the cost of providing personal care services. Any unexpended or unencumbered balance remaining at the end of fiscal year 2025 shall revert to the general fund.

- 6 -