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## FISCAL IMPACT REPORT

ORIGINAL DATE 02/21/17

SPONSOR Herrell LAST UPDATED \_\_\_\_\_ HB 373

SHORT TITLE Temporary Vet or Health Practitioner License SB \_\_\_\_\_

ANALYST Daly

### REVENUE (dollars in thousands)

Estimated Revenue			Recurring or Nonrecurring	Fund Affected
FY17	FY18	FY19		
	Indeterminate			

(Parenthesis ( ) Indicate Revenue Decreases)

### ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY17	FY18	FY19	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
<b>Total</b>		Indeterminate				

(Parenthesis ( ) Indicate Expenditure Decreases)

### SOURCES OF INFORMATION

LFC Files

#### Responses Received From

Board of Veterinary Medicine (BVM)  
 Medical Board (MB)  
 Regulation & Licensing Department (RLD)  
 Office of the Attorney General (OAG)

### SUMMARY

#### Synopsis of Bill

House Bill 373 creates a temporary licensure provision for health care or veterinary care services for the underserved. It applies to any physician, physician assistant, dentist, nurse, optometrist, or other health care practitioner or veterinary practitioner who is licensed in good standing in another state and desiring to provide their services free in an underserved area of New Mexico. Underserved is defined as any person who is uninsured or underinsured or who has limited access to health or veterinary care. Prior to serving, a practitioner must obtain a temporary licensure from the agency that issues the relevant professional license. The agency must issue a

license when the applicant provides proof that the applicant holds a current unrestricted license from an out of state agency. The temporary license is valid for no more than thirty days and may be renewed once every two years.

HB 373 also provides immunity for temporary practitioners where injury or death is alleged to have arisen, unless it is due to gross negligence, wanton conduct or intentional wrongdoing. However, the immunity does not apply if the services provided to the underserved were not within the scope or duration of the practitioner's temporary license authority.

## **FISCAL IMPLICATIONS**

It is unclear what the impact will be on boards and commissions since the number of practitioners who will apply for a temporary license is unknown.

## **SIGNIFICANT ISSUES**

The Medical Board (MB) has been issuing "temporary teaching, research and specialized diagnostic and treatment licenses" since 2002 under MB rules. Also, "Youth camp or school licenses" are issued to specific named organizations. MB rules require that such a licensee practice under the supervision of a licensed New Mexico physician for patient safety because out-of-state physicians may not be familiar with the location and clinical surroundings of the underserved population. The license is valid for three months, and may be renewed, as needed, for one year. RLD reports similar controls are in place for many other boards in the state, requiring either independent practitioners or some level of supervision by a licensee with a higher class of license.

The New Mexico Board of Veterinary Medicine has a rule for a 60-day temporary permit. To qualify for a 60-day temporary permit, an applicant must: be currently licensed in and currently practice in another state, territory, or district of the United States; be in good standing in all jurisdictions in which he is or has been licensed; submit the completed, signed, and notarized application for licensure DVM form along with a color passport-type, head and shoulders photograph, and the temporary permit fee; and provide a verification of licensure from the state where the applicant currently practices veterinary medicine and holds licensure. The temporary permittee must comply with the Veterinary Practice Act and board rules. The board maintains jurisdiction over the permittee during the 60-day permit period. A temporary permit may not be renewed within a 12 month period from issuance without approval from the Board.

MB also expresses concern over the immunity provisions in Section 1(E) and its impact on the board's ability to take disciplinary action against the temporary licensee, or to correct applicable standard of care issues.

According to both RLD and OAG, the boards impacted could receive a possible increase in complaints. Complaints received by the professional licensing boards will be difficult to process, because the board may not have jurisdiction over a healthcare practitioner whose temporary license has expired. In these instances, the public may not be protected from unethical or unprofessional practice.

## **PERFORMANCE IMPLICATIONS**

The bill will have an impact on these RLD Boards and Commissions: the Dental Board, Optometry Board, Osteopathic Board, Respiratory Advisory Board, Acupuncture and Oriental Medicine Board, Chiropractic Board, Physical Therapy, Occupational Therapy Board, Psychology Board, Social Work Examiners Board, Counseling and Therapy Practice Board, and the Podiatry Board.

## **TECHNICAL ISSUE**

Section 1(C) references practitioners whose licenses are issued by a state agency, board or commission “pursuant to Chapter 61, Articles 2 through 34 NMSA 1978”. (See page 2, line 21.) As RLD points out, some of those articles relate to utility operators, private investigators, auctioneers, and collection agencies, all of which do not fit the definition of “practitioner” found in Section 1(A)(1).

## **OTHER SUBSTANTIVE ISSUES**

MB reports the temporary licensure rules have worked well with the current system of having a New Mexico licensed physician overseeing a temporary licensee because different states have different practice acts and different practice norms and regulations. A supervising physician allows the temporarily licensed practitioner to have access to a local practitioner if the temporary practitioner is concerned as to what might be acceptable medical practice in this state.

MD/jle