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FISCAL IMPACT REPORT

SPONSOR	Sandoval	ORIGINAL DATE LAST UPDATED		IB 173	
SHORT TITL	E Childhood Obesity	Prevention & Treatmen	t S	SB	
			ANALYS	ST McOlash	

APPROPRIATION (dollars in thousands)

Арргор	riation	Recurring or Non-Rec	Fund Affected
FY07	FY08		
	\$150.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

Relates to SB 180/HB 429 (Duplicates), SB 539, SB 232/HB 208 (Duplicates), SB 538/HB 428 (Duplicates), SB 456/HB 427 (Duplicates).

Relates to Appropriation in the General Appropriation Act (SB 2 and HB 7)

SOURCES OF INFORMATION

LFC Files

<u>Responses Received From</u> Department of Health (DOH) Children, Youth & Families Department (CYFD) Public Education Department (PED) Higher Education Department (HED)

SUMMARY

Synopsis of Bill

House Bill 173 appropriates \$150,000 from the General Fund to the Board of regents of the University of New Mexico for expenditure in FY 2008 for the Health Sciences Center Pediatric department's *Telehealth* programs to help rural providers and school-based health centers to treat and prevent childhood obesity.

FISCAL IMPLICATIONS

The appropriation of \$150,000 contained in this bill is a recurring expense to the General Fund. Any unexpended or unencumbered balance remaining at the end of FY 2008 shall revert to the General Fund.

SIGNIFICANT ISSUES

DOH Analysis

Childhood obesity in New Mexico is a serious health problem and has been identified as one of Governor Richardson's health priority areas. At least 26% of NM high school students weigh too much (12% overweight and over 14% at risk for overweight; 2005 NM Youth Risk & Resiliency Survey) and 24% of NM 2- to 5-year olds who participate in federally funded nutrition programs weigh too much (11% overweight and 13% at risk for overweight, based on direct 2005 measurements). Children and adolescents with weight problems are at increased risk for becoming adults with weight problems, and may develop risk factors for heart disease (abnormal cholesterol, blood pressure, and blood sugar) at an early age.

Prevention and treatment of obesity are complicated by the lack of trained specialists and inadequate treatment guidelines. In addition, most primary care providers have not been trained to diagnose and treat the conditions associated with obesity in children. Telehealth consultation for rural providers in both community clinics and SBHCs is a promising new strategy for improving healthcare for obese and overweight children in their home communities.

The 2006 legislature appropriated funding for telehealth equipment for 18 school-based health centers (SBHCs). HB173 would provide specific funding to use the new telehealth network for SBHCs to address obesity among students in rural New Mexico. The Envision New Mexico program of the UNM Health Sciences Center has started a telehealth pilot project in two SBHCs to address overweight and obesity issues.

This request was not on the list of priority projects submitted by UNM-HSC HED) for review and was not included in the Department's funding recommendation for FY08.

PERFORMANCE IMPLICATIONS

House Bill 173 would have implications for the DOH Strategic Plan, Program Area 1, TASK 1: Expand Healthcare Access in Rural and Underserved Areas through Telehealth Services, and Program Area 2: Public Health, Task 4: Reduce child and adolescent obesity and diabetes in all populations, and TASK 7: Expand Healthcare for School-Age Children and Youth Through School-Based Health Services.

The DOH Performance Measures, while not referenced in HB 173, are directly related.

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DOH Performance Measures:

- Number of established telehealth sites (including video) throughout the state for training, consultation among physicians, or patient services.
- Number of telehealth sites throughout the state used for patient services.
- Number of telehealth specialty services available through the telehealth network.
- Number of patient encounters provided through telehealth sites statewide.
- Number of hours of health related training and consultation.
- Percent of adolescents grades 9-12 who are not overweight/obese.
- Number of youth served at school-based health centers.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

- SB 180/HB 429 appropriate \$600,000 to DOH to fund a telehealth program serving children, families, and health care providers in rural areas.
- SB 539 appropriates \$2.4 million to DOH to, among other activities, enhance existing telehealth services.
- SB 232/HB 208 appropriate \$8.0 million to fund elementary physical education.
- SB 538/HB 428 amend the New Mexico Telehealth Commission Act to include Health Information Technology in title and activities.
- SB 538/HB 428 define telehealth services to include consultations, direct patient care, and health care education.
- HB 116 appropriates \$1.0 million to fund the LamdaRail dual fiber network that could provide an alternative source of broadband access to facilitate telehealth services.

BM/sb