

HOUSE JOINT MEMORIAL 13

**44TH LEGISLATURE - STATE OF NEW MEXICO - SECOND SESSION,
2000**

INTRODUCED BY

Terry T. Marquardt

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

A JOINT MEMORIAL

REQUESTING THE DEPARTMENT OF HEALTH TO ESTABLISH A TASK FORCE
TO DEVELOP A CRITICAL ACCESS COMMUNITY HEALTH CARE PROVIDER
DESIGNATION.

WHEREAS, New Mexico provides and funds multiple programs
aimed at improving the distribution of health professionals
in rural and underserved areas of the state; and

WHEREAS, all or part of thirty-one of our thirty-three
counties remain classified as medically underserved; and

WHEREAS, the capacity of most rural areas of New Mexico
to sustain adequate health care systems is limited, as
indicated by the facts that twenty-one of our counties are
designated "frontier" with populations of fewer than seven
persons per square mile and that at least twenty percent of
our population is without health insurance; and

WHEREAS, there is a wide variety of health service

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1 delivery systems, including sole practitioners, private group
2 practices, community health clinics, hospital-based clinics
3 and various state public health services; and

4 WHEREAS, a survey of health professionals indicates a
5 high degree of variability in factors to consider in
6 recruiting and retaining those types of practitioners in
7 rural and underserved areas, including practitioners'
8 satisfaction with their working circumstances; and

9 WHEREAS, other states have effectively utilized a system
10 of designating certain health care providers as critical for
11 health care service access and have provided them with
12 various benefits to stabilize the provider community in those
13 rural and underserved areas;

14 NOW, THEREFORE, BE IT RESOLVED BY THE LEGISLATURE OF THE
15 STATE OF NEW MEXICO that the primary care bureau of the
16 department of health establish a task force to develop
17 operational aspects of a critical access community health
18 care provider designation in order to improve the continuing
19 access to health care in rural and underserved areas; and

20 BE IT FURTHER RESOLVED that the task force consider
21 various eligibility criteria, including the designation of
22 primary care health professionals as critical access
23 community health care providers in order to promote the most
24 efficient and cost-effective means of maintaining a stable
25 delivery system; and

BE IT FURTHER RESOLVED that the task force investigate
every avenue for providing benefits, incentives and

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1 assistance, including state-funded recruitment and retention
2 initiatives, indigent-care reimbursement, tax deductions and
3 exemptions, differential reimbursement under state programs
4 and contracts and special consideration by contractors
5 providing health care in rural and underserved areas; and

6 BE IT FURTHER RESOLVED that careful consideration be
7 given to requirements and responsibilities of providers in
8 exchange for designation as critical access community health
9 care providers, including services provided to medicaid
10 recipients and medically indigent persons; and

11 BE IT FURTHER RESOLVED that attention be paid to the
12 integration and coordination of a critical access community
13 health care provider system with other state recruitment and
14 retention efforts and programs aimed at improving geographic
15 access to health services; and

16 BE IT FURTHER RESOLVED that the task force recommend
17 methods of measuring the effectiveness and impact of such a
18 program; and

19 BE IT FURTHER RESOLVED that the task force coordinate
20 with the New Mexico health policy commission and other health
21 planning entities in its work; and

22 BE IT FURTHER RESOLVED that the department of health
23 report its findings to the legislative health and human
24 services committee by October 1, 2000; and

25 BE IT FURTHER RESOLVED that copies of this memorial be
transmitted to the secretary of health, the New Mexico health
policy commission and the legislative health and human

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1 services committee.

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