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FISCAL IMPACT REPORT

SPONSOR:	Aragon	DATE TYPED:	02/07/02	HB	
	E: Prescriptive Authorit	y to Psychologists		SB	231
	3		ANALY	ST:	Sandoval

APPROPRIATION

Appropriation Contained		_		Recurring or Non-Rec	Fund Affected
FY02	FY03	FY02	FY03		
		\$7.0		Recurring	Other State Funds

(Parenthesis) Indicate Expenditure Decreases)

REVENUE

II I		Subsequent Years Impact	Recurring or Non-Rec	Fund Affected
FY02	FY03			
	\$4.5		Recurring	Other State Funds

(Parenthesis () Indicate Revenue Decreases)

Duplicates HB 170

SOURCES OF INFORMATION

LFC files

Responses Received
Health Policy Commission
New Mexico State Board of Psychologist Examiners
Attorney General
Department of Health

SUMMARY

Synopsis of Bill

Senate Bill 231 adds prescribing psychologists to the definition of "practitioners" under the New Mexico Drug, Device and Cosmetic Act and Controlled Substance Act.

This bill also allows licensed psychologists to hold a conditional prescription certificate and prescribe psychotropic medication under the supervision of a licensed physician if the psychologist meets certain additional educational, supervision and examination requirements. After practicing successfully under the conditional prescription certificate for 2 years, the licensee can apply for a prescriptive certificate and practice independently. When prescribing psychotropic medication, both the prescribing psychologist and/or the psychologist with a conditional prescriptive certificate shall maintain a collaborative relationship with a health care practitioner who oversees the patient's general medical care.

FISCAL IMPLICATIONS

The New Mexico State Board of Psychologist Examiners (the board) recommends adding an additional board member who has advanced training in psychopharmacology to the State Board of Psychologists Examiners to assist with the review of the application procedures, rules and regulations. If such a candidate is not added to the board, training for board members and/or the board administrator is advisable. This training would cost \$2.0.

The drafting of rules and regulations, holding public hearings, publishing proposed rules, final adoption of rules and regulations and printing costs will come to approximately \$3.0.

Appointing a subcommittee to work and review applications of prescribing psychologists, and complaints, if any will cost \$2.0.

The board will need to be given additional budget authority of \$7.0 to use fund balances to pay for these additional costs. The board's estimated fund balance for FY03 is \$158.4.

If the bill is successful, the estimated revenue will be approximately \$4.5 annually. This increase in revenue projection is based upon the current application fee of \$0.3 and an estimate of approximately 15 candidates who will qualify under the conditional prescription certificate ($$0.3 \times 15 = 4.5).

CONFLICT/DUPLICATION/COMPANIONSHIP/RELATIONSHIP

Senate Bill 231 duplicates House Bill 170

OTHER SUBSTANTIVE ISSUES

- Psychologists who become licensed to prescribe psychotropic drugs may have to seek licensure with the Board of Pharmacy depending on the scope of their practice or if they open a clinic.
- The New Mexico Health Policy Commission believes this bill may allow hospitals and mental health facilities, particularly in rural areas, more staffing flexibility where recruitment of psychiatrists is difficult and may also bring cost savings to patients.
- There is currently no mechanism for the New Mexico Board of pharmacy to register psychologists to prescribe psychotropic medication and a review of the Board of Pharmacy regulations will be necessary to implement the provisions of this bill.

POSSIBLE QUESTIONS

- 1. Will psychologists trained in prescribing psychotropic medication increase accessibility to mental health care?
- 2. Will there be significant cost savings to New Mexico residents?
- 3. Will the required training be sufficient in scope, content and clinical experience to insure quality of care that is currently provided by other practitioners with prescribing authority?
- 4. Will there be more options to patients in rural areas or areas where physician shortage exists?

JFS/ar/njw