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### FISCAL IMPACT REPORT

SPONSOR:	Wilson	DATE TYPED:	02/15/01	HB	
SHORT TITLE: Blue Ribbon Health		Care Task Force		SB	SJM-31
			YST:	Dunbar	

#### **APPROPRIATION**

Appropriation Contained		Estimated Additional Impact		Recurring	Fund
FY01	FY02	FY01	FY02	or Non-Rec	Affected

#### SUMMARY

#### Synopsis of Bill

SJM31 requests that the Legislative Health Subcommittee designate a Blue Ribbon Task Force to assist in assessing existing financing, delivery, organization and performance of health care in New Mexico. Other duties of the task force include:

- Reviewing existing state health care-related information systems to determine the progress of state agency efforts and plans to meet requirements for administrative simplification.
- Obtaining information on the needs and expectations of health care consumers and professionals.

#### Significant Issues

The bill provides for the composition of the task force and

- Conducting studies, interviews and town hall meetings for information gathering.
- Reporting the findings to Legislative Health Subcommittee by November 1, 2001.

HJM 31 appears to duplicate some of the responsibilities of the Health Policy Commission (HPC). The Health Policy Commission statutory authority is to assess health care financing, delivery, organization and performance.

### ADMINISTRATIVE IMPLICATIONS

The HPC is not mentioned as a representative on the proposed Blue Ribbon Task Force. However, the Commission can be included as one of the experts in health care organizations.

# RELATIONSHIP

Relates to SB 911.

# **OTHER SUBSTANTIVE ISSUES**

HPC reports that it has already completed the assigned tasks noted in SJM 31. HPC specifies that:

- The HJM 18 study, Phases 1 and II was the core document that reported on the Task Forces assessment of health care financing, delivery, organization and performance.
  - The entire Task Force met seven times from April through July 2000.
  - There were specific work groups that worked closely with HPC staff on benefit packages and health care financing issues.
  - The Task Force was inclusive and included representatives from the New Mexico Health and Hospitals Systems Agency (NMHHSA), the Association of Retired Persons (AARP), the managed care organizations, the Human Services Department (HSD), the Department of Health (DOH), the New Mexico Medical Society, consumer advocates, University Hospital, private businesses, the Primary Care Association and others.
- It has taken a leadership role in assuring the progress of state agencies efforts and plans to get ready for administrative simplification by the deadlines. Administrative simplification refers to the Health Insurance Portability and Accountability Act of 1996, otherwise known as HIPPA.
- The HPC, in collaboration with other state agencies has already organized and written a charter for a work group with representation from the HPC, the Department of Health (DOH), the Children, Youth and Families Department (CYFD), the Human Services Department (HSD), the Retiree Health Care Authority, and the Educational Retiree Health Care Authority. This group, called the Health Information Management Team (HIMT) has developed plans to ensure state agency readiness, cost-effectiveness and efficiency in response to all of the coming federal mandates for administrative simplification.
- It was instrumental in the development of a public-private consortium, called New Mexico CHILI. The New Mexico Coalition for Health Information and Leadership Initiatives is organized to ready the state agencies, and their trading partners for HIPPA implementation.
- It has undertaken much of the required studies to support the work of the proposed Blue Ribbon Health Care Task Force. Some of these studies include Blue Print for Change, the Household Survey, Employer Survey, and planned studies of health professionals. New Mexico First, a not-for-profit, non-partisan organization, has held health care town halls throughout the state with broad participation both in terms of urban-rural representation and with citizens from all walks of life engaged in the dialogue.

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The HPC also suggests that the research, experience and expertise of the HPC itself could inform this important and timely effort. Inclusion of a representative from the HPC in the proposed Blue Ribbon Task Force on Health Care should be considered.

### AMENDMENTS

HPC suggest writing an additional "Resolves" to the memorial specifically naming the Health Policy Commission as a member organization of the Blue Ribbon Task Force.

BD/njw