

**LEGISLATIVE EDUCATION STUDY COMMITTEE
BILL ANALYSIS**

Bill Number: HB 380

50th Legislature, 1st Session, 2011

Tracking Number: .184896.1

Short Title: No School Health Center Reproductive Services

Sponsor(s): Representatives Conrad D. James and Cathrynn N. Brown

Analyst: James Ball

Date: March 11, 2011

Bill Summary:

HB 380 prohibits any school-based health center (SBHC) from providing any reproductive health services, including advice or health care related to contraception, abortion, sexually transmitted diseases, or reproductive processes and functions.

Fiscal Impact:

HB 380 does not contain an appropriation.

The analysis of HB 380 by the Human Services Department (HSD) indicates that the elimination of the services described in the bill would result in a reduction in Medicaid payments to SBHCs but that this reduction would not necessarily result in a cost savings to the program. Payments for some of the services would be made to other providers such as physicians and clinics from which students could still seek advice or treatment.

Fiscal Issues:

HSD notes that, consistently, in detailed studies prepared by the state Medicaid program for the centers for Medicare and Medicaid Services for the New Mexico Medicaid Family Planning Waiver, family planning services have shown to have saved the state millions of dollars when considering fertility rates of the general population.

Substantive Issues:

According to the analysis of HB 380 by the Department of Health (DOH), the bill conflicts with the *Family Planning Act*, which “assures that comprehensive family planning services are accessible on a voluntary basis to all who want and need them.” DOH further notes that current statute also provides that “any person regardless of age has the capacity to consent to an examination and treatment by a licensed physician for any sexually transmitted disease,” and that “neither the state... nor any health facility furnishing family planning services shall subject any person to any standard or requirement as a prerequisite for receipt of any requested family planning service.”

Background:

DOH notes in its analysis of HB 380 that New Mexico has historically had an inadequate system in place to address the health care needs of adolescents. Adolescents (ages 10-19) have the lowest utilization of health care services of any age group and are the least likely to seek care at a provider's office.

DOH also states that adolescents are less likely to have health insurance than other age groups. In 2009, 11.9 percent of six- to 17-year-olds were uninsured. Nearly 22 percent of New Mexico's children have no health insurance.

Additionally, the leading causes of death for adolescents have changed from natural causes, namely illness and birth defects, to unintentional and intentional injuries such as substance abuse, unprotected sex, and violence. In 2006, New Mexico had the fourth highest chlamydia rates in the United States at 509 cases per 100,000 population. Chlamydia is a common sexually transmitted disease caused by bacteria spread through sexual contact with an infected person. In addition, 69 percent of those cases in New Mexico in 2006 were among those 15 to 24 years old.

DOH states that, to have an impact on the health of school-aged youth, young people need a team of health care providers working together at a convenient location (schools) where students know it is safe to talk about troubling issues and receive confidential care, when necessary.

DOH also notes that SBHCs provide care for many uninsured adolescents, providing a much-needed point of access to health care services. Data suggest that SBHCs are perceived as acceptable by students and families that can target underserved racial and ethnic minorities, thereby fostering equity in access to care and health outcomes for the most vulnerable populations.

Related Bills:

None as of March 11, 2011.