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FISCAL IMPACT REPORT

SPONSOR	Cis	neros	ORIGINAL DATE LAST UPDATED	2/14/07	HB		
SHORT TITI	LE	Stroke Victim	Rehabilitation Pilot Program	n	SB	951	
				ANAL	YST	Geisler	

APPROPRIATION (dollars in thousands)

Appropr	iation	Recurring or Non-Rec	Fund Affected
FY07	FY08		
	\$1,000.0	Recurring	General

(Parenthesis () Indicate Expenditure Decreases)

Duplicates: HB 980, HB 1056

SOURCES OF INFORMATION LFC Files

<u>Responses Received From</u> Aging and Long-Term Services Department (ALTSD)

SUMMARY

Synopsis of Bill

Senate Bill 951 appropriates \$1,000,000 from the general fund to the Aging and Long-Term Services Department (ALTSD) in FY 08 to support a pilot program using advanced technology for rehabilitation of stroke victims and treatment of other brain injuries, including upper body injuries and pre- or post- evaluations for surgeries. Any unexpended or unencumbered balance remaining at the end of fiscal year 2008 shall revert to the general fund.

FISCAL IMPLICATIONS

ALTSD notes that the appropriation of \$1 million to ALTSD for this program is not included in the executive budget request for the department. Most likely the funds would be contracted out.

SIGNIFICANT ISSUES

A pilot program is proposed to test the usefulness of an advanced technology in the rehabilitation of motor function in individuals who have an acquired brain injury. These injuries can result from several forms of stroke, resulting in anoxia. The loss of oxygen and/or glucose supply to nerves and tissues, located centrally in the brain or peripherally in the extremities, often result in

Senate Bill 951 – Page 2

impaired motor control and coordination. Similarly, traumatic brain injuries can affect areas of the brain that control motor function and coordination, leading to impaired functioning of the upper extremities.

Rehabilitative treatment planning for those with brain-injury-related impaired motor function is critically dependent upon obtaining objective clinical measurements. It is believed that the most likely use of these funds is to contract for use the Automated Pegboard System (APB2000) to objectively quantify improvement in motor function over time. This system's reliability and validity were tested in 2003 in California through a multi-facility study and results were published in The Journal of Applied Research.

Two groups of subjects were matched in this study for age, hand dominance, and gender and screened to rule out visual, cognitive, and upper extremity mobility impairments that might confound results. The control group consisted of seven (7) healthy adults (with a mean age of 67.4 yrs), while the test group consisted of seven (7) medically stable brain-injured adults, who were recovering from some form of stroke (with a mean age of 69.17 yrs). Results of the study support the APB2000's use as a highly reliable tool to provide clinical measurements for baseline and progression testing in both populations. Validity scores however, were low, but likely could be improved with larger sample sizes to reduce the effect of outliers. These results suggest that this equipment provides an objective clinical measurement of upper extremity motor function for rehabilitative treatment planning.

PERFORMANCE IMPLICATIONS

ALTSD notes that piloting this rehabilitation equipment may constitute human subject research in which case all legal guidelines for such research would need to be adhered to.

ADMINISTRATIVE IMPLICATIONS

There would be minimal administrative impact on ALTSD. ALTSD would be required to RFP the contractual services.

DUPLICATION

SB 951 is duplicated by HB 980 and HB 1056.

TECHNICAL ISSUES

ALTSD notes that the pilot program proposed for use of the equipment is not described. It is unknown whether the pilot study is to further test the equipment itself or to use the equipment to measure the effectiveness of other therapeutic measures.

ALTERNATIVES

The funding in this bill might be directed to an entity that is familiar with medical related projects, such as the Health Sciences Center at the University of New Mexico.

GG/csd