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FISCAL IMPACT REPORT

SPONSOR: Jennings DATE TYPED: 3/05/03 HB _____

SHORT TITLE: Services for Deaf & Hard-of-Hearing Students SB 830

ANALYST: Dunbar

APPROPRIATION

Appropriation Contained		Estimated Additional Impact		Recurring or Non-Rec	Fund Affected
FY03	FY04	FY03	FY04		
	\$300.0			Recurring	GF

(Parenthesis () Indicate Expenditure Decreases)

Relates to: SB 710

SOURCES OF INFORMATION

Responses Received From
Department of Health (DOH)

SUMMARY

Synopsis of Bill

Senate Bill 830 appropriates \$300,000 from the general fund for expenditure in fiscal year 04 to the Department of Health (DOH) for oral education, research, diagnostic and clinical services for the deaf and hard of hearing.

Significant Issues

The Department of Health (DOH) views the New Mexico School for the Deaf (NMSD) as the lead state agency serving children who are deaf or hard of hearing and their families. The NMSD has personnel who can provide research, diagnostic and clinical services including oral education as one of the many approaches to developing the communication of children who are deaf or hard of hearing. This appropriation should go to support this state agency rather than go to a private provider.

The DOH Family Infant Toddler Program has a Joint Powers Agreement (JPA) with the NMSD in order to provide these early intervention services to children birth to three and their families.

NMSD operates the Step*Hi program that serves children (birth to five) in home and community settings as well as at two pre-school sites. Funds from the SB 830 appropriation could help to expand this program.

Children's Medical Services (CMS) pays for audiological services to children without Medicaid or private health insurance, and manages the Universal Newborn Hearing Screening Program. This appropriation could expand these programs for New Mexico children.

The Family Infant Toddler Program, as the lead entity for early intervention, has a need to purchase additional sets of hearing screening equipment to be used at early intervention provider agencies statewide that could help to identify young children who have hearing loss.

FISCAL IMPLICATIONS

The appropriation of \$300.0 contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of FY 04 shall revert to the general fund.

The appropriation specified in SB 830 could be added to an existing JPA between DOH and the NMSD.

OTHER SUBSTANTIVE ISSUES

The New Mexico School for the Deaf is the lead state agency serving children who are deaf or hard of hearing and their families. The Department of Health Family Infant Toddler Program has a JPA with the NMSD in order to provide these early intervention services in accordance with state and federal laws. NMSD operates comprehensive services for young child (birth to five) in home and community settings as well as at two pre-school sites. NMSD also operates school-based services at their site in Santa Fe and also provides support to public school districts that are serving children with a hearing loss. Services provided by NMSD involve a total communication approach that include auditory - oral education

The State Department of Education provides special education for children between the ages of 3 –21 that include services to children who are deaf and hard of hearing. In addition, Children's Medical Services (CMS) funds audiological services to children without Medicaid or private health insurance and some of this appropriation could be utilized to expand this function. CMS also manages the Universal Newborn Hearing Screening Program that screens the hearing of all newborns before they leave the hospital and provides follow-up with families of any infant who 'refers' on this screening test.

The Family Infant Toddler (FIT) Program has purchased several sets of hearing screening equipment that can be used with infants and toddlers. This equipment costs approximately \$5,000 and currently is available at four early intervention provider agencies in New Mexico. The FIT program would like to expand the availability of this screening to the other 30 early intervention provider agencies.

BD/njw