NOTE: As provided in LFC policy, this report is intended only for use by the standing finance committees of the legislature. The Legislative Finance Committee does not assume responsibility for the accuracy of the information in this report when used for other purposes.

The most recent FIR version (in HTML & Adobe PDF formats) is available on the Legislative Website. The Adobe PDF version includes all attachments, whereas the HTML version does not. Previously issued FIRs and attachments may be obtained from the LFC in Suite 101 of the State Capitol Building North.

## FISCAL IMPACT REPORT

SPONSOR:	JP Taylor	DATE TYPED:	3/10/03	HB	354
SHORT TITLE	: Personal Responsibili	ty Education Prog	am	SB	

ANALYST: D

Dunbar

### APPROPRIATION

Appropriation Contained		Estimated Additional Impact		Recurring or Non-Rec	Fund Affected
FY03	FY04	FY03	FY04		
	\$310.0			Non-Recurring	GF

(Parenthesis () Indicate Expenditure Decreases)

### SOURCES OF INFORMATION

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

### SUMMARY

#### Synopsis of Bill

HB354 appropriates \$310.0 from the General Fund to the Department of Health in fiscal year 2004 for the purpose of contracting with a health education program to educate low-income families on traditional family health care techniques, nutrition, home first aid and how to obtain necessary health care services.

#### **Significant Issues**

Education on appropriate health measures that can be taken at home pertaining to first aid, nutrition, and use of other services can prevent costly emergency room visits and days missed from work or school due to illness. The bill would offer an opportunity to provide assistance to lowincome families in making informed decisions regarding their own health.

### **PERFORMANCE MEASURES**

Proposed Performance Measures for clients served by the program:

• Percent of participants who report being able to make better health care decisions

### House Bill 354 -- Page 2

• Percent of participants who report fewer emergency department visits as a result of the program

# FISCAL IMPLICATIONS

The appropriation of \$310.0 contained in this bill is a expense to the general fund. Any unexpended or unencumbered balance remaining at the end of FY 04 shall revert to the general fund.

## ADMINISTRATIVE IMPLICATIONS

The Maternal, Child, Adolescent and Family Section of the Family Health Bureau could manage this additional program with current staff resources.

## **TECHNICAL ISSUES**

The language of the bill does not define "traditional", which may be interpreted in different ways by people of different traditions.

HB354 does not specify which "health education program" might be considered.

# **OTHER SUBSTANTIVE ISSUES**

Family education and improving access to health services are two needs mentioned often in County MCH Plans. Families may not know how to care for their child, or when to see a physician for preventive care, resulting in unnecessary emergency room visits, hospitalization for a condition that could have been managed as an outpatient, school absences, and missed days of work.

New Mexico has increasing numbers of children in poverty. According to the New Mexico Selected Health Statistics, in 2000, 1 in 4 children lived below the Federal Poverty Line. With limited income, families must make difficult choices between buying groceries or medicine. If integrated into existing programs, this program could also provide opportunity for outreach and enrollment in Food Stamps and Medicaid. Family education in health care and nutrition will help assure the best possible outcome in child health, development, education, and parental employment.

S.E.T. (Service, Empowerment, Transformation) of New Mexico is an organization that provides the services described in HB 354. This program is in its 9<sup>th</sup> year of operation. They have served over 16,000 statewide participants providing them with personal health care training and education. Results of surveys conducted with participants six months following their participation in training provide the following results:

- 66% indicate training saved them an emergency department visit
- 63% report using the training materials in their home
- 74% report feeling more confident to make health care decisions in their home
- 75% report fewer visits to the doctor
- 75% report more confidence communicating with their doctors.

# House Bill 354 -- Page 3

States, including New Mexico, have implemented Community Health Workers and Promotoras Programs, which teach laypersons to conduct basic health care outreach in their local communities. The Promotoras reach many of the uninsured, low income and immigrant populations who might otherwise not receive any health care services at all.

BD/njw:yr