1	SENATE BILL 332
2	49TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2009
3	INTRODUCED BY
4	Clinton D. Harden
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10	AN ACT
11	RELATING TO HEALTH CARE; CREATING THE OFFICE OF HEALTH POLICY
12	UNDER THE DEPARTMENT OF HEALTH; PROVIDING FOR THE OFFICE OF
13	HEALTH POLICY TO ASSUME THE DUTIES OF THE NEW MEXICO HEALTH
14	POLICY COMMISSION; CREATING THE HEALTH POLICY ADVISORY BOARD;
15	PROVIDING FOR TRANSFERS OF FUNCTIONS, PERSONNEL, PROPERTY,
16	CONTRACTS AND STATUTORY REFERENCES; RECONCILING MULTIPLE
17	AMENDMENTS TO THE SAME SECTION OF LAW IN LAWS 2007; AMENDING,
18	REPEALING AND ENACTING SECTIONS OF THE NMSA 1978.
19	
20	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:
21	Section 1. Section 9-7-4 NMSA 1978 (being Laws 1991,
22	Chapter 25, Section 16, as amended) is amended to read:
23	"9-7-4. DEPARTMENT ESTABLISHED
24	A. There is created in the executive branch the
25	"department of health". The department shall be a cabinet
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department and shall include, but not be limited to, the programs and functions of the public health division, [and] the scientific laboratory and the office of health policy.

B. All references in the law to the public health division of the health and environment department, the state department of public health, the public health department, the health services division or the state board of health shall be construed as referring to the department.

9 C. The administrative services division of the
10 department shall provide clerical, [recordkeeping] record11 <u>keeping</u> and administrative support to the department,
12 including, but not limited to, the areas of personnel, budget,
13 procurement and contracting.

D. The information technology division shall have all those powers and duties conferred upon it by the secretary with the consent of the governor.

E. In addition to other duties assigned by the secretary, the office of health policy shall:

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1	the implementation of the state's health policy and report
2	annually to the legislative finance committee and the interim
3	legislative health and human services committee;
4	(3) obtain and evaluate information relating
5	to factors that affect the availability and accessibility of
6	health services and health care personnel in the public and
7	private sectors;
8	(4) perform needs assessments on health
9	personnel, health education and recruitment and retention
10	efforts and make recommendations regarding the training,
11	recruitment, placement and retention of health professionals in
12	underserved areas of the state;
13	(5) prepare and publish an annual report
14	describing the progress made in addressing the state's health
15	policy and planning issues. The report shall include a work
16	plan of goals and objectives for addressing the state's health
17	policy and planning issues in the upcoming year;
18	(6) distribute the annual report to the
19	governor, appropriate state agencies and interim legislative
20	committees and interested parties;
21	<u>(7) establish a process to prioritize</u>
22	recommendations on program development, resource allocation and
23	proposed legislation;
24	(8) provide information and analysis on health
25	<u>issues;</u>
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1	(9) serve as a catalyst and synthesizer of
2	health policy in the public and private sectors;
3	(10) respond to requests by the executive and
4	legislative branches of government;
5	(11) ensure that any behavioral health
6	projects, including those relating to mental health and
7	substance abuse, are conducted in compliance with the
8	requirements of Section 9-7-6.4 NMSA 1978; and
9	(12) operate and maintain the health
10	information system created pursuant to the Health Information
11	<u>System Act.</u> "
12	Section 2. Section 9-7-4.1 NMSA 1978 (being Laws 2004,
13	Chapter 51, Section 1, as amended by Laws 2007, Chapter 46,
14	Section 6 and by Laws 2007, Chapter 279, Section 1) is amended
15	to read:
16	"9-7-4.1. COMPREHENSIVE STRATEGIC PLAN FOR HEALTH
17	A. The office of health policy and other divisions
18	of the department, in conjunction with [the New Mexico health
19	policy commission and] other state agencies, pursuant to
20	Section 9-7-11.1 NMSA 1978, shall develop a comprehensive
21	strategic plan for health that emphasizes prevention, personal
22	responsibility, access and quality.
23	B. The department shall publish the comprehensive
24	strategic plan for health by September 1, 2008 and every four
25	years thereafter. By September 1 of each even-numbered year,
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the department shall review and update or amend the plan in response to changes and developments.

3 The department shall include the legislature, C. 4 health care providers, consumer and patient advocates, health 5 care financing organizations, managed care organizations, major 6 insurers in the state, the human services department, the 7 children, youth and families department, the aging and long-8 term services department, pharmaceutical manufacturers and 9 other stakeholders in its development of the comprehensive 10 strategic plan for health so as to give geographic 11 representation to all areas of the state. The department shall 12 ensure that public participation and public input are 13 integrated into the planning process. The department shall 14 convene regional meetings on the proposed plan to allow public 15 review and comment, including oral and written testimony, 16 pursuant to the Open Meetings Act.

D. The department shall consult with the governments of Indian nations, tribes and pueblos located wholly or partially within New Mexico to include Indian nations, tribes and pueblos in the development of the comprehensive strategic plan for health.

E. The department shall report its findings, recommendations and goals in its comprehensive strategic plan for health. The plan shall address the following areas and others that the governor and the legislature may from time to .174689.3GR

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2	(1) a summary of the state's health care
3	system that includes the financial, administrative and delivery
4	structure in both the public and private sector;
5	(2) the diseases, injuries and risk factors
6	for physical, behavioral and oral health that are the greatest
7	cause of illness, injury or death in the state, with special
8	attention to and recognition of the disparities that currently
9	exist for different population groups;
10	(3) key indicators of and barriers to health
11	care coverage and access, with specific emphasis on reducing
12	the number of uninsured New Mexicans;
13	(4) the role of the department, other state
14	agencies and the private sector in identifying strategies and
15	interventions to provide health care coverage, access and
16	quality;
17	(5) a continuum of care model that emphasizes
18	prevention, early intervention and health promotion and that
19	includes public health services, emergency medical services,
20	primary care, acute care, specialized care, tertiary care and
21	long-term care;
22	(6) health education, wellness, nutrition and
23	exercise initiatives that emphasize personal health
24	responsibility;
25	(7) workforce initiatives to identify, recruit
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1 and retain health care professionals; 2 (8) health care facility infrastructure, 3 capacity, capitalization and financial viability in both the 4 public and private sector; 5 licensing, credentialing, oversight and (9) 6 tracking initiatives designed to improve health care quality 7 and outcome measurements; 8 (10) programs, services and activities 9 designed to address the needs of persons who have a disability, 10 are elderly or have special needs; 11 (11) anticipated demands and challenges on the 12 health care system as the need for long-term care services 13 increases: 14 data and information addressing key (12)15 health status and system indicators, statistics, benchmarks, 16 targets and goals for the state and comparing it nationally, 17 regionally and to other states of similar size and 18 demographics; provided that individually identifiable health 19 information and other proprietary information is protected as 20 required by state or federal law; and 21 (13) planning and response to public health 22 emergencies, including bioterrorism, pandemic flu, disease 23 outbreaks and other situations that will require a 24 coordinated response by the health care system." 25 Section 3. Section 9-7-11.1 NMSA 1978 (being Laws 1991,

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Chapter 139, Section 1) is amended to read:

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"9-7-11.1. FINDINGS AND PURPOSE.--

3 The legislature finds that good health is Α. among our most cherished desires. To achieve optimal health requires both individual and collective responsibility and action and, therefore, state government must assume a 7 leadership role by establishing and implementing policies in 8 all aspects of health. In order to fulfill its proper 9 leadership obligation within public resource constraints, the 10 state must perform a variety of carefully tailored roles in concert with individuals, the private sector and local, 12 federal and tribal governments.

Β. The legislature also finds that health care requires a growing portion of the state's public and private resources and [impacts] affects a broad segment of the state's economy; a need, therefore, exists to establish an entity for research, guidance and recommendations on health policy and planning issues.

C. [The purpose of the New Mexico health policy commission] One of the functions of the office of health policy is to provide a forum for the discussion of complex and controversial health policy and planning issues and for the creative exploration of ideas, issues and problems surrounding health policy and planning, including the interrelations with education, the environment and economic .174689.3GR

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2	D. It is the policy of the state [of New Mexico]
3	to promote optimal health; to prevent disease, disability and
4	premature death; to improve the quality of life; and to
5	assure that basic health services are available, accessible,
6	acceptable and culturally appropriate, regardless of
7	financial status. This policy shall be realized through the
8	following organized efforts:
9	(1) education, motivation and support of the
10	individual in healthy behavior;
11	(2) protection and improvement of the
12	physical and social environments;
13	(3) promotion of health services for early
14	diagnosis and prevention of disease and disability; and
15	(4) provisions of basic treatment services
16	needed by all New Mexicans."
17	Section 4. A new section of the Department of Health
18	Act is enacted to read:
19	"[<u>NEW MATERIAL</u>] HEALTH POLICY ADVISORY BOARD
20	A. The "health policy advisory board" is created
21	and administratively attached to the department. The board
22	shall consist of eight public members appointed by the
23	governor. Members shall serve at the pleasure of the
24	governor. Members may receive per diem and mileage in
25	accordance with the Per Diem and Mileage Act, subject to
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available funding or appropriations, but shall receive no other compensation, perquisite or allowance.

B. The board shall participate with the department and the office of health policy on the development of the comprehensive strategic plan for health. The board shall independently review health data and make recommendations related to health policy to the department."

Section 5. TEMPORARY PROVISIONS--TRANSFER OF FUNCTIONS, PERSONNEL, PROPERTY, CONTRACTS AND STATUTORY REFERENCES.--

A. On July 1, 2009, all functions, personnel, money, appropriations, records, files, furniture, equipment and other property of the New Mexico health policy commission shall be transferred to the department of health.

B. On July 1, 2009, all contractual obligations of the New Mexico health policy commission shall be obligations of the department of health.

C. On July 1, 2009, all references in the law to the New Mexico health policy commission shall be deemed to be references to the office of health policy of the department of health.

Section 6. REPEAL.--Sections 9-7-11.2 and 9-7-11.3 NMSA 1978 (being Laws 1991, Chapter 139, Section 2 and Laws 2003, Chapter 235, Section 2, as amended) are repealed.

Section 7. EFFECTIVE DATE.--The effective date of the provisions of this act is July 1, 2009.

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