



## Center for Health Policy

A partnership with the New Mexico Medical Assistance Division

# New Mexico Health Services Department Health Survey

## SUMMARY OF MAIN FINDINGS

GABRIEL R. SANCHEZ, PHD

July 2023

## Executive Summary

New Mexico's Health Services Department commissioned UNM's Center for Health Policy to conduct a state-wide survey of 1,900 adults in New Mexico. The Center for Health Policy worked with BSP Research, a firm with deep experience collecting survey data in New Mexico regarding health care and health policy attitudes, to field the survey. The survey gathered insights to gauge public sentiment regarding health insurance and healthcare in the state. Fielded from April 25 to May 28, 2023, the survey was conducted in both English and Spanish with surveys completed over the telephone (both landline and cell-phones) and on-line. The survey data was weighted to ensure that the demographics of the sample closely mirrors those of New Mexico residents as defined by the U.S. Census.

As summarized in the report that follows, the survey found that the state's population is divided in overall knowledge of the shift in Medicaid eligibility and enrollment policy following the expiration of the COVID-19 emergency protocols. Roughly a third of Medicaid enrollees have yet to update their contact information with the state to ensure they do not lose coverage during this transition meaning more focused outreach is needed. The survey suggests that Native American, Spanish speaking New Mexicans, and residents of Dona Ana County may require more focused outreach given their relatively lower levels of knowledge about the policy shift.

Another major theme of the survey is the potential use of Medicaid funding to address a host of social policy issues that are major challenges in the state. There is robust support among state residents to use Medicaid dollars to focus on social determinants of health that include early childhood services, domestic violence, and addressing economic development through job training opportunities. As we highlight in the report, this includes 67% support among New Mexicans for allowing the use of federal Medicaid dollars to reduce gun violence and mass shootings compared to only 15% who oppose. Utilizing Medicaid funds to explore intervention options including providing residents with gun locks and other devices intended to reduce accidental deaths could make a significant and positive impact on fatalities due to gun shots which are a major challenge in the state.

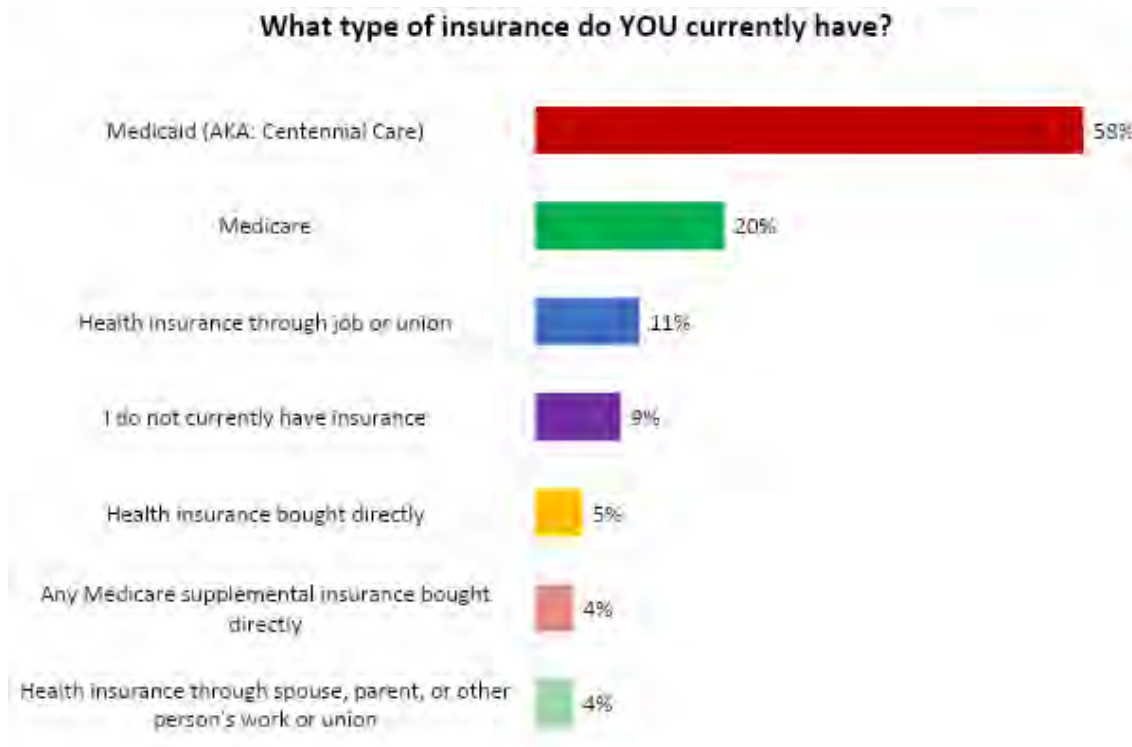
Finally, the survey's large sub-sample of parents with children living in their homes (n=778) were asked a series of questions focused on their experiences with healthcare for their children.

The majority of New Mexican parents (77%) have a primary care provider for their child, and overall, parents report having access to the healthcare they need for their child in the state. That said, a quarter (25%) of parents indicated that they delayed or avoided getting medical care they felt their child needed during the past year due to the cost. This is an even greater challenge for African American families as well as families who do not have health insurance.

# 1. Roughly Half of New Mexicans are Unaware of Changes in Medicaid Coverage Eligibility and Process

One of the central questions of this study is the extent to which changes in eligibility for Medicaid and the renewal process due to the expiration of COVID-19 emergency protocols will impact New Mexicans currently enrolled in the Medicaid program. Medicaid and the Children's Health Insurance Program (CHIP) across the country ceased automatic renewals on March 31, 2023 as part of the unwinding process.

Medicaid plays a vital role in New Mexico, as the state has consistently had a significantly higher percentage of their population covered through this program compared to the national average due to higher levels of poverty and economic challenges. While our poll has an oversample of New Mexicans on Medicaid (58%), over a third of the state is insured through Medicaid<sup>1</sup> which shows that it serves as a lifeline for many residents, providing access to healthcare services they might otherwise go without.



The poll further found that 13% of New Mexicans who are uninsured attributed their lack of coverage to “no longer being ineligible for public insurance.” Another 21% of uninsured New Mexicans reported that they never got around to applying for Medicaid or Centennial care,

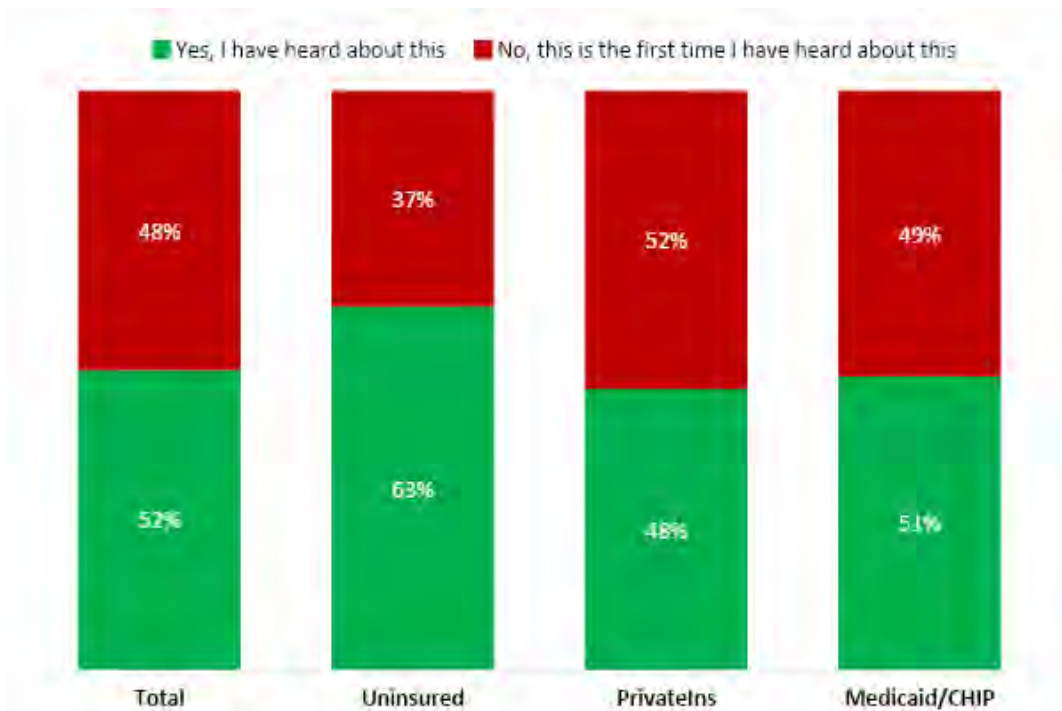
<sup>1</sup> <https://files.kff.org/attachment/fact-sheet-medicaid-state-NM>

suggesting that the state could increase insurance coverage rates by expanding outreach for this segment of the population. These findings from the survey show the comprehensive role that Medicaid continues to play in helping residents gain access to health insurance.

We are already seeing the implications of this shift in policy here in New Mexico, as the Human Services Department’s data suggests that [just under 59,000 New Mexicans lost coverage in April and May](#). While this drop in coverage may impact the state’s ability to keep the uninsured rate low, the data suggests that nearly all residents who lost access to Medicaid did so because they did not file the necessary paperwork rather than because they became ineligible. In fact, only 1% lost coverage because of ineligibility<sup>2</sup>.

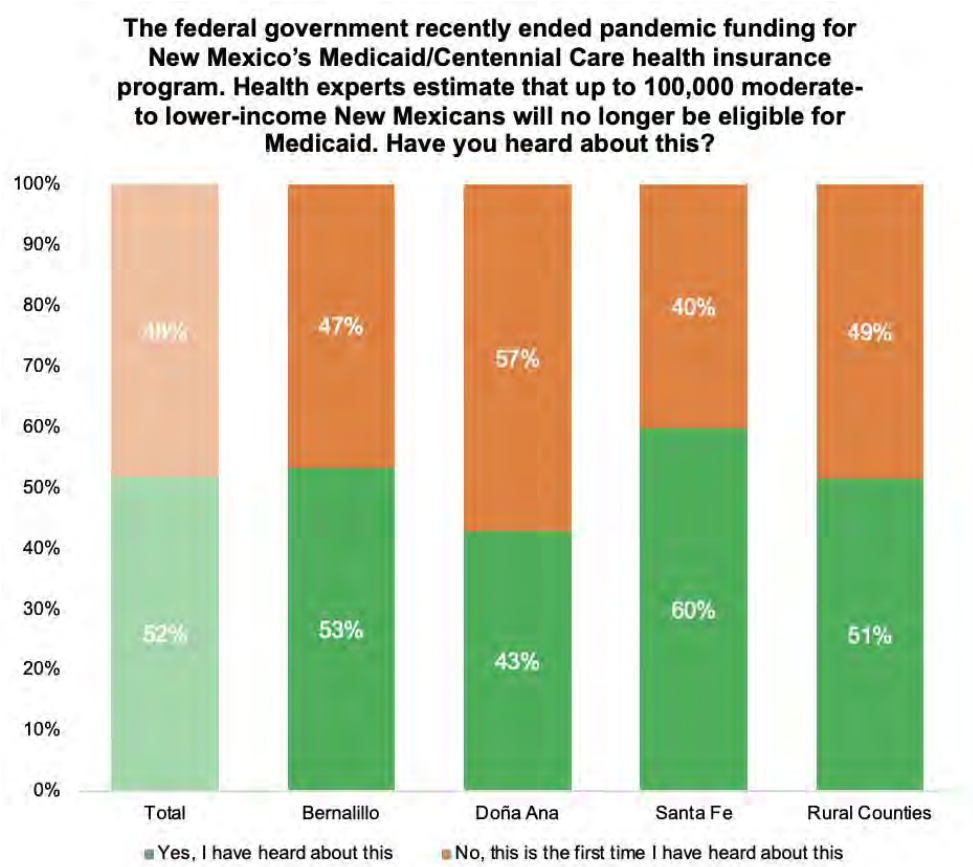
To remedy issues with re-enrollment for eligible New Mexicans, the survey can help identify where the weak spots are in knowledge levels of this shift in policy across the population.

Our data reveals a lack of general awareness among respondents regarding the end of pandemic funding for Medicaid. Nearly half of respondents with Medicaid coverage (48%) were unaware that the federal government ended the pandemic period funding for New Mexico Medicaid, responding that the survey prompt was “the first time they had heard about this shift in policy.” Awareness levels are a bit higher among the uninsured in the state, potentially due to this segment of the state’s population actively looking for information to help them gain coverage.



<sup>2</sup> This information is based on the linked article by the Albuquerque Journal, which requested data from the Human Services Department.

Being able to identify particular subgroups who may require focused information can help the state effectively communicate important updates to Medicaid recipients. For instance, focused outreach to Native Americans may be required, as they have lower awareness of the termination of pandemic period funding for Medicaid (-8%) than New Mexicans from other racial groups<sup>3</sup>. There are some regional differences as well: residents of Dona Ana County were less likely to have heard about the change (-9%), while people in Santa Fe County were more likely to have knowledge about this (+8%). This is especially worrisome, as respondents in Dona Ana County reported planning on applying for Medicaid for their children at a rate 25% higher than the total respondent pool.



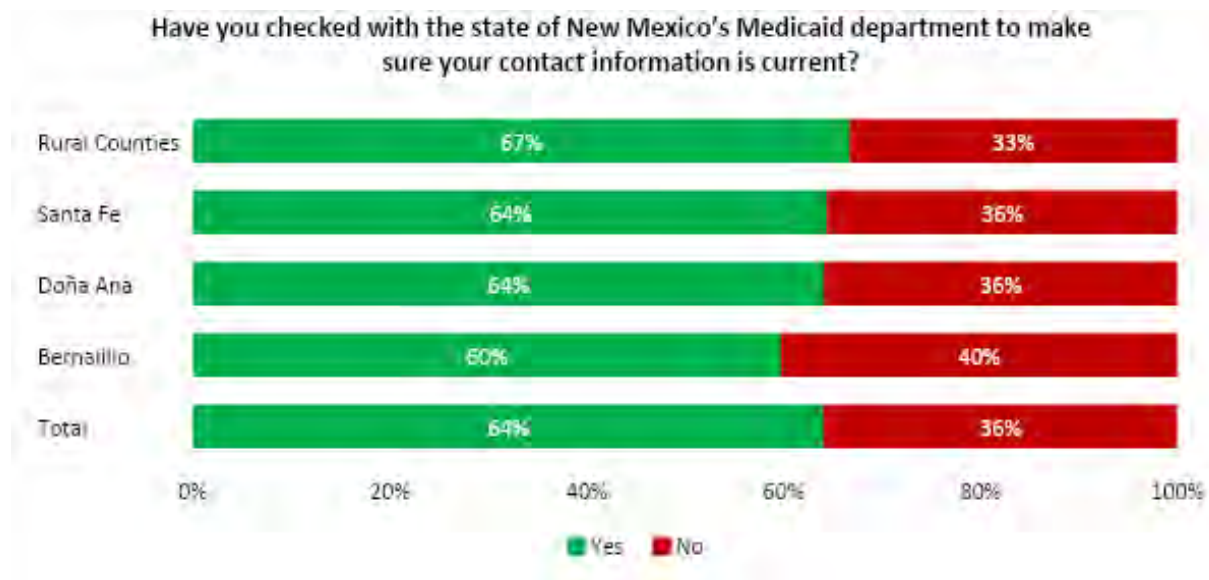
Language barriers may also be an obstacle to basic knowledge about the shift in Medicaid eligibility, as Spanish speakers are less likely to have heard any information about the shift (-

<sup>3</sup> It's important to note that the survey was conducted in both English and Spanish and has a small sample of the Native American population. To gain a deeper understanding of issues within the Native American community on this issue, more survey work may be warranted.

4%). Further, as the case above, Spanish-speakers are planning to get Medicaid for their children at a higher rate than the average New Mexican (+12%).

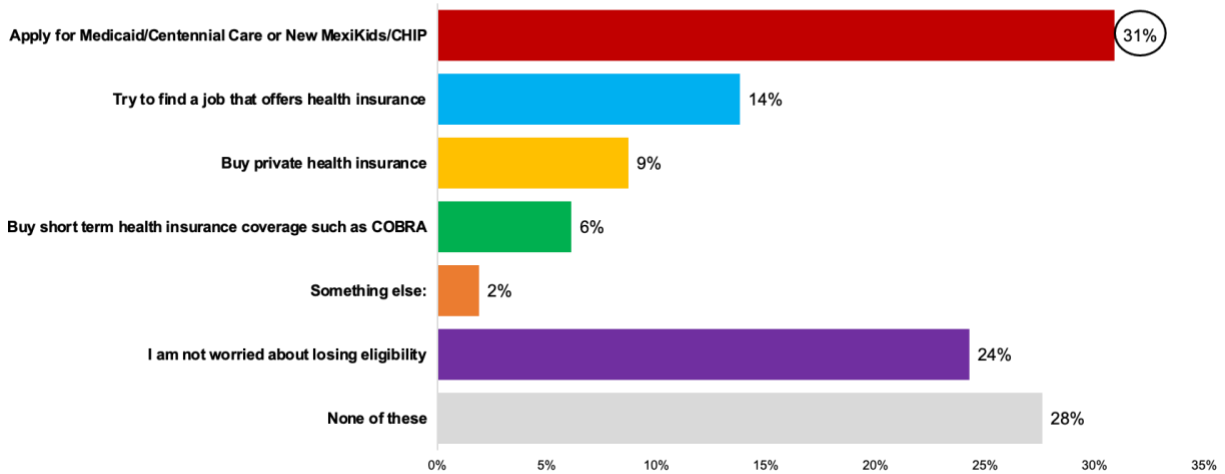
Consistent with HSD's data that suggests most New Mexicans who have lost insurance did so as a result of failing to re-enroll for the program, just over one-third (36%) have not taken the necessary steps to ensure that their contact information is up to date with the Medicaid office. Because of the low levels of knowledge about the policy shift, it is promising to see that the majority of Medicaid enrollees have ensured that they provided HSD with a current address.

The large sample size of the state-wide survey allows for analysis of internal variation across the state based on region and demographic profile. As reflected in the figure below, across the state, state residents currently on Medicaid who live in rural counties of the state are the most likely to have already updated their contact information with the state. Conversely, Bernalillo County is the area with the lowest rate of contact information updates. However, the differences based on region are minor, suggesting that there are not major differences across the population based on where people live.

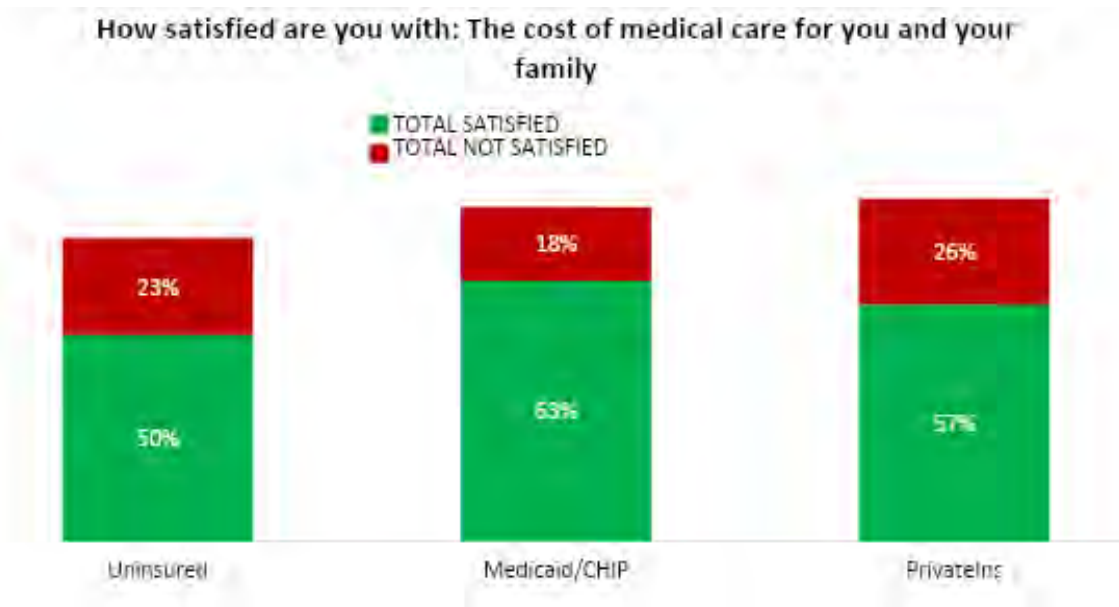


The survey asked all respondents currently covered by Medicaid if they plan to get another form of insurance to replace Medicaid following a brief prompt that made them aware of the shift in eligibility. Just under a fourth (24%) of Medicaid recipients are not worried about losing edibility, and 28% do not plan on gaining access to another form of health insurance to replace their current coverage if they lose access to Medicaid. Roughly a third (31%) indicated that they plan to apply or reapply for Medicaid. The remaining respondents were split between trying to find a job that offers health insurance (14%), buying health insurance privately (9%) or getting coverage through COBRA (6%).

Do you plan to look into any of the following health insurance options for yourself or your children if you lose eligibility to Medicaid, or are you not worried about losing eligibility? All that apply Total



Uninsured respondents were asked a similar question to gauge if they are planning to take any steps to find coverage for themselves or their families. The modal response among uninsured residents (43%) was to apply or reapply for Medicaid, suggesting that when coupled with Medicaid enrollees who will also apply for Medicaid, there will be a sharp increase in demand for enrollment in the program. It is crucial to prioritize outreach initiatives to ensure that individuals are aware of the available options and receive the necessary support to navigate the enrollment process successfully.



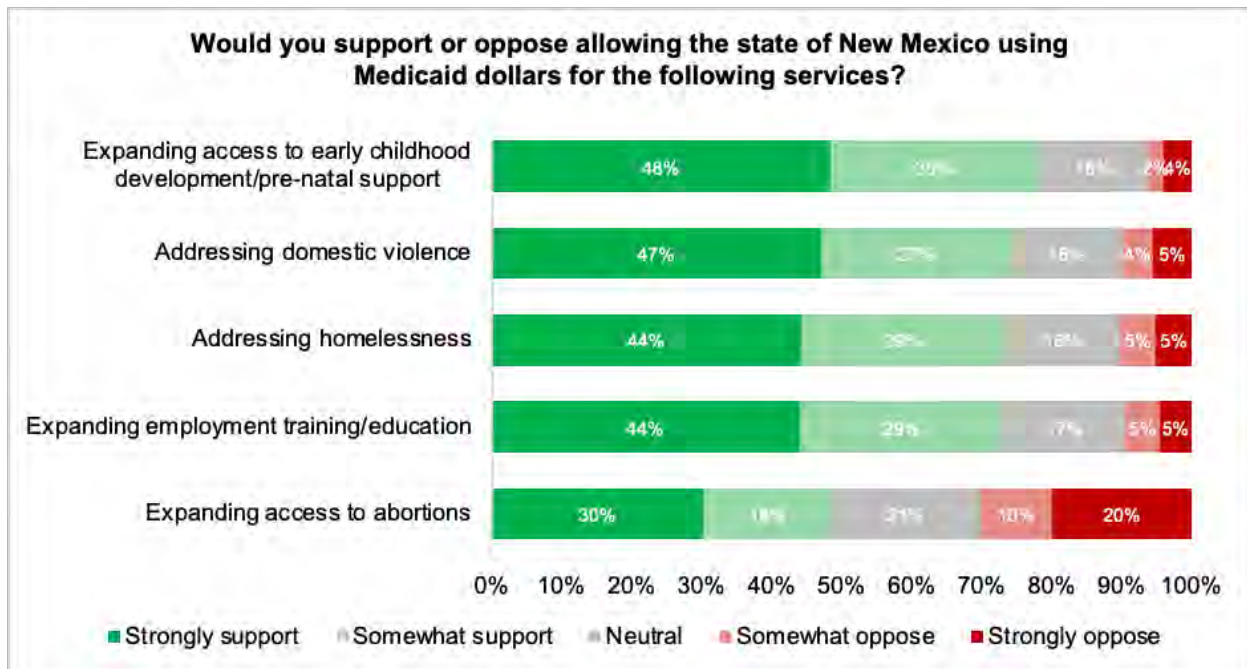
The survey also allows for analysis of whether Medicaid recipients have unique experiences with the healthcare system compared to other New Mexicans. Individuals enrolled in Medicaid demonstrated some advantages in healthcare access and utilization. For instance, as shown in

the figure above, respondents with Medicaid or CHIP were more satisfied with the cost of the healthcare they have received compared to those with private insurance.

## 2. New Mexicans are Very Supportive Using Medicaid Funding to Address Social Determinants of Health That Drive Negative Health Outcomes

The survey includes several measures that provide the state with the policy attitudes of the population regarding health care policy. This includes the utilization of Medicaid dollars to address several social issues that negatively impact health outcomes in the state. Although federal Medicaid rules prohibit expenditures for most non-medical services, state Medicaid programs have been developing strategies to tap into Medicaid dollars to address social challenges and social determinants. The [Center for Medicare and Medicaid Services provided some guidance](#) to states during the pandemic on how to use Medicaid dollars to address social determinants of health.

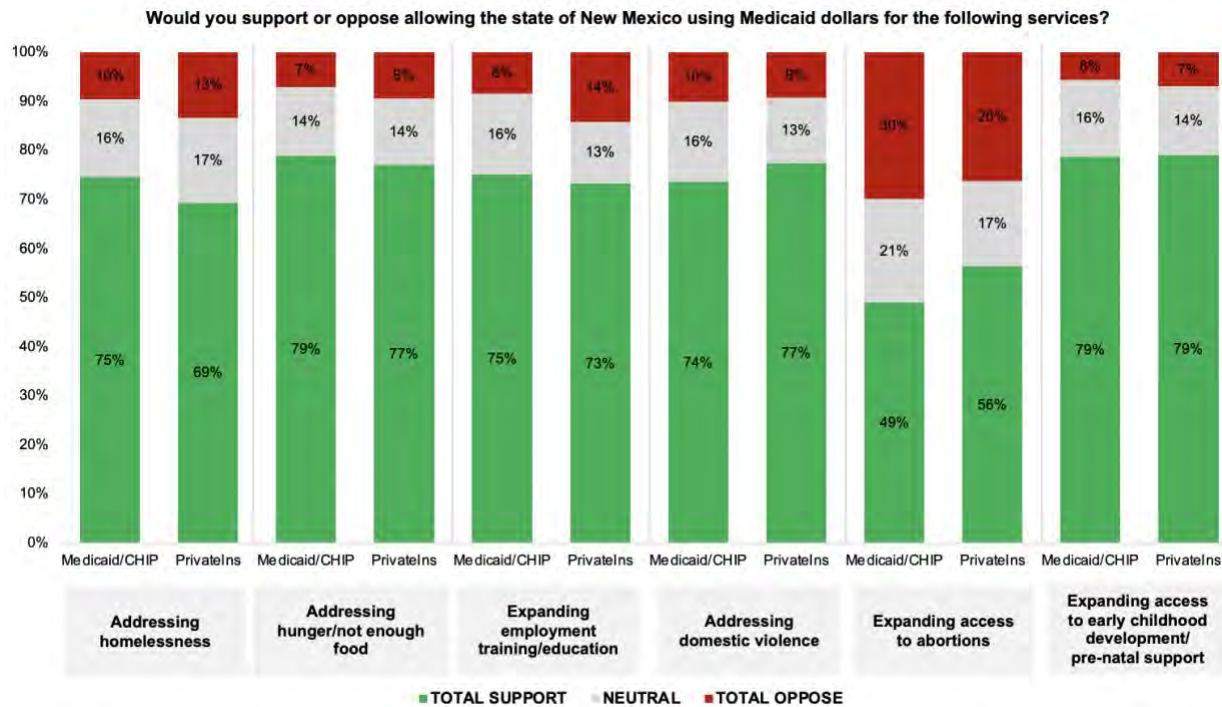
New Mexico’s Health Services Department should look to explore this funding stream with assurance that the population will support those efforts. In fact, the survey reveals strong support for using Medicaid dollars to address a wide range of social challenges.



Interestingly too, as the graph below shows, even when this is broken down between Medicaid recipients and privately insured folks there are no very large differences. Two differences that stand out are that a larger share of Medicaid recipients support using Medicaid dollars to address homelessness compared to the privately insured (+6%). Medicaid recipients are also



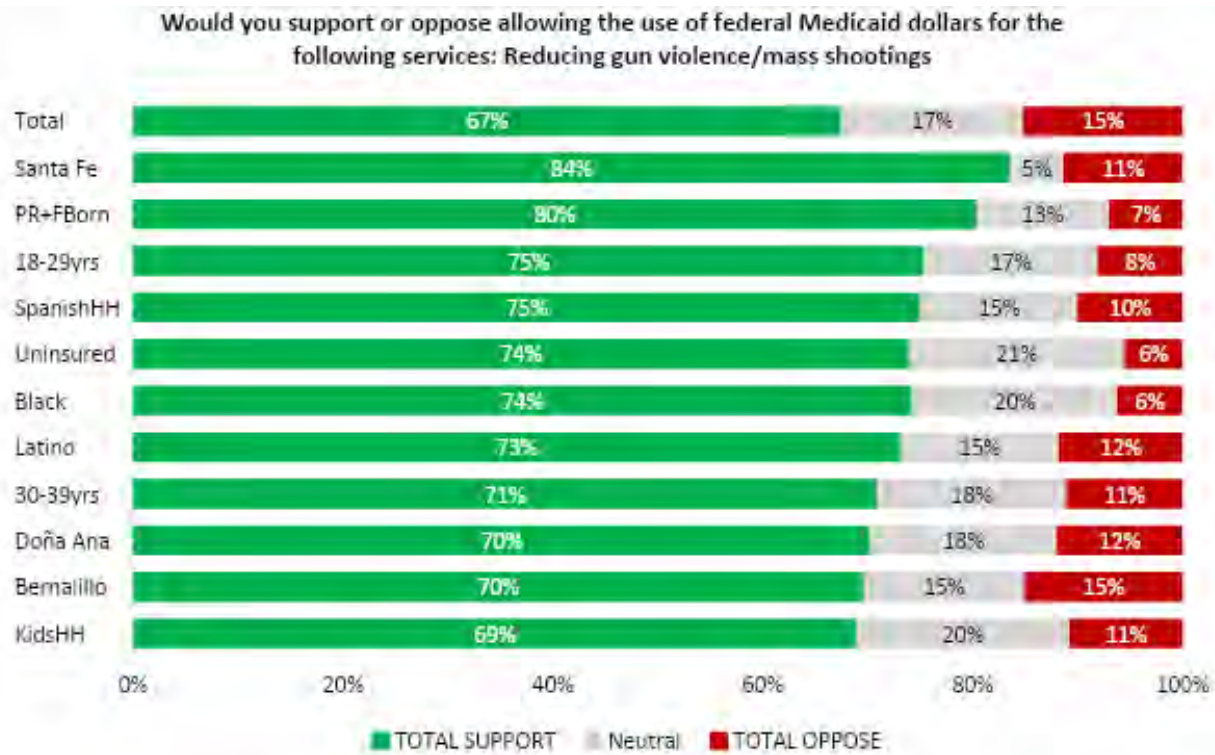
less likely to support expanding abortion access (49% support) compared to privately insured people (56%).



The ability to tap into Medicaid funding to help address social challenges that are particularly salient to New Mexico’s population is very promising. One of these challenges of particular salience to New Mexicans is gun violence and mass shootings. New Mexico has one of the highest rates of gun violence (the 8<sup>th</sup> highest in the nation). Furthermore, gun violence is the leading cause of death among children and teens in New Mexico; an average of 27 children and teens die by guns every year.<sup>4</sup> In the state, Black, Latino, and Native Americans are more likely to die by gun homicide than Whites; in fact, Black people are 4 times more likely to die by gun homicide compared to white people in the state.

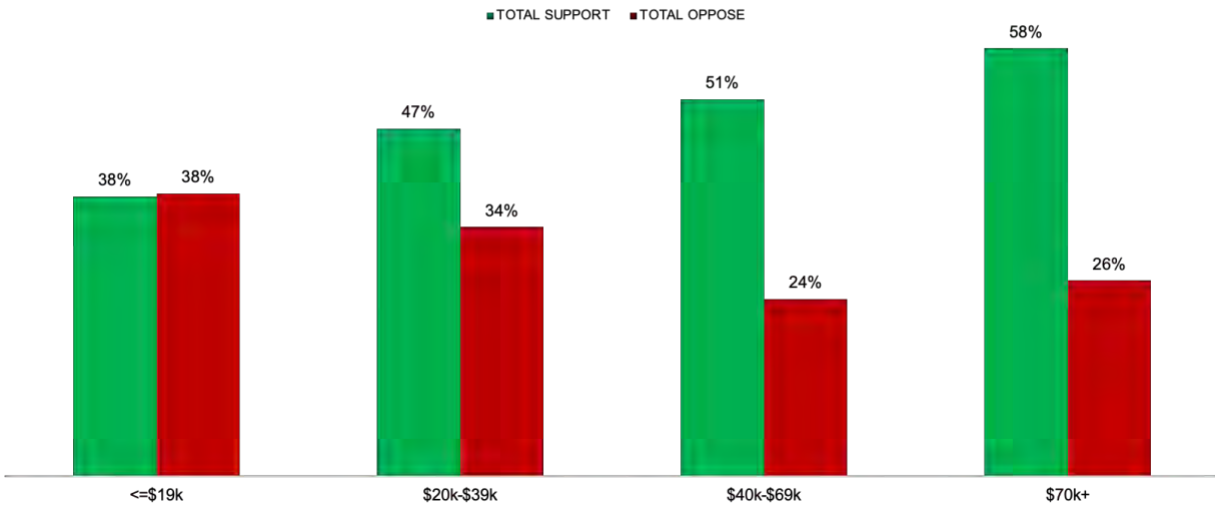
As reflected in the figure below, 67% of New Mexicans support allowing the use of federal Medicaid dollars to reduce gun violence and mass shootings compared to only 15% who oppose. The remaining 17% have a neutral position on this issue. Support for addressing gun violence through the use of Medicaid dollars is high across the population with the majority of nearly all sub-groups supporting the policy. Notably, Black and Latino respondents are more favorable of this, which is notable given their higher likelihood of being a victim of gun violence.

<sup>4</sup> CDC, Fatal Injury Reports, five-year average: 2014-2018. Trends: CDC, Fatal Injury Reports, 2009-2018.



The one issue area that has more divided support among New Mexicans is the utilization of Medicaid dollars to expand access to abortions. On this item, while 49% support expanding access to reproductive health including abortions with Medicaid funding, 30% oppose, and 21% are neutral/unsure of their position. There are some differences between men and women on this topic. While 49% and 47% of men and women, respectively, support expanding access to abortions, 32% and 29% of men and women, respectively oppose it. There are racial discrepancies as well, with 46% of Latinos supporting expanding access to abortions, compared to 50% of white and 55% of Black New Mexicans. Younger respondents (aged 18-29 years) are the most likely to support expanding abortion access (65%) compared to 60+ respondents, who are the least likely at 38%. Parents with kids are also more likely to expand access to abortions (56%) than respondents without children (44%). While it is unclear whether respondents are aware that there currently are reimbursements for abortions, the differences in support along demographic lines shows that abortion continues to be a highly political issue where many factors including religious beliefs and institutional and structural barriers affect whether people support expanding access to it.

Would you support or oppose allowing the state of New Mexico using Medicaid dollars for expanding access to abortions?



### 3. Access and Use of Healthcare Among Families in New Mexico

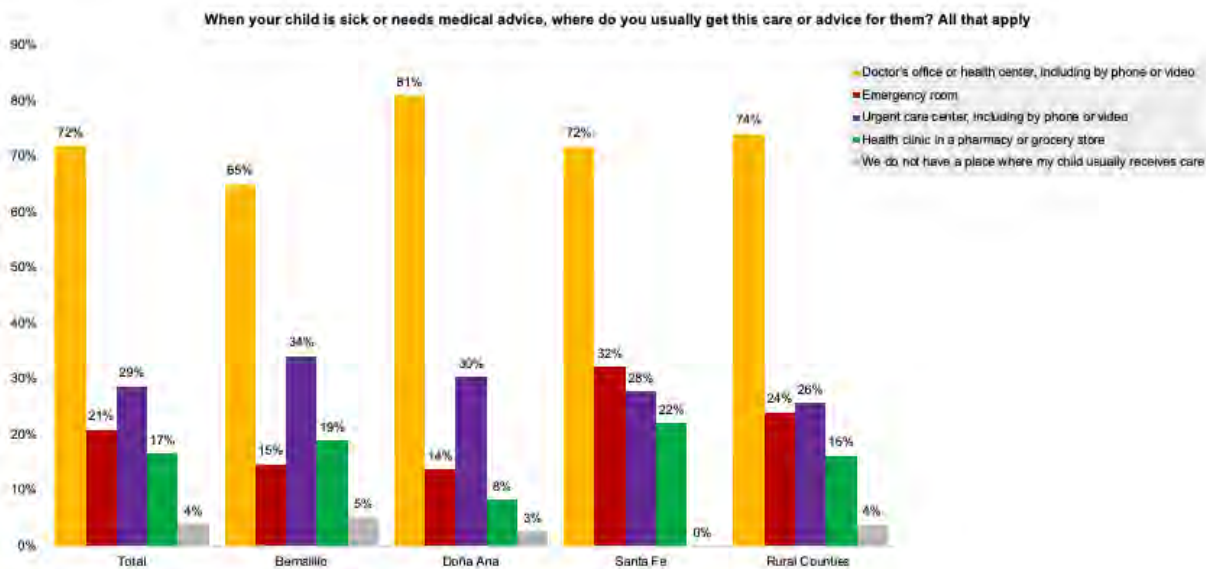
The survey includes several questions on access to and utilization of healthcare for children that were asked to parents (n=778) who have children under the age of 18 who live in their homes.

As reflected in the figure below, when their child/ren is/are sick and in need of medical care most parents in New Mexico (72%) have access to a doctor's office or health center where they get regular care.<sup>5</sup> This is highest in Dona Ana County where 81% of parents have access to a doctor's office or health center. Native American respondents were far less likely to have this access (63%, -9% relative to total). Similarly, children of foreign-born respondents (-10%) and residents of Bernalillo County (65%) were also comparatively less likely to have access to doctors or health care centers.

Nearly 29% utilize urgent care and 21% have utilized the emergency room, and 17% use pharmacies including those in grocery stores. Utilization of the emergency room is highest in Santa Fe County, where nearly a third of parents rely on the emergency room for their child's healthcare. A small percentage (4%) indicated that they do not have access to a place where they usually receive care.

---

<sup>5</sup> Respondents were able to choose more than one location so the overall percentage does not add up to 100.



The majority of New Mexican parents (77%) have a primary care provider for their child. This is an important measure given the positive correlation between access to a PCP and a host of child well-being outcomes. There are several inequalities in access to a primary care provider among New Mexico families, however. This includes similar disparities as discussed before: Native Americans (-6%) and Bernalillo County residents (-5%) were less likely to have a primary care physician for their child.

The biggest obstacle to a PCP among parents is being able to schedule an appointment, as 16% of parents without a primary care physician for their child indicated this was the primary reason why. Another 11% of parents said that they could not find a doctor that takes their insurance, this includes 13% of Medicaid enrollees. 15% of parents said that the doctor's office is too far away and not convenient. Physical distance is particularly challenging for rural residents, 17% who said that this was the primary reason they lack access to a PCP.

The survey also provides insights regarding the demand for and access to a host of specialized care. The survey suggests that the state is doing a great job providing families with dental care, as 97% of parents (for both Medicaid/CHIP and non-Medicaid/CHIP) who have needed or wanted dental care for their children (60% among parents and 65% among parents with Medicaid/CHIP) were able to get access to one.

Just under a third (29%) of parents needed mental or behavioral health for their child including counseling, with 88% of those parents indicating they were able to get the care they needed for their child. Parents who received mental health care did so across a range of locations, with many parents indicating they have utilized mental health services across multiple locations:

- School 34%
- Their primary care doctor or provider's office 45%
- A counselor/mental health specialist's office 55%

- Through a virtual appointment/telehealth appointment 10%
- Other location 2%

Finally, a quarter (25%) of parents indicated that they delayed or avoided getting medical care they felt their child needed during the past year due to the cost. For some, the cost of medical care is a larger barrier. For instance, when looking at Black families, the proportion who have delayed or skipped medical care due to the cost is twice as large as the overall state's population (51%). Cost is also a significant barrier for uninsured respondents (44%), people who make between \$40k and \$69k per year (37%), and residents of rural counties (30%).