



PARTNERING FOR A HEALTHY TOMORROW: Preventing and Managing Chronic Disease in New Mexico

Final Report

Results from April 2009 Deliberations in:

- Las Cruces, NM
- Albuquerque, NM

Convener

New Mexico Department of Health,
On behalf of the Healthy New Mexico Task Force

Facilitator

New Mexico First

Sponsor

AstraZeneca



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Introduction

In April 2009 over 170 people came together in community forums held in Albuquerque and Las Cruces, New Mexico to generate recommendations on community, school, business, healthcare and government actions to better prevent and manage the most common chronic conditions affecting New Mexicans. The events, titled *Partnering for a Healthy Tomorrow: Preventing and Managing Chronic Disease in New Mexico*, were held April 3 in Las Cruces and April 17 in Albuquerque. They sought public input from a wide representation of community members and leaders, public health officials, policymakers, and healthcare professionals.

Organizers

The forums were convened by the **New Mexico Department of Health**. The department's mission is to promote health and sound health policy, prevent disease and disability, improve health services systems, and assure that essential public health functions and safety net services are available to New Mexicans. For this project, the department is charged with managing the Healthy New Mexico Task Force.

The forums were facilitated by **New Mexico First**, a nonpartisan, nonprofit organization that brings together people to identify solutions to the state's toughest problems. In New Mexico First's 24-year history, it has engaged over 8,000 people in the democratic process. The organization conducts town halls and forums about important issues facing the state. In this case, New Mexico First conducted the forums through a contract with the New Mexico Department of Health.

Healthy New Mexico Task Force

The forums were funded from appropriations in New Mexico Senate Bill 129, passed during the 2008 legislative session. The measure was sponsored by state Senator Dede Feldman and called for the creation of the Healthy New Mexico Task Force. Participants in the *Partnering for a Healthy Tomorrow* forums were considered ex-officio members of that task force, which was charged with developing recommendations for reducing overall demand for high-cost medical treatments of chronic diseases in New Mexico. The recommendations made at the forums are designed to supplement information from government agencies and healthcare systems gathered on behalf of the Healthy New Mexico Task Force. The consensus recommendations generated from the forums will be presented to the interim Legislative Health and Human Services Committee in the summer of 2009.

The Forum Process

Recruiting for the forums was done electronically, by mail, and by phone using statewide outreach lists. Among those encouraged to attend were: community members and leaders; public health and healthcare professionals; educators, parents and students; persons living with chronic diseases; city and county planning, recreation and transportation professionals; employers and human resource administrators of employee benefits plans; government officials and policymakers; and healthcare administrators.

Like all New Mexico First events, these forums took participants beyond the typical presentation-filled seminar and instead drew on their knowledge to find solutions to the issue at hand. Prior to the town hall, participants received a background report that provided valuable information on the prevention and management of chronic diseases, especially those that were highlighted during the forum: heart disease, stroke, cancer, diabetes, arthritis and asthma. The report, which served as the basis for the discussions during the forums, can be accessed at http://www.nmfirst.org/townhalls/DOH_Bkgd_Rpt_FINAL.pdf.

The forums included a few guest speakers, all experts in their field, to set the context. This included representatives from the NM Public Education Department, NM Health Care Takes On Diabetes, the NMSU Extension Program, Roadrunner Food Bank, and the state legislature. However, the bulk of the work was completed in small groups by the participants themselves. By the end of the forum, each group drafted concrete recommendations for their local community, policymakers, and healthcare leaders. The discussions were organized around four main categories:

1. Physical activity
2. Healthy eating
3. Tobacco control
4. Clinical preventive services

New Mexico First focuses on attaining balance between various stakeholder groups so that all necessary viewpoints are present in the discussion. To this end, registration fee waivers were available to those who indicated they needed financial support.

Forum Objectives

The forums had four major objectives:

- Strengthen awareness of effective approaches to supporting chronic disease prevention through physical activity, healthy eating, tobacco control, and access to clinical preventive services.

- Develop concrete recommendations for how New Mexico's communities, schools, businesses, healthcare systems and state/tribal/local governments can take action to better prevent and manage the most common chronic conditions affecting New Mexicans.
- Identify specific actions that can be taken by stakeholders to overcome existing barriers to implementing community, organizational, environmental and policy activities.
- Raise awareness about New Mexico's most prevalent, costly, and, in many cases, preventable chronic health problems.

A Vision for the Future

Participants in the forums developed vision statements for a healthy New Mexico. They envisioned a state where all New Mexicans have access to healthy, locally grown food, and where residents make intentional choices that lead to a leaner, healthier population. They called for healthier foods available to young people in schools and restaurants as well as nutrition education so that healthy eating becomes an intuitive choice. They imagined a state where emphasis is given to building safe, walkable communities, and where tobacco use is reduced or eliminated.

In order to combat the conditions that can ultimately lead to poor health and chronic disease, participants described a state where poverty, racism and discrimination have been addressed and people are connected through social interaction and a sense of community. They also realized that reliable health information, sufficient financial support, and policymaker commitment is necessary. The participants also wanted "rational healthcare policies" that maximize healthcare dollars in an efficient and equitable way as well as healthcare services that assure preventive and primary care access and delivery, especially in our underserved communities. They visualized a New Mexico that leads in wellness – where good health is the norm and the residents live happy, active, and healthy lives.

Additionally, the groups called for healthcare services that promote integrated care, where disease *prevention* is preferred over treatment, and long-term investments in integrated health promotion are emphasized over short-term economic concerns. They wanted a medical community that works in cooperation with the private sector to develop a healthcare system that utilizes technology and the internet while focusing on prevention and education.

Forum Recommendations

The two forums produced almost 100 recommendations. As noted previously, the events focused on the four major categories of physical activity, healthy eating, tobacco, and clinical preventive services. Highlights of those recommendations follow (selected based on recurring themes, clarity, or alignment to the forum's stated objectives). A full listing of all the recommendations is provided in the appendix.

Physical Activity

Participants in both communities called for increased physical education in public schools as well as more funding for parks, recreational facilities, and education. Albuquerque participants focused more on education policy, graduation requirements and work place incentives, while Las Cruces attendees suggested an investment in technology, such as the "wii fit" program for schools and senior centers.

What Schools Can Do

Several of the recommendations addressed the role of public schools in increasing physical activity among young people. Suggestions included:

- Increasing the number of quality non-competitive PE classes available to students
- Integrating more physical activity into the classroom in all subjects
- Creating a graduation requirement in health education
- Offering professional development for teachers to implement health education and physical activity into lesson plans.

What Communities Can Do

Recommendations addressing physical activity that could be enacted by communities include:

- Designating or zoning areas that encourage walking and biking in the course of everyday activities
- Fostering infrastructure that supports safe physical activity in public spaces
- Encouraging law enforcement officials to participate in neighborhood and community development

What Government Entities Can Do

Forum participants also recommended policy changes in that could be enacted by government entities, including:

- Providing resources and incentives, such as tax breaks, to assist businesses and organizations in developing the worksite environment, including wellness programs and ergonomic work stations for employees
- Protecting land, air and water quality by requiring industries to prove that their activities do not harm the environment

Healthy Eating

Participants in both forums agreed that New Mexicans must have access to more affordable healthy food choices in their schools and communities. There was also consensus among groups that more education and training should be provided around cooking, meal planning and healthy food choices.

What Schools Can Do

Participants recommended a range of healthy eating activities that could take place in schools, including:

- Making available to students an increased amount of fresh fruit and vegetables (preferably locally grown)
- Making health education a requirement for high school graduation

What Communities Can Do

The forums called for a number of healthy eating activities at the community level, including:

- Expanding creative cooking classes at the local level
- Encouraging promotoras to educate communities about cost-effective and culturally appropriate meals
- Supporting community gardens in low-income neighborhoods and schools, with funding from private and government sources
- Providing healthy eating coaching and training at the workplace, through programs offered by employers

What Government Entities Can Do

Many other healthy eating recommendations were proposed, including:

- Passing a state surcharge on junk food
- Requiring fast food restaurants to post nutritional information on menus
- Increasing subsidies to school meal programs
- Introducing subsidies for local farmers
- Passing a living wage law so that New Mexicans can access healthy foods

Tobacco Use

Participants agreed that tobacco use, both smoking and chewing, should be decreased in the state. Some advocated limiting access to these products, while others endorsed deterrents such as increased taxes and advertising restrictions. Specific recommendations included:

- Annually increasing tobacco taxes to fund clinically supported cessation programs
- Making technology available to rural health clinics and schools in order to link to other healthcare resources for tobacco cessation and prevention
- Providing adequate funding for enforcement of the Dee Johnson Clean Indoor Air Act
- Ensuring continued funding and support for tobacco cessation and behavioral health programs
- Implementing media literacy programs that debunk the romance of smoking
- Banning at the state level all forms of advertising and promotion of tobacco products

Clinical Preventive Services

In this final category, participants focused on healthcare reform, equal access to preventive care and treatment, and healthcare careers. Recommendations included:

- Continued efforts by the state legislature to provide healthcare coverage for all New Mexicans
- Mandated insurance reimbursement for Clinical Preventive Services to qualified and diverse providers
- Flexible, accessible and adequate transportation to preventive services
- Forgiveness of loans for medical school students who agree to practice in New Mexico
- Utilization by healthcare facilities and plans of appropriately trained complementary and alternative providers

Conclusion

These recommendations, including the complete listing in the appendix of this report, call for New Mexico's communities, schools, worksites, policymakers, and health care systems to take action on health, wellness, and prevention of disease. This will require collaborative and creative approaches to bypassing barriers in order to realize the fullest health potential for all New Mexicans.

Appendix: Full List of Recommendations

PHYSICAL ACTIVITY	
#	Recommendation
1	In order to promote fitness that ameliorates chronic health problems, the state legislature and local governments should appropriate additional funds to provide adequate recreational facilities, including parks that are accessible to all.
2	So that communities have adequate live-work-play areas, state, city or municipal planners should designate or zone areas that encourage walking and biking in the course of everyday activities.
3	So that there is an increase in physical activity among its citizens, the state and local governments should invest in physical activity technology (for example, "Wii" fitness equipment or similar systems) for use in public schools, public gyms and senior centers, making physical activity fun and accessible to all. ¹
4	So that all New Mexico K-12 students have opportunities for increased physical education and develop life-long positive behaviors and attitudes toward physical activity, the public school system should make physical activity a priority by <ul style="list-style-type: none"> • increasing the number of quality PE classes available to students • integrating physical activity in all subjects • increasing the number of physically fit students
5	So that New Mexico citizens and policymakers understand the concept of being physically fit, universities should be encouraged to conduct and publish research that defines the relationship between fitness and body mass index (BMI). ²
6	So that New Mexicans increase their physical activity the New Mexico Department of Health should initiate a media campaign showing what constitutes physical activity.
7	So that New Mexicans set realistic physical activity goals, lawmakers, employers, schools and individuals should build on targeted education and provide a wide range of attainable examples of health, possibly by incorporating role models in social marketing campaigns. ³
8	So that New Mexicans are moving and eating properly the government should fund not-for-profits to do education in the community and schools regarding physical activity and nutrition.
9	So more physical education programs can occur in the schools: <ul style="list-style-type: none"> • state board of education should reallocate funding to protect or reinstate physical education • educators should be encouraged to design curriculum to involve physical activity • board of education should provide non-competitive gym class (to include non-traditional physical activities) for grades K-12.
10	So that physical activity is not hampered by an unsafe environment: <ul style="list-style-type: none"> • county and city officials should foster the idea of neighborhood capacity development⁴ • city planners should create better public space that would foster safety • law enforcement should change their priorities of neighborhood involvement to enforce necessary laws for protection rather than giving parking tickets.
11	So that educators and employers would be informed about the payoffs in investing in physical activity, a Healthy New Mexico Task Force will create a white paper on the subject.

¹ Recommendation was edited for clarity. Original: So that there is an increase in physical activity among its citizens, the state and local governments should invest in physical activity technology (for example, "Wii" fitness equipment or like systems) for use in public schools and public gyms and senior centers, to make physical activity fun and accessible to all.

² Original text read: "body type"

³ Recommendation was edited for clarity. Original: So that New Mexicans set realistic physical activity goals, lawmakers, employers, schools, individuals should improve specific education and give examples based on where individuals "are at" through the use of media and role models (social marketing).

⁴ "and sociality" omitted from end of sentence

12	So that health insurance costs to employers and employees would be reduced, the New Mexico legislature should enact a law to incentivize physical activity time.
13	So that all New Mexico communities have infrastructure that supports safe physical activity (such as wider road shoulders, sidewalks, bike / walking paths), lawmakers should advocate for and support funding for these safety zones for physical activity.
14	So that New Mexico communities can have safe environments that support physical activity, community health programs should work with neighborhood groups to provide education about how to advocate for funding and how to develop a safety zone plan for physical activity.
15	So that students learn life-long health and physical activity skills policymakers should require a graduation requirement in health education, daily physical activity in K-12, and professional development for teachers to implement health education (including nutritional education, with cultural differences in mind) into lesson plans and physical activities in schools.
16	So that New Mexicans can increase physical activities state policymakers should provide resources and incentives, such as tax breaks, to assist businesses, organizations, and institutions in developing, implementing, and evaluating the worksite environment, including ergonomic or standing work stations for employees, and wellness programs which include physical activity campaigns.
17	So that bicycling and walking become commonplace governmental agencies, in partnership with their communities, should design and re-design roads and sidewalks that provide safe routes for non-motorized transportation and the state legislature shall adopt a Complete Streets policy ⁵ for New Mexico Department of Transportation and provide state funds for the Safe Routes to School Program. ⁶
18	So that land, air and water quality are protected in all communities, allowing more outdoor activity, state or local policymakers should require industry to carry the burden of proof to protect public health, thus utilizing the Precautionary Principle. ⁷
19	So that communities can create and maintain safe, healthy, and walkable neighborhoods, state and local government policymakers and program administrators should support strong community leadership with training, resources, and the power to set their own priorities.
20	So that more New Mexicans increase their daily activity, individuals should take the risk to do what's right for themselves in terms of physical activity, for example, by taking short walks, turning off the TV at home, and asking employers to extend the workday for exercise.
21	So that more New Mexicans can increase their daily activity, employers should support employees through providing flexible time, gym memberships, employee health programs and health education.
22	So that more New Mexico school students can increase their daily activity, schools should promote Safe Routes to School programs, should integrate more physical activity into the classroom and get kids out of their chairs, and should lengthen the school day in order to allow greater number of periods of physical activity.
23	So that more New Mexicans can increase their daily activity, legislators should reduce poverty by passing a state living wage law.
24	So that more New Mexicans can increase their daily activity, legislators should fund adequate nutrition programs for all New Mexico communities.
25	So that more New Mexicans can increase their daily activity, policymakers and planners should ensure an infrastructure that promotes active living.

⁵**Complete streets** are roadways designed and operated to enable safe and comfortable access and travel for all users. Pedestrians, bicyclists, motorists and public transport users of all ages and abilities are able to safely move along and across a complete street

⁶ **Safe Routes to School** is an international movement with a goal of increasing the number of children who walk or bicycle to school by funding projects that remove the barriers that currently prevent them from doing so.

⁷ The **precautionary principle** is a moral and political principle which states that if an action, policy or activity raises threats of harm to human health or the environment, precautionary measures should be taken even if some cause and effect relationships are not fully established scientifically. The burden of proof falls on those who would advocate taking the action.

HEALTHY EATING

#	Recommendation
26	So that New Mexico policymakers have reliable direct data to propose and enact effective programs, universities and researchers should be encouraged to conduct direct research to establish objective data that defines the dietary habits of New Mexico citizens. These findings should be compared with known minimum standards for healthy eating.
27	So that New Mexico citizens have access to fresh fruits and vegetables, the public and private sector should work together to provide space and incentives for growing fresh produce in the community. Among the considerations would be farmland preservation and liability issues.
28	So that the healthfulness of school meals is improved, and an increased amount of fresh fruit and vegetables (preferably locally grown) is available to students, state government should begin to subsidize school meal programs and the federal government should increase its subsidy.
29	In order that the people of New Mexico may adopt and practice healthy eating habits, the state legislature should enact programs that: - require vendors of food to publish "nutrition facts" at POS - provide incentives to food vendors to offer healthy (ideally whole) foods.
30	So that high school students in New Mexico develop healthy eating habits, a mandatory health education course should be part of high school graduation requirements.
31	So that New Mexicans are cooking healthier meals and living a healthier life style, counties should expand creative cooking classes to teach people to shop, cook, and prepare healthy meals, as well as to grow healthy food.
32	So that New Mexicans are empowered/ incentivized to eat healthier and have more money to spend on healthy food, WIC, SNAP administrators, and policymakers should prohibit using food stamps for junk food. ⁸
33	So that New Mexico families see the value of making healthy (food) choices, worksite wellness programs, media, and health/HR programs should include (information on) making healthy choices, how to read labels, and portion control.
34	So that New Mexico youth will have improved health, wellness, and nutrition knowledge, PED, local school districts and DOH should implement standard health curriculum at elementary and secondary levels as a requirement for graduation.
35	So that there is a decrease in the number of fast food restaurants, grass roots organizations and the community should establish a "slow food" ⁹ movement.
36	So that school district food service programs can provide more healthy options for students and staff the state legislature should allocate additional funding to school districts to purchase locally grown foods including fruits, vegetables, lean proteins, and whole grains.
37	So that communities may have increased awareness of healthy eating and cooking habits, policymakers should create incentives for communities, employers, and health professionals to provide educational opportunities to the community.
38	So that all communities have access to affordable fresh food, state and local governments, in partnership with private funding sources, should support establishment of community gardens in low income neighborhoods and schools.
39	So that access to healthy foods in low income communities increases, food banks, food pantries, summer lunch programs, community gardens, community supported agriculture, and other providers should collaborate to achieve greater integration of their programs and efficient use of public and private resources.
40	So that New Mexicans eat healthier, state policymakers should provide resources and tax incentives to assist businesses, organizations, and institutions in developing, implementing, and evaluating work site wellness programs which include nutrition interventions.

⁸ **Junk food** was not defined by participants, but the term is commonly used to describe high-calorie foods that have little or no nutritional value. Junk foods or "fast foods" are often less expensive and easier to buy than healthier foods.

⁹ The **Slow Food** movement is a global, grassroots movement founded by Carlo Petrini in Italy as an alternative to fast food. It claims to preserve the cultural cuisine and the associated food plants and seeds, domestic animals, and farming within an eco-region.

41	So that food insecurity is eliminated in New Mexico, the state legislature should pass living wage legislation and other measures to accomplish this goal, recognizing that access to healthy food is a human right.
42	So that people can learn how to purchase and prepare healthy, cost-effective and culturally-appropriate meals, community-based educators and promotoras ¹⁰ should teach food-related classes.
43	So that availability of fresh, locally-grown foods is supported, state legislature should fully fund farm-to-table and farm-to-school projects.
44	So that people are incented to purchase healthy food, state legislators should pass a surcharge on junk food.
45	So that small grocers/convenience/gas stations can develop higher quality inventories, state legislature should implement tax incentives for offering availability of fresh foods.
46	So that customers can be informed about nutritional content, state legislature should require fast-food restaurants to post information on menus.
47	So that New Mexicans have access to healthy food at affordable costs, government should not only subsidize farmers, but should also subsidize low-income individuals and families.
48	So that New Mexicans have access to healthy food, legislators should pass a living wage law.
49	So that New Mexicans have access to healthy food, legislators should tax fast food establishments and provide incentives for healthy food grocers to locate in low-income neighborhoods.
50	So that New Mexicans have access to healthy food, employers should provide coaching and training for employees re: healthy food and healthy cooking.
51	So that New Mexicans have access to healthy food, those who grow organic food for themselves and have excess, can take to farmers' markets in exchange for credits or vouchers.
52	So that New Mexicans eat more healthily, communities should provide non-monetary incentives to individuals, like points or coupons for barter.
53	So that New Mexicans eat more healthily, all schools should be required to have a community garden and encourage the use of local, fresh produce to prepare food within the school.

TOBACCO USE

#	Recommendation
54	So that the numerous and documented health problems related to tobacco use may be eliminated or reduced, the New Mexico legislature should impose a tax on the sale of tobacco products sufficient to deter people from buying and using tobacco products.
55	So that the numerous and documented health problems related to tobacco use may be reduced, the New Mexico legislature should ban all forms of advertising and promotion of tobacco products.
56	So that all New Mexicans can live smoke-free, the state legislature should continue to allocate the tobacco settlement funds to provide adequate and sustained funding for proven tobacco control programs in order to decrease the negative health impacts of tobacco use.
57	So that the detriment of second-hand smoke is limited, law enforcement agencies should enforce the Dee Johnson Clean Indoor Air Act, banning smoking within 25 feet of a public entrance in all communities.
58	To prevent tobacco use among students, the New Mexico Public Education Department should develop a mandatory health education class required for graduation in New Mexico public schools.

¹⁰ Promotoras are community health workers in many Hispanic communities, often serving as a liaison between the official medical establishment and the local community.

59	In order to accomplish a lower smoking rate, communities, lawmakers, policymakers, and state government should make laws regarding public smoke-free spaces, put higher taxes on tobacco, and spend money to help educate, assist and assess tobacco users on hazards and harm of tobacco.
60	In order to decrease images of tobacco use in film and other media, ¹¹ state and federal lawmakers should tax tobacco at a higher rate, provide an education course for film makers, and limit the amount of film time showing tobacco use (films rating R only).
61	In order for students to have more opportunity to engage in healthy behavior, the federal and state government should use increased funds from tobacco tax to fund after school programs as an alternative to smoking.
62	So that there is less access to and use of tobacco, legislators should enact legislation that prohibits tobacco advertising that targets youth and prohibits commercial (vs. ceremonial) tobacco use by youth
63	So that less tobacco products are purchased, legislators should enact a higher tax on tobacco products
64	So that awareness of danger and addictive nature of tobacco use is raised and understood, schools should implement curriculum addressing this issue.
65	So that certain birth defects and low birth weight babies be reduced, healthcare providers should bring all available public and private resources to bear on smoking cessation for pregnant, parenting, and care-giving New Mexicans
66	So that any sustained tobacco use is reduced or eliminated in New Mexicans, state legislators should increase tobacco tax by one dollar annually to fund clinically supported cessation programs including access in community health centers, places of employment, school based health centers, and prevention programs including those that increase physical activity.
67	So that tobacco use is recognized and addressed as a response to adverse life circumstances, publicly funded tobacco control programs should incorporate attention to those life circumstances (i.e. the social determinants of health) in their treatment plans with affected people.
68	So that all tobacco initiation and use in rural New Mexico communities is reduced or eliminated, state policymakers should make technology available to rural health clinics and schools to link to other healthcare communities.
69	So that we eliminate the use of commercial tobacco purchased from sovereign nations in New Mexico the state should impose a "customs" - like tariff on all tobacco products purchased for use off of Native lands.
70	So that fewer New Mexicans use tobacco or are exposed to second hand smoke, lawmakers should increase the tax on cigarettes, tobacco products and smoking paraphernalia.
71	So that fewer New Mexicans use tobacco or are exposed to second hand smoke, policy should be enacted by lawmakers, administrators and employers to ensure tobacco-free indoor and outdoor areas at campuses, including colleges, government buildings, hospitals, and common areas.
72	So that fewer New Mexicans use tobacco or are exposed to second hand smoke, government should provide adequate funding to ensure enforcement of the Dee Johnson Clean Indoor Air Act.
73	So that fewer New Mexicans use tobacco or are exposed to second hand smoke, government should fund media literacy programs using the latest advertising technology and techniques to debunk the romance of smoking and alcohol and to promote healthy nutrition.
74	So that fewer New Mexicans use tobacco or are exposed to second hand smoke, government should use tobacco tax revenue and the tobacco master settlement agreement funds only for public health.
75	So that fewer New Mexicans use tobacco or are exposed to second hand smoke, policymakers should ensured continued funding and support for tobacco cessation and behavioral health programs.

¹¹ Original read: "In order to decrease media use of tobacco products"

CLINICAL PREVENTIVE SERVICES¹²

#	Recommendation
76	So that the citizens of New Mexico have access to primary, secondary and tertiary preventive services, the healthcare reimbursement industry should be overhauled to include coverage of these services at an affordable rate.
77	So that effective treatments are covered by health insurance, state officials should undertake hearings through which healthcare providers of all disciplines may be certified as effective and insurance coverage standards for minimum care established.
78	So that the number of physicians and specialists can be increased in the state of New Mexico government should provide sufficient incentives including potential tax relief and other reimbursement adjustments in order to increase care access for prevention and decreased use of ER.
79	So that healthcare for all New Mexicans is recognized as a basic human right, the New Mexico legislature should continue to investigate providing options for healthcare coverage for all New Mexicans and implement those options that meet everyone's needs.
80	So that necessary clinical preventive services are provided to the New Mexico public, policymakers should mandate insurance reimbursement for these services to qualified and diverse providers.
81	So that more registered dietitians can provide services in New Mexico, especially in rural areas, Medicaid fee for service should change their regulations to allow private provider numbers for registered dietitians.
82	So that all New Mexico citizens have equal access to comprehensive clinical preventive services (CPS) statewide, policymakers should fund and provide immersive 3D virtual tele-health facilities and academies for lifelong learners.
83	So that increased access with telehealth training to bridge the gap of fragmented systems and utilization of CPS takes place across New Mexico, the professional practice boards should expand professional practice acts to allow community health workers/ para-professionals to provide these services in a cost effective manner (e.g. mobile health units).
84	So that all New Mexicans have options to choose to get CPS, the New Mexico Legislature shall mandate that all insurance carriers public and private include (universal) coverage for basic CPS diagnosis, treatment, and follow-up as recommended by US Preventive Services Task Force.
85	So that the children and adolescents of New Mexico gain a lifelong knowledge of CPS, educational curriculum, including service learning, should be developed.
86	So that New Mexicans have coordinated, effective, appropriate CPS, lawmakers and coverage providers should continue to expand and require a patient-centered medical home concept within a health commons model of delivery.
87	So that CPS are available to all New Mexicans, policymakers, healthcare organizations and all providers should fund and/or utilize adapted techniques or equipment as needed for people with mobility limitations or sensory or cognitive impairments.
88	So that people understand the consequences of their behaviors and receive support to improve their health, health systems and policymakers should support culturally competent health coaching provided by appropriately educated health professionals and community health workers in schools and communities.
89	So that CPS are best utilized, lawmakers should also support community-based prevention fully, including local, county and tribal community health councils and other community-based coalitions.
90	So that all New Mexicans have access to CPS, governments and insurers should ensure that sufficient funding and reimbursement is available to recruit and maintain a robust network of primary care providers, located in the areas where they are needed.

¹² Due to the specialized and clinical nature of this section, participation in the Clinical Preventive Services discussion was presented as optional. Several participants chose to leave the forum or contribute as observers.

91	So that we improve access to and availability of CPS, policymakers, coverage providers and communities should fund and provide flexible, accessible and adequate transportation to services.
92	To improve access to and availability of clinical preventive services, healthcare facilities and plans should utilize appropriately trained complementary and alternative providers.
93	So that CPS will lead to the improvement in the quality of care for all patients, the hospital's governing board should make changes in policy and practice based on information gathered through community-based efforts.
94	So that health promotion and disease prevention become the focus of our healthcare delivery system, medical schools should forgive student loans to medical students who go into primary care in New Mexico.