

HOUSE JOINT MEMORIAL 9

44TH LEGISLATURE - STATE OF NEW MEXICO - 2ND SPECIAL SESSION, 2000

INTRODUCED BY

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A JOINT MEMORIAL

REQUESTING THE DEPARTMENT OF HEALTH TO ESTABLISH A TASK FORCE TO DEVELOP A CRITICAL ACCESS COMMUNITY HEALTH CARE PROVIDER DESIGNATION.

WHEREAS, New Mexico provides and funds multiple programs aimed at improving the distribution of health professionals in rural and underserved areas of the state; and

WHEREAS, all or part of thirty-one of our thirty-three counties remain classified as medically underserved; and

WHEREAS, the capacity of most rural areas of New Mexico to sustain adequate health care systems is limited, as indicated by the fact that twenty-one of our counties are designated "frontier" with populations of fewer than seven persons per square mile and at least twenty percent of our population is without health insurance; and

WHEREAS, there is a wide variety of health service delivery systems, including sole practitioners, private group

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1 practices, community health clinics, hospital-based clinics
2 and various state public health services; and

3 WHEREAS, a survey of health professionals indicates a
4 high degree of variability in factors to consider in
5 recruiting and retaining those types of practitioners in
6 rural and underserved areas, including practitioners'
7 satisfaction with their working circumstances; and

8 WHEREAS, other states have effectively utilized a system
9 of designating certain health care providers as critical for
10 health care service access and have provided them with
11 various benefits to stabilize the provider community in those
12 rural and underserved areas;

13 NOW, THEREFORE, BE IT RESOLVED BY THE LEGISLATURE OF THE
14 STATE OF NEW MEXICO that the primary care bureau of the
15 department of health establish a task force to develop
16 operational aspects of a critical access community health
17 care provider designation in order to improve the continuing
18 access to health care in rural and underserved areas; and

19 BE IT FURTHER RESOLVED that the task force consider
20 various eligibility criteria, including the designation of
21 primary care health professionals as critical access
22 community health care providers in order to promote the most
23 efficient and cost-effective means of maintaining a stable
24 delivery system; and

25 BE IT FURTHER RESOLVED that the task force investigate
every avenue for providing benefits, incentives and
assistance, including state-funded recruitment and retention

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1 initiatives, indigent-care reimbursement, tax deductions and
2 exemptions, differential reimbursement under state programs
3 and contracts and special consideration by contractors
4 providing health care in rural and underserved areas; and

5 BE IT FURTHER RESOLVED that careful consideration be
6 given to requirements and responsibilities of providers in
7 exchange for designation as critical access community health
8 care providers, including services provided to medicaid
9 recipients and medically indigent persons; and

10 BE IT FURTHER RESOLVED that attention be paid to the
11 integration and coordination of a critical access community
12 health care provider system with other state recruitment and
13 retention efforts and programs aimed at improving geographic
14 access to health services; and

15 BE IT FURTHER RESOLVED that the task force recommend
16 methods of measuring the effectiveness and impact of such a
17 program; and

18 BE IT FURTHER RESOLVED that the task force coordinate
19 with the New Mexico health policy commission and other health
20 planning entities in its work; and

21 BE IT FURTHER RESOLVED that the department of health
22 report its findings to the legislative health and human
23 services committee by October 1, 2000; and

24 BE IT FURTHER RESOLVED that copies of this memorial be
25 transmitted to the secretary of health, the New Mexico health
policy commission and the legislative health and human
services committee.

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