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FISCAL IMPACT REPORT

	LAST UPDATED	
SPONSOR Rodriguez/Trujillo	ORIGINAL DATE	2/15/23
	BILL	Senate Bill
SHORT TITLE School-Based Health Centers	NUMBER	397/aSEC
	ANALYST	Klundt

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT* (dollars in thousands)

	FY23	FY24	FY25	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
	No fiscal impact	No fiscal impact	No fiscal impact			

Parentheses () indicate expenditure decreases.

Relates to appropriation in the General Appropriation Act

Sources of Information

LFC Files

Responses Received From Department of Health (DOH)

No Response Received
Public Education Department (PED)

SUMMARY

Synopsis of SEC Amendment to Senate Bill 397

The Senate Education Committee (SEC) amendment to Senate Bill 397 (SB397) inserted "receiving funding from the department" after center of section B.

Synopsis of Original Senate Bill 397

Senate Bill 397 (SB397) creates a new section of the Public Health Act to codify school-based health centers (SBHCs) in state law. The bill directs the Department of Health (DOH) for SBHCs funding, technical assistance, and clinical oversight. SB397 provides rule-making authority to DOH for the establishment of a fund for distribution.

FISCAL IMPLICATIONS

The House Appropriations and Finance Committee (HAFC) substitute for House Bill 2

^{*}Amounts reflect most recent version of this legislation.

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(HB2/HAFCS) includes a recurring increase of \$3 million for the Department of Health (DOH) and \$1.5 million in nonrecurring funds for school-based health centers.

The Department of Health reported no additional fiscal implications.

SIGNIFICANT ISSUES

School-based health centers (SBHCs) are clinics on or near school grounds that provide physical health and behavioral health services to the students at that school. Many SBHCs also see students from other schools in the district, as well as staff and community members. Dental services are also offered at some SBHCs. The 2021-2022 annual status report published by DOH reported SBHCs provided 42,416 visits to 16,144 patients, of which 59 percent of visits were for primary care and 12 percent were for well child checks. DOH also reported 34 percent of visits provided behavioral healthcare.

The Human Services Department (HSD) and Managed Care Organization (MCO) project is an agreement between the Medicaid MCOs, the Department of Health Office of School and Adolescent Health, and the Medical Assistance Division School Health Office. There are 78 SBHCs in New Mexico, and 54 are contracted with Department of Health (DOH) Office of School Adolescence Health (OSAH). The 52 SBHCs contracted with OSAH are allowed to bill Medicaid through this project.

By providing onsite primary, preventive, and behavioral health services to students, SBHCs reduce lost school time, remove barriers to care, promote family involvement, and advance the health and educational success of school-age children and adolescents. SBHCs play an important role in increasing access to primary and behavioral health services among vulnerable, hard-to-reach or at-risk children and adolescents, particularly in rural and other medically underserved areas of New Mexico.

The partnership between the SBHCs and the Medicaid MCOs has allowed for the development and implementation of several best practice clinical guidelines to direct SBHCs in providing Early and Periodic Screening Diagnosis and Treatment Program (EPSDT) health screens; identifying and managing asthma, depression, obesity, and type-2 diabetes; communicating with primary care providers; and working with the MCOs to coordinate and manage recipient care.

DOH also reported 90 percent of SBHCs are sponsored by federally qualified health centers (FQHCs), university medical systems, hospitals, and community medical practices.

KK/rl/hg/rl/ne