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FISCAL IMPACT REPORT

ORIGINAL DATE 2/13/2007
LAST UPDATED 3/11/2007

SPONSOR SEC HB _____

SHORT TITLE Health Program Cultural Competence Education SB 600/SECS

ANALYST Moser

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Non-Rec	Fund Affected
FY07	FY08		
	NFI		

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From

NM Department of Higher Education (HED)
 NM Medical Board
 Department of Health (DOH)
 Office of Indian Affairs

SUMMARY

Synopsis of Bill

The Senate Education Committee substitute for Senate Bill 600 would create a task force on cultural competence that shall study and make recommendation on specific cultural competence curricula for each health-related education fields offered in New Mexico's public post-secondary educational institutions. Findings shall be made in a final report to the governor, legislature and the presidents of the public post-secondary educational institutions by December 15, 2007.

SIGNIFICANT ISSUES

According to the New Mexico Medical Review Association (NMMRA) cultural competence is the ability of systems to provide care to patients with diverse values, beliefs, and behaviors including tailoring delivery of care to meet patients' social, cultural, and linguistic needs. The ultimate goal is a health care system and workforce that can deliver the highest quality of care to every patient, regardless of race, ethnicity, cultural back ground, or English proficiency."

According to this Act, culturally competent health curricula should include the following:

- Cross-cultural communication
- Culturally and linguistically appropriate health policy consideration
- Exploration of health beliefs and explanatory models
- Culturally competent health care delivery
- Health disparities, privilege, and equity factors in the health system
- Culturally and linguistically competent care supported by policy, administration, and practice

OTHER SUBSTANTIVE ISSUES

HED points out that NMMRA and New Mexico's Medicare Quality Improvement Organization in 2005 launched an initiative designed to eliminate health care disparities by helping primary care physicians serving Medicare beneficiaries to assess and improve their skills in providing culturally and linguistically competent care for diverse and changing New Mexico populations.

The Office of Minority Health Resources Center (OMHRC) has created national standards on Culturally and Linguistically Appropriate Services (CLAS). The above initiative has adopted these standards. The 14 standards are organized by themes: culturally competent care (standards 1-3), language access services (standards 4-7), and organizational supports for cultural competence (standards 8-14).

These standards could be used as a framework for structuring a series of course work in New Mexico so that this issue is approached from both the educational and working professional angles.

GM/mt