

Fiscal impact reports (FIRs) are prepared by the Legislative Finance Committee (LFC) for standing finance committees of the NM Legislature. The LFC does not assume responsibility for the accuracy of these reports if they are used for other purposes.

Current FIRs (in HTML & Adobe PDF formats) are available on the NM Legislative Website (legis.state.nm.us). Adobe PDF versions include all attachments, whereas HTML versions may not. Previously issued FIRs and attachments may also be obtained from the LFC in Suite 101 of the State Capitol Building North.

FISCAL IMPACT REPORT

SPONSOR Stewart **DATE TYPED** 1/27/04 **HB** HJM 19

SHORT TITLE Study Sexual Assault Survivor Hospital Data **SB** _____

ANALYST Dunbar

APPROPRIATION

Appropriation Contained		Estimated Additional Impact		Recurring or Non-Rec	Fund Affected
FY04	FY05	FY04	FY05		
			Indeterminate		

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From

Department of Health (DOH)

Health Policy Commission (HPC)

SUMMARY

Synopsis of Bill

House Joint Memorial 19 proposes a requirement that DOH conduct a survey of hospitals, including urgent care facilities, that provide emergency care to sexual assault survivors, and that DOH collect data on the number of sexual assault survivors treated by each facility. The survey would also include data on the number receiving recommended treatments, and the number receiving emergency contraception. HJM 19 also would require that people who provide emergency services to sexual assault survivors receive appropriate training to better serve those patients. HJM 19 recommends that the Department of Health adopt rules to implement the provisions of the Sexual Assault Survivors Emergency Care Act enacted in 2003.

Significant Issues

Two significant issues in HJM 19 are related to surveillance. These are 1) collecting data from hospitals and urgent care centers on the number of sexual assault survivors treated and, of these, the number who received emergency contraception service through a survey to be conducted by November 2004; and 2) that the department implement rules for the Sexual Assault Survivors Emergency Care Act which would include a surveillance component.

NM Health Policy Commission administers the Health Information and Alliance Act as well as the Hospital Inpatient Discharge Database (HIDD) and therefore, the responsibility for the survey should appropriately reside with the commission. HPC may have resources and staff prepared to implement provisions of the Memorial. The HPC purpose is to plan and monitor implementation of the state's health policy, obtain and evaluate information regarding the availability and accessibility of health services.

FISCAL IMPLICATIONS

The memorial requests the DOH to establish such a tracking system based upon the data collection. This would have a significant resource requirement, which is not funded in this bill. Developing a tracking system would also imply the collection of client specific information, which would have significant HIPAA implications. If the DOH were to establish such a system, financial and staff resources need to be provided as well as a reasonable time frame of at least 24 months to complete the implementation of the system.

HPC may have staff time and database resources to fulfill the provisions of the Memorial.

ADMINISTRATIVE IMPLICATIONS

The data collection outlined in the Memorial aligns with the statutory duties of the NM Health Policy Commission that is responsible for administering the Health Information Act. However, data collection by the hospitals or urgent care centers is currently not being done in a consistent manner so that they can be compiled on a statewide basis. However, DOH has limited staff and resources to conduct survey data compilation and tracking.

TECHNICAL ISSUES

DOH suggests adding the NM Health Policy Commission to the provisions of this bill given that HPC is statutorily assigned with administering the Health Information Act and administers the Hospital Inpatient Discharge Database (HIDD).

HPC is concerned that if a patient were informed and offered emergency contraception, but did not request it, the survey data would not capture this information.

OTHER SUBSTANTIVE ISSUES

The memorial requires the department to promulgate regulations to implement the Sexual Assault Survivors Emergency Care Act. The department (DHI-HFL&C) has drafted additions to its hospital regulations to address the requirements of the Act. The public hearing on the proposed regulatory requirements is scheduled for March 2004. When the regulations go into effect DHI's Health Facility Licensing and Certification Bureau (HFL&C) will be investigating complaints as the Act requires and will be tracking those complaints in its complaint database.

The initial findings of this need for a hospital emergency department surveillance system is outlined in the report to the legislature under House Joint Memorial 52 from the first session of the 46th legislature in 2003; the report on this memorial was presented to legislature's health and human services committee on October 1, 2003.

HPC indicates:

- According to one study of the reported sexual assaults in New Mexico, four percent (4%) resulted in pregnancy.
- In a national study, thirty-four percent (34%) of rape survivors reported concerns about becoming pregnant.

(Source: The Nature of Sexual Assault in New Mexico II (1996- 1997))

BD/sb:yr