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FISCAL IMPACT REPORT

SPONSOR Tallman ORIGINAL DATE 1/18/19
 LAST UPDATED 1/23/19 HB _____

SHORT TITLE Coordinate Medical Transport SB 145/aSPAC

ANALYST Chilton

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY19	FY20	FY21	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
Total		NFI	NFI	NFI		

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Response Received From
 Department of Health (DOH)

Response Not Received From
 University of New Mexico Health Sciences Center (UNM HSC)

SUMMARY

Synopsis of Amendment

The Senate Public Affairs amendment removes the reference to the American College of Cardiology accreditation service, allowing any “nationally recognized organization that provides STEMI receiving or referring accreditation” to credential hospitals deemed capable of caring for patients with STEMI and include them on the list to be maintained.

Synopsis of Bill

Senate Bill 145 would require DOH to coordinate with local and regional emergency medical services on the development and implementation of triage and transport plans for ST segment elevation myocardial infarction (STEMI) patients.

The language of SB 145 adds to existing language in statute (Section 24-10B-13 1978 NMSA): Certification of STEMI receiving and referring centers, dating from 2013.

A similar bill (Senate Bill 80 2017) was passed by the Legislature but vetoed by the governor.

FISCAL IMPLICATIONS

DOH indicates no fiscal impact on the agency despite the need to write new rules and to update its website.

SIGNIFICANT ISSUES

Heart disease is the leading cause of death and long-term disability in the United States (<https://www.cdc.gov/heartdisease/facts.htm>). In New Mexico, heart disease accounted for 3,408 deaths in 2014, or 151.7 deaths per 100,000.

A heart attack occurs when there is a severe reduction in blood flow to a segment of the heart muscle. One type of heart attack is called an ST-elevation myocardial infarction (STEMI) which refers to the specific pattern that is observed on an electrocardiogram (ECG). ST-segment elevation may have other causes, and not all patients with heart attacks have ST-elevation on their ECG, but the procedure is generally the best available to emergency medical technicians rescuing patients with chest pain or other signs that might be compatible with a myocardial infarction.

This bill will allow for emergency medical services providers to identify and have more clarity on where to transport STEMI patients. This will cut down the time from patient diagnosis to definitive treatment allowing for better patient outcomes. Heart disease is the leading cause of death among Native Americans, according to the CDC. Rural, frontier, and tribal community emergency medical services caregivers will be able to better identify and have more clarity on where to transport STEMI patients.

Ongoing work will involve the monitoring of STEMI credentialing status of receiving and referring centers since this is not to be done on an honorary or voluntary basis. It will also be necessary to post the current status of all eligible STEMI receiving and referring facilities to the department of health's website, and establish and ensure that EMS personnel within the state have the most current status information in order to maintain the intent of SB145 and increase and maintain patient safety.

UNM-HSC already has programs in place that comply with this legislation and has found they lead to better care and outcome for patients. UNM Hospital currently qualifies as a Mission Lifeline: STEMI receiving Center. Through this work, coordination with Emergency Medical Services (EMS) is already occurring to some extent. The EMS work of coordinating transports should fit reasonably into current structure of state EMS. The ongoing EMS coordination through Mission:Lifeline has resulted in improved communication with all the Core ABQ STEMI receiving facilities. Quarterly systems-level meetings have helped shape processes, feedback mechanisms, and education for EMS IN STEMI and acute coronary syndrome care. These all lead to improved patient care. The proposed legislation formalizes much of what is already occurring and might strengthen the ongoing educational efforts that UNM HSC is a part of with Mission:Lifeline.

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

Emergency medical providers would not be given guidance as to which hospitals have been certified as being able to respond adequately to an event that appears to be a myocardial

infarction; patients might be taken to hospitals less prepared for caring for a myocardial infarction event.

LAC/sb/al