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FISCAL IMPACT REPORT

SPONSOR Rodriguez ORIGINAL DATE 1/29/22
LAST UPDATED _____ HB _____
SHORT TITLE Improve Perinatal Health SB 148
ANALYST Klunt

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Nonrecurring	Fund Affected
FY22	FY23		
	\$200.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

Relates to Appropriation in the General Appropriation Act

SOURCES OF INFORMATION

LFC Files

Responses Received From
Department of Health (DOH)

SUMMARY

Synopsis of Bill

Senate Bill 148 (SB 148) appropriates \$200 thousand from the general fund to the Department of Health for programs to improve perinatal health outcomes statewide.

There is no effective date of this bill. It is assumed that the effective date is 90 days following adjournment of the Legislature.

FISCAL IMPLICATIONS

The appropriation of \$200 thousand contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of FY23 shall revert to the general fund. The appropriation contained in this bill was not included in the LFC or executive recommendation.

SIGNIFICANT ISSUES

The LFC and executive recommendations for the Human Services Department included \$14.4 million from the general fund to extend post-partum care for new mothers from 3 to 12 months.

The U.S. Department of Health and Human Services, Center for Medicare and Medicaid Services reported extending postpartum coverage options offers states an opportunity to provide care that can reduce pregnancy-related deaths and severe maternal morbidity and improve continuity of care for chronic conditions such as diabetes, hypertension, cardiac conditions, substance use disorder, and depression. More than half of pregnancy-related deaths occur in the 12-month postpartum period, and 12 percent occur after six weeks postpartum.

The Department Health reported, pregnancy-related mortality ratio for New Mexico is 25.8 deaths per 100,000 births (2015-2018), compared to 17.3 deaths per 100,000 births for the United States overall (2017).

The New Mexico Maternal Mortality Review Committee case reviews for 2015-2018 included 25 pregnancy-related deaths, of which 32 percent occurred 0-42 days postpartum, and 36 percent occurred 43-365 days postpartum. The most common causes of death were mental health conditions, cardiac conditions, embolism, and hemorrhage. Substance use disorder (SUD) contributed to 40 percent of pregnancy-related deaths. Mental health conditions contributed to 36 percent of pregnancy-related deaths. Twenty percent of pregnancy-related deaths were suicides.

DOH also reported 80 percent of pregnancy-related deaths were judged to be preventable.

KK/acv