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FISCAL IMPACT REPORT

SPONSOR: McSorley DATE TYPED: 03/16/01 HB _____
 SHORT TITLE: Immigrants' Health Care Study SB SJM 52/aSRC
 ANALYST: Dunbar

APPROPRIATION

Appropriation Contained		Estimated Additional Impact		Recurring or Non-Rec	Fund Affected
FY01	FY02	FY01	FY02		
			See Narrative		

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

Human Services Department (HSD)
 Health Policy Commission
 State Agency on Aging

SUMMARY

Synopsis of HCPAC Amendment

House Consumer and Public Affairs Committee amends SJM-52 by modifying the language pertaining to the University of NM hospital to read that the hospital “is prohibited, under present law, from providing financial assistance for care to undocumented immigrants, except for emergency care and care for communicable diseases.”

Synopsis of SRC Amendment

The Senate Rules Committee amendment of SJM 52 includes additional language pertaining to sliding scale co-payments or community services to be studied as a means as to how indigent persons can receive health care. The study is to be conducted by the Health Policy Commission, Department of Health and the Human Services Department.

Synopsis of Original Joint Memorial

SJM 52 requests that the Department of Health (DOH), New Mexico Health Policy Commission (HPC) and the Human Services Department (HSD) conduct a study to evaluate the provision of health care to immigrants in New Mexico, regardless of immigration status.

The memorial requests that a report of the findings of the study be presented to the interim Legislative Health and Human Services Committee by the November 2001 meeting and that a copy of the

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memorial be sent to the Secretary of Health, the Secretary and Deputy Secretaries of Human Services and the Chairman of the New Mexico Health Policy Commission.

Significant Issues

Sections in the bill include:

- Concerns about changes in some policies regarding Medicaid following the passage of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA).
- Concerns that PRWORA denies public benefits to undocumented workers except as permitted by state law.
- Acknowledgment that the thousands of immigrants (legal or illegal) that have lived and worked in New Mexico for generations have made significant contributions to the state in taxes, labor and cultural exchanges and that indigent health care is provided in communities throughout the state through the taxes that they pay.
- Acknowledgment that by providing health care to immigrants and ensuring that the immigrant population is protected and treated for communicable disease will help increase the contributions of immigrants in New Mexico.
- Recognition that it is more cost-effective for the state to provide clinical preventative care than critical care in emergency rooms and hospitals.
- Concerns that New Mexico did adopt the federal option to provide Medicaid to immigrants who were in the country as of August 22, 1996, but has taken no action to provide health care to legal immigrants who came into the state after August 22, 1996 and that New Mexico should begin the process for providing health care services to this population.
- The cities of Albuquerque and Santa Fe have declared themselves to be immigrant-friendly.
- The HPC has supported the expansion of the use to under-served populations with county indigent funds and that much of the set aside money for county-supported indigent funds goes unused with counties continually seeking to spend this money on services other than health care.

PERFORMANCE IMPLICATIONS

HPC is required to conduct performance-based budgeting and these job responsibilities will have performance implications attached that have not yet been assigned.

FISCAL IMPLICATIONS

SJM 52 does not appropriate funding to cover the costs of conducting a study. The fiscal impact to any of the agencies identified in HJM 52 will depend on the type and complexity of the study requested and methodology to be used.

HPC remarks that unless the cut of \$ 200,000 in HB 2 and SB 98 of the proposed contractual line item of HPC is restored, funds will not be available in FY 02 for the HPC to conduct an extensive study of the issues contained in HJM 52.

The Health Policy Commission recognizes its role and statutory authority to monitor access to health care and has always honored its commitments to meet the requirements of legislative requests. However, HPC points out that it should be noted that the time frame for conducting this study is

short given the nature of the request.

If collection of new data is required to fulfill the intent of the initiative, surveys may be necessary.

The HPC supplied the following cost figures:

- Written mail surveys, estimated cost is in excess \$60,000. Written surveys would also have to be language appropriate and interpreters would be required for assistance and follow-up and would increase cost.
- Telephone surveys, which would likely miss a great portion of the population in question with no telephone, would cost approximately \$120,000.
- Face-to-face interviews, which would be likely to reach a greater portion of the immigrant population in New Mexico could cost as much as \$100,000. As estimated by the Bureau of Business and Economic Research (BBER) in 1999, the cost of face-to-face interviews can approach \$100/person .

If the desired outcome of the initiative proposed in SJM 52 can be derived from a compilation and analysis of existing data, the effort would be less time consuming and less expensive.

ADMINISTRATIVE IMPLICATIONS

The limited time span of six months to conduct the study and analysis is shortened if there is not a need for a request for proposal (RFP) and review and design of a data tool. This may also have implications on the performance objectives and time frames for other HPC projects.

RELATIONSHIP

HB 129, SB 33, SB 418, SB 479 - Tobacco Settlement Program Fund distributions for Medicaid expansion.

HB 238, SB 392, SB 479 – expand Medicaid eligibility to certain TANF recipients.

SB 911 expanding health care coverage to all New Mexicans.

TECHNICAL ISSUES

Reference is made to Page 4, lines 6-8 -- The HPC states that the New Mexico Health Policy Commission has supported legislation expanding the populations served by Medicaid, as well as expanding the services that can be reimbursed with county indigent funds. However, the HPC has not endorsed expanding the populations served by county indigent funds.

OTHER SUBSTANTIVE ISSUES

It may be appropriate to establish a lead agency for the initiative proposed in SJM 52.

HPC notes that the intent of the initiative in SJM 52 is not clear as to the desired outcome of the proposed study. The language with respect to the first resolution concerning a study to be conducted by DOH, HPC, and HSD refers to access to health care services by “indigent persons, regardless of immigration status.” as the focus of the study, whereas the issues that create the resolution HPC notes are concerned with immigrant populations.

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The HPC has conducted several of these studies including:

- HJM 18 (2000), Restructuring Health Care Financing
- HPC Household Survey, *Health Care Coverage and Access in New Mexico* (1998)
- Blueprint for Change (HJM 20, SJM 36, 1996)
DOH and HSD have conducted a variety of surveys and studies as well.

HPC reports that all immigrants, regardless of status are eligible for public health assistance funded through sources other than the Medicaid program and Medicaid coverage for emergency services subject to lack of other resources to pay for medical services. Additionally, the Attorney General also is directed to reimburse states or local governments for the costs of ambulance service for individuals injured while attempting to cross the border illegally or who are injured while in state or local custody pursuant to a federal transfer request. In these circumstances, as directed by the Attorney General, providers are not required to verify the citizenship, nationality and immigration status of applicants for these service.

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