

Plans of Care

for Infants Born with Substance Exposure



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Why Plans of Care? A federal law (the *Comprehensive Addiction and Recovery Act*, known as “CARA”) requires states to keep track of infants born exposed to drugs or alcohol and to assure that there is a Plan of Care for each of these infants and their affected family members or caregivers.

How will New Mexico respond?

New Mexico recognizes that the key to reducing the incidence of substance-exposed newborns is to incorporate screening and treatment for substance use into prenatal care. The state has recently passed a law that will make it easier for pregnant women struggling with drugs or alcohol to seek prenatal care without fear of losing custody of their babies. Under the new law, the fact that a pregnant woman screens positive for drugs or alcohol is not – on its own – grounds for referral to CYFD.

How will Plans of Care improve health outcomes for substance-exposed infants and their families?

1. Plans of Care help to assure early intervention for substance-exposed infants, giving these children the best possible chance to adapt and succeed.
2. Plans of Care include supports for family members/caregivers struggling with substance use disorders.
3. Plans of Care encourage a “big picture,” multi-generational approach to substance abuse treatment.
4. Over time, Plans of Care will reduce costs to families and communities, and to the state.

Why does this matter? The rate of New Mexico newborns exposed to addictive substances in utero increased 324% between 2008 and 2017.* Infants born exposed to addictive substances may struggle with health, learning, and social challenges for the rest of their lives.

* Saavedra, L.G. (Nov. 2018). Neonatal Abstinence Syndrome Surveillance in New Mexico. *New Mexico Epidemiology*, Vol. 2018, No. 10.

Where can I get more information?

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