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# FISCAL IMPACT REPORT

SPONSOR Pap		L <b>DATE</b> 1/31/07 <b>DATED</b>	НВ	
SHORT TITLE	Transportation of Dona Ana C	County Patients	SB	584
		ANAI	LYST	Propst

## **APPROPRIATION (dollars in thousands)**

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

(Parenthesis ( ) Indicate Expenditure Decreases)

Duplicates HB 720

#### SOURCES OF INFORMATION

LFC Files

Responses Received From
Department of Health (DOH)
Department of Finance and Administration (DFA)
Human Services Department (HSD)

#### **SUMMARY**

### Synopsis of Bill

Senate Bill 584 appropriates \$150.0 to DFA to contract for services for nonemergency transportation of Dona Ana County mental health patients to facilities not available in Dona Ana County.

#### FISCAL IMPLICATIONS

The appropriation of \$150.0 contained in this bill is a recurring expense to the General Fund. Any unexpended or unencumbered balance remaining at the end of FY08 shall revert to the General Fund.

# **SIGNIFICANT ISSUES**

The Department of Health notes that Dona Ana County has an estimated population in 2004 was

#### Senate Bill 584 – Page 2

186,095. This was an increase of 6.53% from the 2000 census. (Dona Ana County –Population Overview – <u>WWW.epodunk.com</u>). The County has four hospital or primary care facilities; 12 health care clinics, two community mental health centers and numerous social service agencies. (Department of Health).

When individuals with emergency behavioral health problems require a crisis evaluation, the Dona Ana Sheriff's office is required to transport the individual.

The bill is unclear how the requested funds would be allocated.

DFA notes that the language contained in SB 584 does not specify a location where these patients will be transported to and from. The services could range from picking up patients at hospital, doctor's office, or a treatment facility. This could entail a complicated billing and tracking process.

DFA reports that it would need to issue a request for proposal for prospective vendors.

HSD reports that there would be no fiscal implications for the Department. The Medicaid program already covers this service for eligible recipients. Presumably the service would be provided for those not eligible for Medicaid.

### **ADMINISTRATIVE IMPLICATIONS**

DFA/LGD notes that it does not possess the expertise to provide oversight for such an activity or program. The Department of Health would be a more suitable agency to administer this program

WEP/mt