NOTE: As provided in LFC policy, this report is intended only for use by the standing finance committees of the legislature. The Legislative Finance Committee does not assume responsibility for the accuracy of the information in this report when used in any other situation.

Only the most recent FIR version (in HTML & Adobe PDF formats) is available on the Legislative Website. The Adobe PDF version includes all attachments, whereas the HTML version does not. Previously issued FIRs and attachments may be obtained from the LFC's office in Suite 101 of the State Capitol Building North.

FISCAL IMPACT REPORT

SPONSOR:	Lo	pez	DATE TYPED:	02/08/02	НВ	
SHORT TITLE	Ξ: _	State Health Care Org	ganization		SB	SJM 42/aSRC
ANALYST:				YST:	Wilson	
			A DDD ODDI A T	CLON		

APPROPRIATION

Appropriation Contained		_		Recurring or Non-Rec	Fund Affected
FY02	FY03	FY02	FY03		
	NFI				

SOURCES OF INFORMATION

Health Policy Commission (HPC) Children, Youth and Families Department (CYFD) LFC files

SUMMARY

Synopsis of SRC Amendment

The Senate Rules Committee Amendment requests the study committee to also "assess the operations, services and eligibility of existing health programs and options to enhance the utilization of public resources to further the state health policy" pursuant to current law.

Synopsis of Original Bill

Senate Joint Memorial 42 directs the legislative health sub-committee or appropriate interim committee to study and assess the reorganization of state agencies and their responsibilities relating to the administration, funding and delivery of health care. The findings must be presented to the Legislative Health and Human Services Committee and the Legislative Finance Committee by October 1, 2002.

Significant Issues

Medical inflation continues to outpace general inflation both nationally and statewide.

The state expends a considerable portion of its annual budget on health care programs.

Senate Joint Memorial 42/aSRC -- Page 2

The state has fallen short of its statutory policy "to promote optimal health, to prevent disease, disability and premature death, to improve the quality of life to assure that basic health services are available, acceptable and culturally appropriate, regardless of financial status".

Various interim and statutory committees have expressed concern about the state's financial accountability and statutory and regulatory compliance with federal and state health programs.

Advocates for health care consumers, disabled and elderly persons, children, poor families and other disenfranchised populations have similarly expressed concerns about the administration of federal and state health care programs.

The administration of health care programs has become increasingly complex and expensive.

Numerous states have reorganized their executive departments responsible for providing health care and related human needs services to ensure appropriate and accountable oversight of state expenditures.

New Mexico needs a clear delineation of fiscal and policy responsibilities for health care administered, funded and delivered by the state.

FISCAL IMPLICATIONS

The legislative and executive agencies involved in this study will have to it with existing resources.

ADMINISTRATIVE IMPLICATIONS

The legislative and executive agencies involved in this study will have to utilize existing staff and resources

RELATIONSHIP

Relates to:

SJM 5, State Government Organization Study SJM 21, Cabinet Level Department for Medicaid HJM 8, State Government Organizational Study

DW/ar