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## FISCAL IMPACT REPORT

ORIGINAL DATE 01/23/13

SPONSOR Candelaria LAST UPDATED \_\_\_\_\_ HB \_\_\_\_\_

SHORT TITLE Expand Health Focus Centers SB 97

ANALYST Roberts

### APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Nonrecurring	Fund Affected
FY13	FY14		
	\$2,200.0	Recurring	General Fund

(Parenthesis ( ) Indicate Expenditure Decreases)

### SOURCES OF INFORMATION

LFC Files

#### Responses Received From

Department of Health (DOH)

University of New Mexico Health Sciences Center (UNM HSC)

### SUMMARY

#### Synopsis of Bill

Senate Bill 97 appropriates \$2.2 million dollars from the general fund to the board of regents of the university of New Mexico health sciences center for the purpose of expanding existing FOCUS (family options caring understanding solutions) and Milagro programs and to fund three FOCUS centers of excellence for women at risk and infants at risk of developmental delay.

### FISCAL IMPLICATIONS

The appropriation of \$2.2 million dollars contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of fiscal year 2014 shall revert to the general fund.

### SIGNIFICANT ISSUES

UNM HSC notes that the number of pregnant women affected by substance abuse, particularly prescription opiate abuse, has grown in the state with hospitals and medical practices reporting great challenges providing care. An example is a pregnant woman with medication assisted treatment traveling by Medicaid-funded transportation from the southern part of the state to

Milagro clinics in Albuquerque every other week for prenatal care. The woman receives a comprehensive care as possible when at Milagro, but the issues of management of her delivery, the inpatient care for her child, and the comprehensive care of the mother and infant in their community present even greater challenges. The establishment of three centers of excellence in communities in the state will provide better regional care, greater support of medical and child development practices, and better connection to community in service to pregnant women and children.

The HED adds:

Since 1989 the Milagro program has addressed prenatal substance abuse prevention and treatment. Services begin in pregnancy and continue post-partum. The interdisciplinary treatment team consists of a certified family nurse practitioner and maternal fetal medicine physicians, masters-prepared clinical counselors, registered nurses, consulting psychiatrist/addictionologist, mental health techs and support staff. The Milagro team is knowledgeable regarding the latest evidence based treatment modalities in perinatal, addictions and Mental Health Disorders.

The FOCUS Program, also begun in 1989, at the UNM Center for Development and Disability provides a continuum of interdisciplinary services for families of children aged birth through three years of age who are at risk for or experiencing a developmental delay including: 1) medical challenges such as prematurity, low birth weight, pre-natal exposure to drugs and alcohol, and/or 2) environmental challenges such as family substance abuse, mental illness, family violence or unsupported teen parenting. The program serves families in Bernalillo, Sandoval, Valencia and Torrance Counties.

## **PERFORMANCE IMPLICATIONS**

UNM HSC cites that evaluation of the program appropriation in its first year will detail training and technical support of communities establishing the FOCUS/Milagro centers of excellence. This will include contracting with community agencies for hiring of key staff members, implementing medical home teams, and providing technical assistance and training by UNM HSC.

## **ADMINISTRATIVE IMPLICATIONS**

The UNM HSC reports that the financial management of contracts and technical assistance can be implemented through the centers for development and disability.

## **OTHER SUBSTANTIVE ISSUES**

UNM HSC notes that increased support of the FOCUS/Milagro center of excellence creates the capacity for key faculty to support establishment of physician leadership in communities and to provide technical assistance for medical home models. The outcomes desired – a healthy pregnancy and delivery for women affected by substance abuse – represent the first steps toward improved early childhood outcomes of normally developing and emotionally attached young infants and children.

**ALTERNATIVES**

UNM HSC states that pregnant women with substance abuse disorders and their children will receive standard practice in communities where medical, social services, early childhood, and early intervention providers have indicated challenges in providing comprehensive services.

**WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL**

UNM HSC cites that community medical and early intervention providers identify challenges providing comprehensive care to pregnant women affected by substance use disorders particularly opiate abuse. These challenges have included identification of affected pregnant women in the emergency room setting, lack of community services with patients transported by Medicaid funded van's to Milagro clinics in Albuquerque, transfer of infants with Neonatal Abstinence Syndrome from community hospitals to UNM intensive care units and increased hospital days for management of infants requiring medical treatment for neonatal abstinence syndrome. Additionally, the lack of community medical homes necessary for primary medical care of children and families will result in have difficulties in achieving strong early childhood outcomes.

MIR/bm