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# FISCAL IMPACT REPORT

SPONSOR	Stefanics	ORIGINAL DATE LAST UPDATED	2/3/2020	НВ	
SHORT TITL	E Health Provider &	Social Services Networ	k Help	SB	77
			ANAL	YST	Klundt

# **APPROPRIATION (dollars in thousands)**

Appropr	iation	Recurring	Fund Affected	
FY20	FY21	or Nonrecurring		
	\$50.0	Recurring	General Fund	

(Parenthesis ( ) Indicate Expenditure Decreases)

### SOURCES OF INFORMATION

LFC Files

Responses Received From Department of Health (DOH)

### **SUMMARY**

Synopsis of Bill

Senate Bill 77 (SB77) appropriates \$50 thousand from the general fund to the Department of Health (DOH) for programs that assist individuals with navigating through and accessing resources within health provider and social service networks in their communities.

## FISCAL IMPLICATIONS

The appropriation of \$50 thousand contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of fiscal year 2021 shall revert to the general fund.

#### SIGNIFICANT ISSUES

DOH noted there are several programs within the department that currently provide this type of navigation and assistance to individuals including Families FIRST, Children's Medical Services, the Oral Health program, and the TB program. Funds directed to any of these programs could impact operations.

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DOH also reported, according to the American Academy of Pediatrics, care coordination is defined as "a process that links children and youth with special health care needs (CYSHCN) and their families with appropriate services and resources in a coordinated effort to achieve good health. Care coordination is increasingly emerging as an 'answer' to health care and community system fragmentation. In recent years, the Affordable Care Act has encouraged and incentivized care coordination services for patients with higher levels of medical complexity. The Affordable Care Act also encouraged the development of both high-performing primary care practices, also known as patient-centered medical homes, and accountable care organizations that would then provide care coordination services."

Children and youth with special health care needs and their families generally require multiple services from different providers associated with different agencies, institutions and organizations. This calls for a service delivery system with coordinated service provision. Coordination between programs serving infants and young children, school age children and adolescents and young adults are lacking; these services are highly fragmented instead of coordinated. Because of this fragmentation, children and youth with special health care needs and their families are likely to encounter significant difficulties in obtaining needed comprehensive services.

Many public and private programs serving children, youth, and their families have different mandates, eligibility requirements, and inconsistent policies. This leads to gaps and/or duplications in services and may only serve specific age groups.

Community-based services must be integrated, consistent, and timely to be responsive to the needs of families. The Maternal and Child Health and Children and Youth with Special Health Care Needs programs could facilitate access to care within their community by coordinating health services and creating linkages between providers of health services and providers of other services. In an ideal system there would be coordination and cooperation among health care professionals at the primary, secondary, and tertiary levels of care; there would be cooperation among all sectors - public, private and voluntary; and, all departments and levels of government would work together across agency lines and among community, state, regional, and national levels to ensure effective and efficient services.

"For many individuals visiting their Primary Care Providers, the reasons *not* to follow up on that referral may outweigh the incentives of taking that next step. Perhaps the patient is embarrassed to tell his family that he is going to a counselor. Perhaps he feels pressed for time to make calls to see which counselor is accepting new clients. Maybe he simply can't take off from work for yet another appointment at a different office. As a result, he oftentimes doesn't get the care he needs."

One study by the American Academy of Pediatrics cited approximately 40 percent of parents of children with mental health conditions who reported a need for care coordination also reported that their need was unmet. Delivery of family-centered care and enhanced family supports may help to reduce unmet need for care coordination in this vulnerable population. *Pediatrics* March 2014, 133 (3) e530-e537.

The report, "The Emerging Field of Patient Navigation: A Golden Opportunity to Improve Healthcare," describes the importance of patient navigators - individuals whose role is to guide patients through the health system and help them overcome barriers to care. The potential

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benefits of patient navigators include improved health outcomes, increased patient satisfaction, decreased no-show rates and reduced disparities in care. These benefits in turn can help hospitals avoid revenue loss and increase revenue, according to the report. For instance, patient navigators can guide patients through transitions of care, which can reduce readmissions and avoid cuts to hospitals' Medicare payments. In addition, improving patient satisfaction can help hospitals meet value-based purchasing program goals and receive shared savings.

KK/sb/al