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# FISCAL IMPACT REPORT

SPONSOR	Cervantes	ORIGINAL DATE 1/30/08   LAST UPDATED 2/8/08		HB	348/aHJC	
SHORT TITI	LE Uniform Emergence	cy Volunteer Practitione	ers Act	SB		
			ANAL	YST	Wilson/Haug	

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

Appropr	iation	Recurring or Non-Rec	Fund Affected	
FY08	FY09			
	(unknown)	Recurring	General Fund	

(Parenthesis () Indicate Expenditure Decreases)

Relates to Appropriation in the General Appropriation Act in DOH

### ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY08	FY09	FY10	3 Year Total Cost	Recurring or Non-Rec	Fund Affected
DHSEM		\$0.1	\$0.1	\$0.1	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

# SOURCES OF INFORMATION

LFC Files

Responses Received From Board of Nursing (BN) Department of Health (DOH) Department of Homeland Security and Emergency Management (DHSEM) Health Policy Commission (HPC) Higher Education Department (HED) Medical board (MB) New Mexico Municipal League (NMML)

#### SUMMARY

Synopsis of HJC Amendment

The House Judiciary Committee Amendment removes the detail on liability limitation and effectively provides liability protection through the Tort Claims Act which was amended in 2007 to include "health care providers licensed in New Mexico who render voluntary health care

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services without compensation in accordance with rules promulgated by the secretary of health." It is unclear if a veterinarian, who is included in the definition of "health practitioner" in HB 348, is considered a "health care provider" under the Tort Claims Act.

# Synopsis of Original Bill

House Bill 348 enacts the Uniform Emergency Volunteer Health Practitioners Act which applies to volunteer health practitioners registered with a registration system and who provide health or veterinary services in New Mexico for a host entity while an emergency declaration is in effect. This bill provides the authority to regulate volunteer health services during an emergency to the Homeland Security and Emergency Management Department (DHSEM).

HB 348 provides for the following:

- Establishes definitions for terms in the Uniform Emergency Volunteer Health Practitioners Act.
- Establishes roles and responsibilities for the DHSEM and the host entity for regulation of services during an emergency.
- Establishes guidelines for volunteer health practitioner registration systems.
- Establishes practice guidelines for volunteer health practitioners licensed in other states.
- Establishes guidelines related to credentialing and privileging standards for health facilities when an emergency declaration is in effect.
- Establishes guidelines for administrative sanctions related to the provision of services by volunteer health and veterinary service practitioners when an emergency declaration is in effect.
- Addresses the interrelated effect of provisions of the Uniform Emergency Volunteer Health Practitioners Act with established laws, more specifically, laws related to the Emergency Management Assistance Compact.
- Establishes the role of the DHSEM to promulgate rules to implement the provisions of this Act.
- Establishes limitations on civil liabilities for volunteer health practitioners serving while an emergency declaration is in effect and compensation is less than \$500 per year.
- Establishes provisions for Workers' Compensation Coverage as relates to New Mexico law and the use of volunteer health practitioners serving while an emergency declaration is in effect.

# FISCAL IMPLICATIONS

DOH already has two dedicated full-time employees to coordinate New Mexico Serve (NMS) -- a program that includes recruitment, training and education, registry management, member services, and adherence to federal ESAR/VHP guidelines. NMS is currently compliant with HB348

There may be a need for additional funds to coordinate a registry for veterinary service practitioners.

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DHSEM states that funds will be needed to create, maintain and implement data base.

### SIGNIFICANT ISSUES

This bill addresses regulation and coordination of health or veterinary volunteer practitioners during an emergency in the state. The bill is addressing a gap that became apparent after 9/11/2001 and during Hurricane Katrina in August 2005. Many health and veterinary practitioners are ready to volunteer in their state of residence, or to be deployed in another state, but to facilitate an effective and timely response, a volunteer registration system must be in place prior to the emergency, so that volunteer credentials may be verified. Liability coverage is needed to protect volunteers. DOH has identified the need for a policy that provides volunteer health and veterinary care providers with liability and worker compensation protection.

DOH believes it would be a more appropriate agency to manage the act proposed by HB348. DOH has managed the Hospital Preparedness Grant from the federal Department of Health and Human Services for five years. Under this agreement, DOH's Bureau of Health Emergency Management (BHEM) is responsible for implementing the Emergency System for Advanced Registration for Volunteer Health Professionals Program (ESAR/VHP) and establishing NMS, a volunteer health professional registry.

DOH is establishing an agreement with a new registry vendor and recruiting a broad range of volunteers, including physicians, nurses, emergency medical technicians, pharmacists, veterinarians, and other allied health professionals. Registry members are required to provide extensive information regarding their credentials and may be deployed by the DOH during an emergency. Members of the registry receive training, deployment instructions and receive a badge with specific location and deployment duration information.

A formal relation has been established between DOH and the New Mexico Medical Reserve Corps (MRC). MRC volunteers are included in the ESAR/VHP registry and participated in a recent tribal vaccination exercise with other volunteers, including the New Mexico Disaster Medical Assistance Team. Formal relationships are in place with professional boards for the credentialing of the volunteers, as well as different volunteer organizations in the State. Coordination is occurring with ESAR-VHP programs in federal Region 6, which includes Texas, Arkansas, Louisiana, Oklahoma, and New Mexico.

DOH notes that this bill proposes workers' compensation coverage and that DOH should enter into agreements with other states or take other measures to facilitate the receipt of benefits for injury or death under the worker's compensation law. DOH believes that this may already be covered in current law.

DHSEM states they do not have the appropriate expertise in health and veterinary services to carry out the functions required for successful implementation of this legislation. DHSEM further states that DOH and the Livestock Board have the professional expertise to implement this program. However, DHSEM believes that they should maintain coordinating efforts during emergency response.

As HB 348 refers to veterinary services, the bill should include provisions for the Live Stock Board, the Board of Veterinary Medicine or the Animal Sheltering Board.

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HPC notes that failure to adopt this bill 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.

MB provided the following:

HB 348 is, at least in part, in response to national projects aimed at identifying qualified health care practitioners who can be available for appropriate use in an emergency, whether in the practitioner's State or in another. Inherent in this approach are several concepts: pre-registration (so as to minimize time from the occurrence of a disaster to arrival on the scene of specifically qualified practitioners whose scope of practice matches the need. Second is verification of scope of practice, licensure, and freedom from license limitation. Third is confirmation of registration with the "disaster relief organization".

HB 348 is an important and timely bill, both on a local and national level. The NM Medical Board supports the approach taken in this bill, and has already begun to participate in other national efforts in accomplishing the goals expressed in this legislation. The NM Medical Board has provisions for physician licensure during a declared disaster in Section 16 of Title 16, Chapter 10, Part 2 NMAC.

### ADMINISTRATIVE IMPLICATIONS

The impact of this legislation to the DOH is minimal and may be accommodated by existing personnel dedicated to the implementation of the volunteer registry program.

If DHSEM has to implement the provisions of this bill they will need additional resources.

# **TECHNICAL ISSUES**

Page 7, Line 18: The federal funding agency for the advance registration of volunteer health care practitioners is the Health and Human Services, Assistant Secretary for Preparedness and Response. The Health Resources Services Administration (HRSA) no longer manages the relevant program.

DHSEM suggests the definition of volunteers should be expanded to include all manner of volunteers, such as Search and Rescue volunteers, etc.

#### **OTHER SUBSTANTIVE ISSUES**

The New Mexico Department of Homeland Security and Emergency Management (DEMHS) was created as a cabinet level agency during the 2007 legislative session. With a staff of over 60, DHSEM leads the State's response to emergencies and disasters while providing for the safety and welfare of its citizens. Emergencies and disasters can be defined as something caused by natural or human-made events or any other circumstance as determined by the Governor.

HED notes that in many national emergencies, volunteer health practitioners are essential to meeting surge capacity in public and private sectors. Every state has ratified the Emergency Management Assistance Compact (EMAC), which provides for licensing reciprocity, relief from

# House Bill 348/aHJC – Page 5

civil liability, and workers compensation protections to state forces deployed to respond to emergencies. Many state laws underlying the declaration of public health emergencies recognize interstate health licensure or provide broad authority to waive other legal or regulatory requirements during emergencies.

DW/bb:nt