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FISCAL IMPACT REPORT

SPONSOR Komadina ORIGINAL DATE _____
LAST UPDATED 01/20/07 HB _____
SHORT TITLE Health Care Provider Emergency Liability SB 22
ANALYST Hanika Ortiz

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Non-Rec	Fund Affected
FY07	FY08		
	NFI		

Relates to Senate Bill 23, providing for limited malpractice liability for retired and active physicians, physician assistants and anesthesiologist assistants who provide volunteer services.

SOURCES OF INFORMATION

LFC Files

Responses Received From

Department of Public Safety/Office of Emergency Management (DPS/OEM)

Attorney General's Office (AG)

Department of Health (DOH)

SUMMARY

Synopsis of Bill

Senate Bill 22 amends Section 12-10A-3 of the Public Health Emergency Response Act (PHERA) by adding a new category and definitions for "health care provider" and provides protection for such "health care providers" who voluntarily provide health care in response to a governor's public health emergency declaration as long as the care provided is within the scope of the provider's licensing requirements and occurs during the time and place of the actual emergency.

The effective date of the provisions of this Act is July 1, 2007.

FISCAL IMPLICATIONS

There is no appropriation attached to this legislation. However, ensuring New Mexico's preparedness for health care emergencies by providing early detection and emergency medical

care for injured or ill persons may positively impact state health care delivery systems over time.

SIGNIFICANT ISSUES

Under the amendment proposed in Senate Bill 22, during a public health emergency declared by the governor if a person suffers injury, death or damage to his or her property as a result of a health care provider's act or failure to act, then liability will not attach as long as the health care provided is without expectation of compensation and care provided is within the scope of the provider's license.

DOH maintains a health care provider registry to respond to public health emergencies. DOH reports deploying volunteer health care providers to affected areas may be necessary due to the health workforce shortage in New Mexico. DOH believes if volunteers are not afforded protection from liability, they may be less likely to respond to a DOH request for their services during such an event.

ADMINISTRATIVE IMPLICATIONS

DOH currently maintains the New Mexico Serves (NM Serves) registry of health care providers deployed by the department during a public health emergency.

TECHNICAL ISSUES

The Office of Emergency suggests replacing the term "public health emergency" with "state-declared public health emergency" throughout the bill to distinguish between any non-PHERA events which are not provided the same protections.

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

Failure to adopt these rule changes may result in persons being denied or refused care or services during state-declared public health emergencies because of reservations on the part of the licensed health care providers.

AHO/csd