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# FISCAL IMPACT REPORT

SPONSOR	Ram	105	ORIGINAL DATE LAST UPDATED	2/18/19	HB	
SHORT TITLE Compreh		Comprehensive He	alth Careers Program		SB	480

ANALYST Chenier

### **<u>APPROPRIATION</u>** (dollars in thousands)

Appropr	iation	Recurring	Fund Affected	
FY19	FY20	or Nonrecurring		
	\$327.0	Recurring	General Fund	

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION LFC Files

<u>Responses Received From</u> Department of Health (DOH)

### SUMMARY

#### Synopsis of Bill

Senate Bill 480 appropriates \$327 thousand from the general fund to DOH for expenditure in FY20 to fund a comprehensive health careers program operated by an entity with at least five years' experience in training youth located in rural New Mexico to enter health careers and provide regional training opportunities in a wide range of primary-care-related health professions.

#### FISCAL IMPLICATIONS

The appropriation of \$327 thousand contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of FY20 shall revert to the general fund.

#### SIGNIFICANT ISSUES

DOH provided the following:

DOH is currently leading a rural health policy project, working with a collaborative team that includes legislators, addressing ways to recruit and retain more healthcare providers

and increase incentives for them to work in rural communities. One way is to support education programs in public schools and two- and four-year higher education institutions that encourage health sciences careers.

New Mexico has a significant shortage of physicians, and the demand for health care services impacts those residing in rural parts of the state where access to health centers and hospitals is difficult. Thirty-two of New Mexico's 33 counties contain health care professional shortage areas as designated by the federal government. One in five New Mexicans lives below the Federal Poverty Line and almost one in five has no health insurance coverage. (Health Equity in New Mexico, 12th Edition, New Mexico Department of Health, 2018, <u>https://nmhealth.org/publication/view/report/2045/</u>).

Little research exists to support the effectiveness of youth health career pathway programs in building the primary care workforce, especially for rural areas. Long term tracking of students remains a challenge in assessing whether those students involved in health career pathway programs pursued a health career. Other states, including New York, Connecticut and Massachusetts, have similar youth programs as outlined in the bill, but no data exists on whether participants pursued health careers (https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4286884/, https://www.cga.ct.gov/2002/rpt/2002-R-0716.htm, http://www.bu.edu/today/2017/youth-to-health-careers-v2hc/).

The New Mexico Health Care Workforce Committee's 2015 report includes a recommendation that "Career interest-building programs in New Mexico that recruit students into the health care professions before or during high school and as undergraduates should be carefully monitored and best practices adopted. Both short-term and long-term outcome measures should be required for state funding of these programs."

(https://www.adea.org/uploadedFiles/ADEA/Blogs/ADEA\_State\_Update/NMHCWFC\_2 015Report\_FINAL.pdf - accessed 1/22/19)

The requirement of the bill to provide regional training opportunities in a wide range of primary-care-related health professions lacks detail. The term "primary-care-related health professions" is undefined, although this typically refers to physicians, nurse practitioners and physician assistants working in the fields of family medicine, internal medicine, pediatrics, and OB/GYN. It is also not clear whether the appropriation in the bill is intended to provide training for students, for post-graduate clinicians in residency programs, or for practicing clinicians (i.e., continuing medical education). If the bill were enacted, DOH would have to determine how to best meet the intent.

## ADMINISTRATIVE IMPLICATIONS

DOH said it is anticipated that two different vendors would be required for the two deliverables that would be funded through the bill. Request for proposals (RFP) processes would need to be implemented to distribute these funds. Costs related to DOH staff time and materials development would be required to conduct the RFP process and oversee the resulting contracts.

# **DISPARITIES ISSUES**

DOH provided the following:

There are disparities in the number of healthcare professionals from rural communities but even more in the populations represented in New Mexico, and addressing those disparities is a health equity strategy (<u>http://www.nationalacademies.org/hmd/Reports/2002/Unequal-Treatment-Confronting-Racial-and-Ethnic-Disparities-in-Health-Care.aspx</u>).

The HRSA Health Careers Opportunity Program (HCOP) was started as a way to address disparities in educationally/economically disadvantaged populations across the country. HRSA currently funds National HCOP Academies to support and guide individuals from backgrounds disadvantaged ender health profession to а (https://bhw.hrsa.gov/fundingopportunities/?id=7ac73271-d9de-49f3-b196-be1444208c90). HCOP funding at the University of New Mexico Health Sciences Center is similar but primarily serves the Albuquerque metropolitan area. New Mexico State University was an HCOP recipient for one grant cycle and focused on border health and demonstrated a particular need from that perspective (https://research.utep.edu/portals/379/040.pdf), but has not had funding since.

Although the literature base does not support evidence in producing health professionals, there is evidence demonstrating value to economically and educationally disadvantaged students in knowing more about opportunities in health professions, improving academic skills, and potentially improving high school graduation rates. Fernandez-Repollet, E., Locatis, C., De Jesus-Monge, W.E. et al. BMC Med Educ (2018) 18: 84. https://doi.org/10.1186/s12909-018-1205-3); Effectiveness of Pre-Baccalaureate Health Careers Opportunity Programs (HCOP) for Disadvantaged Students in Three Southern States.

Thirty-two of New Mexico's thirty-three counties are designated, entirely or partially, as primary medical care shortage areas by the federal government (<u>http://hpsafind.hrsa.gov/HPSASearch.aspx</u>).

EC/sb