NOTE: As provided in LFC policy, this report is intended for use by the standing finance committees of the legislature. The Legislative Finance Committee does not assume responsibility for the accuracy of the information in this report when used in any other situation.

Only the most recent FIR version, excluding attachments, is available on the Intranet. Previously issued FIRs and attachments may be obtained from the LFC office in Suite 101 of the State Capitol Building North.

FISCAL IMPACT REPORT

SPONSOR: Aragon		DATE TYPED:	3/5/01	HB -		
SHORT TITLE:	Right to Health	Care, CA		SB	SJR34	
			ANAL	YST:	Esquibel	
		<u>APPROPI</u>	RIATION			
Appropriation Contained		Estimated Additional Impact			Recurring	Fund
FY01	FY02	FY01	FY02		or Non-Rec	Affected
N/A						
14/11						
<u> </u>	Indicate Expenditu	re Decreases)				

SOURCES OF INFORMATION

Human Services Department (HSD) State Agency on Aging (SAOA) NM Health Policy Commission (HPC)

No Response Department of Health (DOH)

SUMMARY

Synopsis of Bill

Senate Joint Resolution 34 proposes to amend Article 2 of the NM Constitution by adopting a new Section 25 that would provide New Mexicans with the right to accessible, available and medically necessary health care.

Significant Issues

FISCAL IMPLICATIONS

The Secretary of State's office would cover out of its operating budget the \$30.0 necessary to put a constitutional amendment on the ballot.

The inherent cost of providing accessible, available and medically necessary health care to all New Mexicans would be quite significant.

Senate Joint Resolution 34 -- Page 2

HSD indicates it provides some of the services prescribed in the resolution through the Medicaid program, and some services are also available through the Medicare program.

ADMINISTRATIVE IMPLICATIONS

CONFLICT/DUPLICATION/COMPANIONSHIP/RELATIONSHIP

TECHNICAL ISSUES

SJR34 does not include definitions of "medically necessary health services, accessible and available" health care.

HSD indicates problems associated with denial of service based on "medical necessity" could raise constitutional challenges.

OTHER SUBSTANTIVE ISSUES

HPC indicates this legislation is compatible with its statutory mandates and in the recommendations it reported regarding HJM18 (1999).

SAOA indicates the 1999 Census Bureau Current Population Survey estimates that 25.8% of New Mexicans are uninsured compared to the national average of 15.5%; 21% of New Mexicans live in poverty compared to the national average of 11.8%; and 49.6% of New Mexicans are not covered for health insurance by their employers.

The three leading causes of death for New Mexicans are heart disease, cancer and unintentional accidents. Diabetes is also very prevalent among Hispanics and Native Americans. SJR34 would significantly impact these populations.

RAE/njw