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Current and previously issued FIRs are available on the NM Legislative Website (<a href="www.nmlegis.gov">www.nmlegis.gov</a>) and may also be obtained from the LFC in Suite 101 of the State Capitol Building North.

## FISCAL IMPACT REPORT

SPONSOR	Ortiz y Pino	ORIGINAL DATE LAST UPDATED		НВ	
SHORT TITI	LE Trauma System F	Trauma System Funding Task Force		SJM	16/аНННС
			ANALY	YST	Chilton

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

		FY17	FY18	FY19	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
Т	otal		\$30.0		\$30.0	Nonrecurring	General Fund

(Parenthesis ( ) Indicate Expenditure Decreases)

### SOURCES OF INFORMATION

LFC Files

Responses Received From Department of Health (DOH)

#### **SUMMARY**

### Synopsis of Amendment

The amendment inserts the word "interim" in two places in the "resolved" section of the memorial to make it clear that it is the "interim Legislative Health and Human Services Committee" to which the trauma system task force would report.

## Synopsis of Original Senate Joint Memorial

Senate Joint Memorial 16 requests that the Secretary of the Department of Health establish a task force to study funding mechanisms for New Mexico's trauma center system. The memorial notes that the number of trauma centers statewide has increased from five to twelve, with four more planned. Meanwhile, state funding has decreased from \$5.25 million in 2009 to \$1.55 million in 2017. Further expansion and development of the trauma system depends in part on finding additional funding.

#### FISCAL IMPLICATIONS

There is no appropriation DOH estimates that its costs for staffing and providing resources to the task force would be \$30,000 for its year of operation.

## Senate Joint Memorial 16/aHHHC - Page 2

# **SIGNIFICANT ISSUES**

Much trauma occurs in both the uninsured portion of the population and also in the formerly uninsured population now covered through the Medicaid expansion or the health exchange. It is difficult for trauma centers to shift all costs for uncompensated care to the insured population. Uncertainties in the health coverage to be offered through the Affordable Care Act in the next four years increase the need for planning for funding the trauma centers, maximizing all possible sources of income.

DOH notes that New Mexico has a far higher per capita need for trauma services than most states, emphasizing a death toll for unintentional trauma at a rate 57 percent higher than the national average, with the rate three times as high for New Mexico's Native American population than for other groups in the state.

# WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

A task force to study modes of funding existing and additional trauma centers would not be created.

LAC/al/jle/sb/jle