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FISCAL IMPACT REPORT

ORIGINAL DATE 1/28/06

SPONSOR Lopez LAST UPDATED _____ HB _____

SHORT TITLE School-Based Oral Health Care Clinics SB 394

ANALYST Lewis

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Non-Rec	Fund Affected
FY06	FY07		
	200.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

Duplicates HB 294.

Relates to SB 425 (Rural Portable Dental Clinic Services).

Relates to SB 539 (Oral Health Initiatives Program).

SOURCES OF INFORMATION

LFC Files

Responses Received From

Department of Health (DOH)

Human Services Department (HSD)

Public Education Department (PED)

SUMMARY

Synopsis of Bill

Senate Bill 394 appropriates \$200,000 from the general fund to the Department of Health for expenditure in fiscal years 2007 and 2008 to support development of up to three pilot sites designed to increase access to oral health care services in school-based health centers for students not served or only minimally served currently.

FISCAL IMPLICATIONS

The appropriation of \$200,000 contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of fiscal year 2008 shall revert to the general fund.

According to the Human Services Department (HSD), this bill does not limit provision of services to students based on income, and it is likely that some of the students served at the pilot sites will be eligible for the federal Medicaid match.

SIGNIFICANT ISSUES

According to the Department of Health (DOH), this bill was proposed by the Governor's Oral Health Council, and the executive budget recommendation includes \$150,000 for this purpose.

DOH plans to establish 68 school-based health centers (SBHCs) by the end of fiscal year 2006. SBHCs are an effective way to improve access to health, including dental health, and social support services to children and their families. Currently, there are no SBHCs that provide dental services. DOH notes:

- that the burden of untreated care falls heaviest on children from low-income families;
- that oral health is a part of overall health and impacts a child's ability to learn; and
- that pain from untreated tooth decay is the number one reason for missed school days.

According to the DOH, the Office of Dental Health would lead the development of the pilot sites in partnership with the Office of School Health.

HSD notes that the creation of pilot sites to provide dental services in school-based health centers will help ease the shortage of dental care in underserved areas, and that the burden of untreated caries falls heaviest on children from low-income families. HSD adds that the addition of an oral health component in SBHCs will assist in the effort to reduce childhood caries and improve the overall health status of our children.

The Public Education Department (PED) is concerned that it may be difficult to find providers for oral health care in the SBHCs.

ADMINISTRATIVE IMPLICATIONS

According to DOH, administrative implications would include contract development and oversight and could be managed within current resources.

ML/nt