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FISCAL IMPACT REPORT

SPONSOR Candelaria ORIGINAL DATE 2/10/17
 LAST UPDATED _____ HB _____

SHORT TITLE Health Profession Scope of Practice Committee SB 145

ANALYST Chenier

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY17	FY18	FY19	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
Total		\$20.0	\$20.0	\$40.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From

Human Services Department (HSD)
 Regulation and Licensing Department (RLD)
 Medical Board (MB)
 Board of Nursing (BN)

SUMMARY

Synopsis of Bill

Senate Bill 145 proposes to create a new “Scope of Practice Committee”, staffed by LCS and composed of eight members, four appointed by the speaker of the House of Representatives, and four appointed by the Senate Committees’ Committee. The bill allows for proposals for changes in scope of practice to be submitted to the committee.

The bill also mandates that the committee review all proposals and, after gathering data and receiving comments, and after appropriate public notice, summarize its findings in a report to the standing committee to which the legislation is referred.

FISCAL IMPLICATIONS

Assuming the committee meets four times annually, and assuming each one day meeting will cost \$5 thousand in mileage and per diem, the annual cost will be \$20 thousand. If the committee meets more often annual expenditures will be more.

SIGNIFICANT ISSUES

The Medical Board appreciates the balanced and controlled approach proposed for the “scope of practice committee” in objectively reviewing proposals, in taking evidence and opinion, and in a fair-handed involvement of relevant stakeholders. The practice of medicine is in transition, and the shortage of care-giver-practitioners has been well documented. The Medical Board agrees that increasing scope of practice is a sound way in which to increase the capability of a given health-care practitioner to reach more patients. The Medical Board, like other Boards, has a primary responsibility to protect the public and patients. The qualifications for increasing a “scope of practice” are limited and specific: education must be relevant, complete, documentable, and examinable; clinical training must be complete and documentable; ancillary skills, such as relevant laboratory evaluation and procedural skill, must be complete and documentable; and, training in pharmacological treatment, must also be complete, and documentable.

ALTERNATIVES

On page 3, line 21 the provision obliges the committee to review every proposal submitted; moreover, on page 3, line 5-9 any person can make these proposals. The suggestion is to create some kind of intermediary process that allows for the triage of what could be deluge of proposals or to limit the proposal source to legislators.

EC/sb