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FISCAL IMPACT REPORT

ORIGINAL DATE 02/17/09

SPONSOR Gardner LAST UPDATED _____ HB 579

SHORT TITLE Pre- & Post-Deployment Brain Screening SB _____

ANALYST Haug

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Non-Rec	Fund Affected
FY09	FY10		
	\$100.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From

Higher Education Department (HED)
 Department of Veterans Services (VSD)
 Developmental Disabilities Planning Council (DDPC)

No Responses Received From

University of New Mexico (UNM)
 Department of Military Affairs (DMA)

SUMMARY

Synopsis of Bill

House Bill 579 appropriates \$100.0 from the general fund to the Board of Regents of the University of New Mexico for the school of medicine to administer a program to screen national guard personnel for brain injury both pre and post deployment to Afghanistan, Iraq and other areas of armed conflict.

FISCAL IMPLICATIONS

The appropriation of \$100.0 contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of Fiscal Year 2010 shall revert to the general fund.

SIGNIFICANT ISSUES

The HED states that this request was not submitted by UNM to the HED for review and is not included in the Department's funding recommendation for FY10.

The LFC Appropriation Recommendations, Volume II, pages 364-365 states:

The committee has concerns about the growth of research and public service projects within the higher education budget, as well as the alignment of these projects with state goals and strategic plans. The committee also continues to have significant concerns about accountability and performance outcomes for these projects.

The committee recommendation reduces funding included in the HED request by varying levels from FY09 funding amounts for research projects, public service projects and P-20 pipeline projects focusing on students.

With respect to special projects, higher education institutions advanced 114 proposals for new projects and expansions at a total general fund cost of \$54 million during the HED budget request process in fall 2008.

According to the December 2008 revenue estimate, FY10 recurring revenue will only support a base expenditure level that is \$293 million, or 2.6 percent, less than the FY09 appropriation. All appropriations outside of the general appropriation act will be viewed in this declining revenue context.

The Executive Budget in Brief notes that over the years more than 300 RPSPs have been created, accounting for a large portion of institution budgets. The current RPSPs were reviewed while considering the relevance of the project to the core mission of the institution, the community benefit and the outcomes associated with each project. (Budget in Brief and Policy Highlights, P 9-10.)

The HED states that:

The UNM School of Medicine and the New Mexico Veterans Affairs Health Care System (NMVAHCS) work jointly to provide a service-learning component to doctors in training. HB579 is an appropriation to service National Guard Personnel. New Mexico Veterans Affairs Health Care System is federally funded and provides 100% of needed services to post-deployed military personnel for 3-5 years after military personal return to the United States.

Research is currently being conducted to judge the exposure of risk and effects of brain injury both pre- and post-deployment. Post-traumatic Stress Disorder (PTSD) is of particular interest as it is the most commonly suffered among returning military personnel.

Rex M. Swanda, Ph.D., Clinical Neuropsychologist, directs the Clinical Neuropsychology Consultation Service at NMVAHCS. He also holds a faculty appointment at UNM Department of Psychiatry. He stated that the lasting effects of mild (defined as losing consciousness for less than ½ hour) cognitive brain trauma is relevant to a small percentage of returning military personnel. PTSD is much more common.

According to the VSD, The Department of Defense currently administers a standard, objective test that measures a soldier's reaction time, short-term memory, as well as fine motor skills. The test is then administered post deployment and compared to the pre-deployment test to determine if there is any change in fine motor skills, short term memory, or reaction time. This test allows for a quicker diagnosis of traumatic brain injury and can get into treatment immediately. Traumatic brain injury has become the most common combat injury suffered by soldiers fighting in Iraq and Afghanistan.

The DDPC notes that should the bill not pass, mild and moderate brain injuries may not be detected and people will return to lives where they may not be able to function as independently and productively pre injury. Their symptoms could replicate Post Traumatic Stress Disorder (PTSD) and while the symptoms are similar the treatment is very different. Correct diagnosis and treatment is vital to the recovery process for brain injury. Early detection and treatment increase the likelihood of a better recovery.

GH/svb