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FISCAL IMPACT REPORT

ORIGINAL DATE 2/23/17
 LAST UPDATED 3/06/17 HB 396/HHHCS

SPONSOR HHHC

SHORT TITLE Nurse and Midwife Hospital Admitting Privilege SB _____

ANALYST Chilton

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY17	FY18	FY19	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
Total	NFI	NFI	NFI	NFI		

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Response Received From

Department of Health (DOH)

Human Services Department (HSD)

University of New Mexico Health Sciences Center (UNM HSC)

Response Not Received From

Board of Nursing

SUMMARY

Synopsis of Committee Substitute

The committee substitute for Senate Bill 396 requires all health facilities in New Mexico to adopt credentialing policies that would not require physician supervision for DOH-certified nurse-midwives and Board of Nursing-certified nurse practitioners admitting, providing in-facility care, or discharging patients from those facilities.

FISCAL IMPLICATIONS

No fiscal impact identified.

SIGNIFICANT ISSUES

The Department of Health notes that most nurse-midwife-delivered births are in hospitals, and that many hospitals around the country and around New Mexico, including New Mexico's two

largest hospitals, grant nurse-midwives and nurse-practitioners admission and discharge privileges. DOH's analysis continues that "having admitting and discharge privileges ensures a continuum of care by the patient's chosen provider, from outpatient prenatal care visits, inpatient labor and delivery needs, and outpatient postpartum care." Further, Medicaid regulations permit facilities to seek reimbursement when a nurse-practitioner or nurse midwife is the admitting provider.

DOH's analysis appears to assume that the bill is referring only to the care of women about to deliver. However, the bill does not specify that, thereby allowing nurse practitioners and nurse midwives to admit to hospitals patients with any sort of problem.

In 2014, according to DOH, nurse-midwives delivered about one-fourth of all babies born in New Mexico, or 6,400 of the 25,985 infants born here.

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

If the bill is not enacted, hospitals and other health facilities in New Mexico would still have to decide individually whether or not to allow nurse-midwives and nurse practitioners to admit patients and to discharge them.

POSSIBLE AMENDMENTS

The bill could specify the types of admissions that could be granted to nurse practitioners and nurse midwives (e.g., normal births but not neurosurgery).

LAC/jle/sb