

HOUSE BILL 466

54TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2019

INTRODUCED BY

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Pursuant to House Rule 24-1, this document incorporates amendments that have been adopted prior to consideration of this measure by the House. It is a tool to show the amendments in context and is not to be used for the purpose of amendments.

AN ACT

RELATING TO HEALTH; ESTABLISHING A MALNUTRITION COMMISSION TO
STUDY THE IMPACT OF MALNUTRITION STATEWIDE AS IT RELATES TO
HEALTH CARE, EDUCATION AND PREVENTION.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

**SECTION 1. TEMPORARY PROVISION--CREATING A MALNUTRITION
COMMISSION--MEMBERSHIP--DUTIES.--**

A. The secretary of health shall convene a
"malnutrition commission" to identify goals and benchmarks to
develop home- or community-based programs to reduce the
incidence of malnutrition in the state, improve malnutrition

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care statewide and reduce the incidence of medical or health complications associated with malnutrition.

B. By August 13, 2019, the governor shall appoint the following members to the commission:

(1) a representative from the department of health;

(2) a representative from the aging and long-term services department;

(3) a representative from the New Mexico department of agriculture;

(4) a representative from the public education department;

(5) a representative from the human services department;

(6) a representative from the Indian affairs department;

(7) a representative from a publicly funded health care agency that makes purchases pursuant to the Health Care Purchasing Act;

(8) a representative from the university of New Mexico health sciences center;

(9) a physician licensed pursuant to the Medical Practice Act or the Osteopathic Medicine Act;

(10) a researcher employed by an accredited university or college with expertise in the field of

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gerontology or nutrition;

(11) an individual who represents hospitals or integrated health systems;

(12) two registered nurses licensed pursuant to the Nursing Practice Act who provide home health care;

(13) a dietitian whose current practice includes the older adult population;

(14) a dietitian whose current practice includes working in an early childhood program or public school program;

(15) a dietitian who represents an organization in the state that advocates for the dietetics profession and promotes nutrition, health and well-being;

(16) representatives from each of the New Mexico area agencies on aging;

(17) a researcher employed by an accredited college or university with expertise in issues related to childhood nutrition; HHC→and←HHC

(18) a representative from the fast food industry HHC→. ; and←HHC

HHC→(19) a representative from a social services agency that focuses on hunger or food.←HHC

C. An appointed member shall hold office until the commission ceases to exist. A vacancy shall be filled in the same manner as the original appointment. The secretary of

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health or the secretary's designee shall serve as chair of the commission.

D. A member shall serve without compensation except:

(1) to the extent that serving on the commission is considered part of the member's regular duties of employment; and

(2) public members may receive per diem and mileage pursuant to the Per Diem and Mileage Act.

E. The commission shall meet at the call of the chair but at a minimum of three times prior to submitting its report, recommendations and findings to the governor.

F. Two-thirds of the members shall constitute a quorum for the conduct of business.

G. The commission shall:

(1) study the impact of malnutrition on older adults and children in all health care settings in this state;

(2) investigate effective strategies for reducing the incidence of malnutrition among older adults and children;

(3) monitor the influence of malnutrition on the health care costs and outcomes, quality indicators and quality of life measures of older adults and children;

(4) develop strategies for improving data collection and analysis regarding malnutrition risks, health

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care costs and protective factors for older adults and children;

(5) develop strategies for maximizing the dissemination of proven, effective malnutrition prevention intervention models, including community nutrition programs, medical nutrition therapy and oral nutrition supplements;

(6) identify evidence-based strategies that raise public awareness of malnutrition among older adults and children, such as educational materials, social marketing and statewide campaigns;

(7) identify evidence-based malnutrition prevention intervention models, including community nutrition programs, that reduce the rate of malnutrition among older adults and children and reduce the rate of rehospitalization due to conditions caused by malnutrition, and identify barriers to those intervention models;

(8) identify models for integrating the value of malnutrition care into health care quality evaluations across health care payment models;

(9) examine the components and key elements of malnutrition prevention intervention initiatives, consider their applicability in this state and develop strategies for testing, implementation and evaluation of the initiative; and

(10) prepare a report of its findings and recommendations.

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H. By June 14, 2020, the commission shall:

(1) submit a copy of its findings and recommendations to the governor; and

(2) report its findings and recommendations to the legislative health and human services committee.

I. The commission shall cease to exist upon reporting its findings to the legislative health and human services committee.

J. For the purposes of this section:

(1) "commission" means the malnutrition commission;

(2) "dietitian" means an individual who is licensed pursuant to the Nutrition and Dietetics Practice Act and who engages in nutrition or dietetics practice; and

(3) "older adult" means an individual who is at least fifty years of age or older.