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FISCAL IMPACT REPORT

SPONSOR: Cisneros DATE TYPED: 2/20/01 HB _____
 SHORT TITLE: Health Services for Indigent SB 548
 ANALYST: Esquibel

APPROPRIATION

Appropriation Contained		Estimated Additional Impact		Recurring or Non-Rec	Fund Affected
FY01	FY02	FY01	FY02		
	\$ 500.0			Recurring	GF

(Parenthesis () Indicate Expenditure Decreases)

Relates to Appropriation in The General Appropriation Act under the Rural Primary Health Care Act.
and, SB82, SB480; Duplicates HB720.

SOURCES OF INFORMATION

NM Health Policy Commission (HPC)
 LFC Files

Department of Health (DOH) did not respond
 Human Services Department (HSD) did not respond

SUMMARY

Synopsis of Bill

Senate Bill 548 appropriates \$500.0 from the general fund to DOH to leverage federal funds of the health resources and services administration (HRSA) to provide diabetes, depression and hypertension services to indigent patients in New Mexico. Services shall include coordinated health care, education, outreach, transportation, and evaluation and measurement of the results of the care provided.

Significant Issues

HPC indicates that, according to HRSA, only one program in NM receives funding from this demonstration project called the Community Access Program (CAP), and that is the Sangre de Cristo Community Health Partnership in El Rito, NM (Rio Arriba county). Another CAP program in central New Mexico is due to begin its award on March 1, 2001.

The Sangre de Cristo Community Health Partnership was awarded CAP funding of \$1,224.0 to facilitate a population-based healthcare management model to improve outcomes from chronic medical conditions that cause high morbidity to the target population.

FISCAL IMPLICATIONS

The appropriation of \$500.0 contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of FY02 shall revert to the general fund.

The appropriation contained in the bill is intended to be a “good faith effort” by the state to secure a second year of federal CAP funds. The first year of the federal demonstration project did not require any state funding. The federal funds are from the U.S. Department of Health and Human Services, and the state is not obligated to match federal dollars contributed by the CAP. However, the state may be showing HRSA that it considers the CAP program to be useful, important and worthy of funding by providing state funds for the CAP program. The federal funds are scheduled to end in a year or two, and then the state will have to entirely support funding for this program.

The \$500.0 appropriation in the bill could be used to leverage approximately \$1,500.0 in federal Medicaid funds.

HB2/SB98, General Appropriation Acts, contain approximately \$10 million in general fund to support the Rural Primary Health Care Act services which provide some similar services to those provided for in SB548.

RELATIONSHIP

Senate Bill 548 duplicates HB720, Health Services for Indigent; and relates to SB82, Amend Indigent Hospital and County Healthcare, and SB480, Maximize Federal Matching Funds for Health.

RAE/njw