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FISCAL IMPACT REPORT

SPONSOR:	Begaye	DATE TYPED:	2/25/03	HB	608
SHORT TITLE	E: Native American HI	V & AIDS Program	18	SB	
			ANALY	ζST:	Dunbar

APPROPRIATION

Appropriation Contained		Estimated Additional Impact		Recurring or Non-Rec	Fund Affected
FY03	FY04	FY03	FY04		
	\$200.0			Recurring	GF

Relates to SB 49; HB 485; HB 144; HB 577

SOURCES OF INFORMATION

Responses Received From

Department of Health (DOH)

SUMMARY

Synopsis of Bill

House Bill 608 to appropriates \$200,000 from the general fund to the Department of Health for Native American HIV and AIDS prevention programs in fiscal year 2004.

Significant Issues

The appropriation in HB 608 would be specifically for Native American HIV prevention programs. Native Americans constitute 9% of the population of New Mexico. Currently, Native Americans represent 6% of the HIV/AIDS epidemic in New Mexico. The current funding level for Community Based Programs (CBOs) serving primarily the state's Native American populations is 18% of the total contractual budget dedicated to HIV/AIDS prevention activities.

There are five community-based organizations (CBO) that currently provide HIV/AIDS and related prevention services primarily to Native Americans. These organizations could utilize additional funding to increase the number and intensity of HIV prevention interventions provided to Native Americans. To realize such an increase in prevention services would require increased

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number of trained staff to provide these services. This would necessitate additional organizational support to staff, including training. Training could be an issue because accessing the necessary training over a short period of time may be difficult.

FISCAL IMPLICATIONS

The appropriation of \$200.0 contained in this bill is a recurring 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

If appropriated, these funds could be managed within existing DOH resources.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

Relates to:

SB 49 and HB 485 which appropriate general fund monies for HIV/AIDS services and prevention

HB 144, which maintains funding from the Tobacco Fund for HIV/AIDS services and prevention

HB 577, which appropriates general fund monies for HIV/AIDS services for Native Americans with HIV/AIDS.

OTHER SUBSTANTIVE ISSUES

Of the 108 Native Americans living with HIV/AIDS that are in the DOH HIV/AIDS Epidemiological database, 80% are male and 20% are female. There is a problem providing prevention services in large rural areas where cultural barriers exist. DOH states that the barriers associated with Native American men identifying as a Man (Men) who has Sex with Men are great. These barriers include isolation and stigmatization. Factors associated with unsafe sexual behavior also include poverty and substance use.

Approximately 55% of the Native American population in New Mexico are living in urban areas, where they encounter the same barriers as they might encounter in their home communities—stigmatization and isolation—and similar risk taking factors may be significant--poverty and substance use. For both rural and urban Native American populations, interventions would need to be tailored to the needs of the target population within that setting.

Currently the state is required by the Centers for Disease Control (CDC) to conduct process monitoring, reporting the number of different interventions provided to different risk groups. In order to determine the effect of additional funding specifically to one group, it would be important to establish a uniform and consistent evaluation strategy that would provide information regarding knowledge, skills and decreased risk taking behavior. This would provide the needed information to show that the intervention achieved the desired effect on the target population.

BD/sb