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FISCAL IMPACT REPORT

SPONSOR _	Harrison	DATE TYPED	2/12/04	HB	HJM 87
SHORT TITL	E Long-Term Care Ser	vices for Native Am	nericans	SB	

ANALYST Dunbar

APPROPRIATION

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

SOURCES OF INFORMATION

LFC Files

<u>Responses Received From</u> Department of Health (DOH) Human Services Department (HSD)

SUMMARY

Synopsis of Bill

HJM 87 requests that the Department of Health, the Human Services Department and the Aging and Long Term Services Department provide special respect for Native American elders in the delivery of long-term care services to aging persons. Specifically the bill requests the following:

- Long term care programs be designed and provided with cultural considerations specific to Native American populations,
- □ Long term care services, to the degree possible, be provided by qualified and trained Native Americans, who speak the native language of the care recipient, and
- □ The respective Departments each take into consideration differences, including cost differences, between services provided in urban and rural environments and especially those various factors affecting delivery of services in rural areas.

Significant Issues

HJM 87 addresses the need for cultural competency in the provision of long term care services to Native American populations.

FISCAL IMPLICATIONS

HJM 87 resolved that to the extent possible, services be provided by Native Americans qualified and trained in personal care who speak the language of the care recipient. The DOH would need to actively recruit and retain staffs trained in personal care who speak the language of the care recipient. Prior to this, the DOH would need to survey the current number of staff trained in these issues. It is difficult to quantify the cost for such a survey at this time.

ADMINISTRATIVE IMPLICATIONS

The administrative impact is unknown. The Public Health Division currently has a program on cultural competency.

TECHNICAL ISSUES

HJM 87 indicates the DOH has a long-term care and restorative services division.

OTHER SUBSTANTIVE ISSUES

DOH reports that in the two long-term care facilities, minimal services are provided to Native Americans. This is not because of exclusion of Native Americans; it is because a minimum number of individuals request services through these facilities. However, 20% of those served through Yucca Lodge are Native American. In addition, Yucca Lodge has verbal agreements with several tribes to provide services and has been trying to enter into a MOU to reserve bed days for detoxification purposes for the Jemez Pueblo.

There are a minimal number of Native American staff (less than 1%) at either the New Mexico State Veterans Home or Fort Bayard Medical Center primarily due to where these facilities are located and the availability of staff who apply to work at these locations. Given the number of tribal languages spoken in New Mexico, DOH indicates it would be very difficult to comply with the requirement.

However, DOH is required under regulation to assess and accommodate cultural needs and the department is making every attempt possible to comply with the requirement.

AMENDMENTS

Change the DOH long-term care and restorative services division to the long-term care division.

BD/lg:dm