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FISCAL IMPACT REPORT

SPONSOR Pa	apen	ORIGINAL DATE LAST UPDATED	1/19/2007 HI	.
SHORT TITLE	Dona Ana High-Ri	sk Perinatal Care	SI	3 143
			ANALYS	Geisler

APPROPRIATION (dollars in thousands)

Appropr	iation	Recurring or Non-Rec	Fund Affected
FY07	FY08		
	\$200.0	Recurring	General

(Parenthesis () Indicate Expenditure Decreases)

Duplicates: HB 144

SOURCES OF INFORMATION

LFC Files

Responses Received From Department of Health

SUMMARY

Synopsis of Bill

Senate Bill 143 would appropriate two hundred thousand dollars (\$200,000) from the general fund to the Department of Health for expenditure in fiscal year 2008 to provide payment for perinatal services, including prenatal, delivery and postnatal, for uninsured low-income pregnant women with high-risk conditions in Dona Ana County. Any unexpended or unencumbered balance remaining at the end of fiscal year 2008 would revert to the general fund.

FISCAL IMPLICATIONS

This appropriation would build upon \$100,000 appropriation received for FY07 for this program which is contained in the base budget recommendation for both the LFC and executive for FY08. DOH notes that Medicaid's standard fee schedule for perinatal care is \$1,229.53, or with a cesarean section, \$1,456.22. At these rates, a \$200,000 appropriation would cover perinatal care for approximately 157 women.

Senate Bill 143 – Page 2

SIGNIFICANT ISSUES

DOH provides that perinatal services include care before and after a birth. In 2004, 3,315 infants were born to Dona Ana County residents. Of their mothers, 20.4%, or 633, had low level prenatal care, or no prenatal care. (New Mexico Selected Health Statistics Annual Report 2004). Inadequate use of prenatal care has been linked with increased risk for poor health of the infant, including low birth weight and risk of premature birth, infant mortality, as well as maternal mortality (NM PRAMS Surveillance Report – 1999 Live Births). For women with high-risk conditions, there are higher rates of these problems; the need for tests, treatments and other services is greater; and the cost of perinatal care is higher.

DUPLICATION

Senate Bill 143 is duplicated by House Bill 144.

GG/sb