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FISCAL IMPACT REPORT

SPONSOR	Kin	g CRIGINAL DATE 02/ LAST UPDATED	15/07	НВ	721
SHORT TITL	LΕ	Tribes in County Maternal & Child Health Act		SB	
			ANAI	YST	Geisler

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY07	FY08	FY09	3 Year Total Cost	Recurring or Non-Rec	Fund Affected
Total			.01 See narrative.		Recurring	General

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From

Department of Health (DOH) Health Policy Commission (HPC) Human Services Department (HSD)

SUMMARY

Synopsis of Bill

House Bill 721 proposes to amend the language within the County Maternal and Child Health (CMCH) Plan Act to include Native American tribes and to change the title of that act to Maternal and Child Health Plan Act.

FISCAL IMPLICATIONS

DOH notes that since FY 04, DOH has set aside \$2,822,708 for councils eligible under the CMCH Plan Act. FY 08 Funding for councils currently under the CMCH Plan Act will be held harmless. FY 08 funding for Native American Health Councils will continue to be provided through the separate item, including funding generated from a Joint Powers Agreement between DOH and Human Services Department. New health councils generally receive a funding level of \$30,000 - \$40,000. Future Legislative funding requests (2009 and beyond) will be based on funding needs for all health councils and may need to increase to address the concern of some constituents that inclusion of Native American communities will reduce the level of available funds for county based health councils.

SIGNIFICANT ISSUES

DOH notes that as currently written, the CMCH Plan Act does not contain language authorizing funding for health councils within Native American tribes/communities. Funds for these councils have been identified and maintained under a separate Public Health Division/Department of Health (DOH) line item in the budget.

New Mexico tribal communities transcend county geographical boarders. One tribe may be physically situated within multiple state counties, making it difficult for a county health council to adequately address the needs of the Native American communities that may lie within county boundaries. As currently written, the CMCH Plan Act would require approval of health councils by a board which is defined as a board of county commissioners. HB 721 would amend the Act to include tribal leadership in the definition of a board.

Since 2004, DOH increased the number of Native American Community Health Councils by one. Additional tribal-based health councils would be phased in through a strategic approach based on input from existing health councils, the availability of funding and demonstration of tribal community readiness. Growth in the number of tribal health councils is anticipated at a rate no more than 1-2 new tribal councils per fiscal year.

OTHER SUBSTANTIVE ISSUES

HPC provided background on the CMCHPA:

The County Maternal and Child Health Plan Act (CMCHPA) was passed by New Mexico State Legislature in 1991. The act provided funding to New Mexico counties for the planning and implementation of comprehensive maternal and child health (MCH) priority projects. Each county was eligible to appoint an MCH Council to represent a broad spectrum of interests and to reflect the constituency of the individual county's population. The responsibility of the MCH Council was to conduct an assessment of local maternal and child health needs and resources and to develop a plan to respond to the priorities established by the council. Administration of CMCHPA resides in the Maternal and Child Health Bureau, Public Health Division of the Department of Health. According to the Department of Health (DOH), its mission is to provide a statewide system of prevention, health promotion and education, community health improvement and other public health services for the people of New Mexico. DOH's goals are to:

- Promote positive maternal, child, adolescent, and family health outcomes in New Mexico using evidence-based strategies and programs;
- Promote positive growth and development of children and adolescents;
- Promote health, enhance quality of life, and prevent and manage infectious and chronic disease; and
- Promote comprehensive health improvement processes to improve health status in communities, counties and Tribes.

AMENDMENTS

DOH suggest that on page 8, Line 5, after the word, "a" and before the word, "update", delete the word "county" and replace with the word, "council".