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## FISCAL IMPACT REPORT

SPONSOR: Luna DATE TYPED: 02/14/01 HB 63  
 SHORT TITLE: End-State Renal Disease Services SB \_\_\_\_\_  
 ANALYST: Esquibel

### APPROPRIATION

Appropriation Contained		Estimated Additional Impact		Recurring or Non-Rec	Fund Affected
FY01	FY02	FY01	FY02		
	\$ 96.0			Recurring	General Fund

(Parenthesis ( ) Indicate Expenditure Decreases)

### SOURCES OF INFORMATION

Department of Health (DOH)  
 NM Health Policy Commission (HPC)

### SUMMARY

#### Synopsis of Bill

House Bill 63 appropriates \$96.0 to DOH to provide medication and transportation assistance for people with end-stage renal disease who are receiving dialysis. A maximum expenditure per patient per year would be set at \$300.

#### Significant Issues

The bill caps spending per patient at \$300 annually. This amount of funds would provide an average dialysis patient with approximately one month of transportation and care out of a total population of approximately 2000 New Mexicans on dialysis.

### FISCAL IMPLICATIONS

House Bill 63 appropriates \$96.0 in general fund for FY02. This is a recurring expense. Any unexpended or unencumbered balances would revert to the general fund.

### ADMINISTRATIVE IMPLICATIONS

DOH indicates the bill is unclear if the agency should provide the services directly or contract for them. Also, DOH would need to work with dialysis centers to determine the patients who would most benefit from the program.

**OTHER SUBSTANTIVE ISSUES**

In 1972, Congress allowed dialysis and renal transplantation to be covered by Medicare.

**POSSIBLE QUESTIONS**

1. Is the intent of the bill to have DOH utilize its existing purchasing arrangements to provide medications to dialysis patients?
2. Would DOH provide vouchers to be presented at a pharmacy or would it reimburse a portion of the cost of the medications?
3. How would transportation assistance be provided?
4. Could any of the funds in the bill be matched with Medicaid for Medicaid eligible participants?

RAE/ar