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FISCAL IMPACT REPORT

1/28/2020
ORIGINAL DATE 2/3/2020
LAST UPDATED 2/9/2020 **HB** _____

SPONSOR Padilla

SHORT TITLE Task Force of Project Echo **SJM** 2/aSRC/aSPAC

ANALYST Esquibel

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY20	FY21	FY22	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
Total		See Fiscal Implications			Nonrecurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

Relates to Appropriation in the General Appropriation Act

SOURCES OF INFORMATION

LFC Files

Responses Received From

Corrections Department (NMCD)

Higher Education Department (HED)

University of New Mexico Health Sciences Center (UNMHSC)

SUMMARY

Synopsis of SPAC Amendment

The Senate Public Affairs Committee amendment to Senate Joint Memorial 2 as amended by the Senate Rules Committee adds that staff from the Legislative Finance Committee be added to the membership of the task force to study the contributions of Project ECHO to determine other health disparities the program could address and to identify other sources of funding for the program.

Synopsis of SRC Amendments

The Senate Rules Committee (SRC) amendments to SJM2 specify the task force meetings comply with the Open Meetings Act, and add that the task force reports its findings and recommendations to the Legislative Finance Committee in addition to the Legislative Health and Human Services Committee.

Synopsis of Original Bill

Senate Joint Memorial 2 (SJM2) resolves that the secretary of the Human Services Department (HSD) convene a task force to study the contributions of the Extension for Community Healthcare Outcomes program (Project ECHO) to determine other health disparities the program could address and to identify other sources of funding for the program.

SJM2 further resolves the task force be composed of representatives from the Human Services Department, Department of Health, Corrections Department, Public Education Department, Early Childhood Education and Care Department, and the University of New Mexico Health Sciences Center, including representatives from Project ECHO.

SJM2 further resolves the task force report its findings and recommendations to the Legislative Health and Human Services Committee (LHHS) by November 1, 2020, and that copies of the memorial be transmitted to the secretary of HSD, the board of regents of UNM, and the chair of LHHS.

FISCAL IMPLICATIONS

Senate Joint Memorial 2 does not include an appropriation. The task force would recommend other sources of funding for Project ECHO.

UNMHSC indicates it is unknown how much staff and faculty effort would be required to support the task force. The Corrections Department indicates it could absorb the administrative impact of attending the proposed task force without any additional funding. The Higher Education Department indicates there could be administrative costs associated with the task force.

HED indicates Project ECHO received \$2.256 million in recurring funding in FY20. The funding recommendations from the Legislative Finance Committee and the Executive for Project ECHO for FY21 are flat with the FY20 operating budget.

HED reports Project ECHO has received recurring general fund appropriations for the past 13 years but does not receive continuous federal funding. Identifying other possible funding sources could improve the operational capacity at Project ECHO.

SIGNIFICANT ISSUES

HED indicates Project ECHO's mission is to improve access to, and quality of healthcare statewide by building healthcare capacity for primary care clinicians (PCCs) and community providers to meet requirements for recertification through no-cost continuing medical education (CME) and continuing professional education (CPE). This low-cost, high-impact intervention is accomplished by linking expert inter-disciplinary specialist teams with primary care clinicians (PCCs) through teleECHO programs, in which the experts mentor primary care clinicians and share their expertise via mentoring, guidance, feedback and didactic education.

Primary care clinicians are also afforded the opportunity to participate in research with a university affiliation which enables PCCs to consult with specialists and develop the skills and knowledge to treat patients with both common and complex conditions in their own communities thus reducing travel costs, wait times, and avoidable complications. Additional benefits include

having the ability for PCCs to obtain national certification in certain disease specialties, provides for enhanced self-efficacy and professional satisfaction, as well as reduced professional isolation while becoming local experts and accepting referrals from community clinicians.

Currently, the ECHO Institute at UNMHSC has over 40 teleECHO programs in areas such as diabetes, HIV, opioid and other substance use disorders, tuberculosis, women's health, chronic pain, behavioral and mental health, and rheumatology.

UNMHSC notes the Project ECHO model is now being utilized across the United States and around the world by over 370 partners in 38 countries for over 70 conditions.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

SJM2 relates to Senate Bill 14, Project ECHO Program Funding, which would appropriate \$1 million in general fund to support programing for health professions including programs covering such topics as diabetes care, rheumatology, hepatitis C, bone health, substances use disorder treatment, and pain management.

OTHER SUBSTANTIVE ISSUES

Project ECHO is not “telemedicine” where the specialist assumes the care of the patient, but instead is a guided practice model where the primary care clinician retains responsibility for managing the patient, operating with increasing independence as their skills and self-efficacy grow. Technology is used to leverage scarce healthcare resources in rural and underserved areas of our state with the specialists at academic medical centers in order to provide a higher level of care for the most complex, high-risk patients.

RAE/sb/al/rl/al