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FISCAL IMPACT REPORT

ORIGINAL DATE 2/16/09
 SPONSOR Picraux LAST UPDATED 3/11/9 HB 613/aHHGAC/aHBIC
 SHORT TITLE Donations to Health Policy Commission SB _____
 ANALYST Chabot

REVENUE (dollars in thousands)

Estimated Revenue			Recurring or Non-Rec	Fund Affected
FY09	FY10	FY11		
	\$5.0	\$5.0	Non-Recurring	HPC Revolving Fund

(Parenthesis () Indicate Revenue Decreases)

Duplicates SB 533
 Relates to HB 267, Health Care Authority Act
 Conflicts with SB 332, Create Office of Health Policy

SOURCES OF INFORMATION

LFC Files

Responses Received From

Attorney General's Office (AGO)
 Department of Finance and Administration (DFA)
 Department of Health (DOH)
 Human Services Department (HSD)

SUMMARY

Synopsis of HBIC Amendment

The House Business and Industry Committee amendment to House Bill 613/aHHGAC strikes proposed paragraph 9-7-11.2.E and inserts "The New Mexico health policy commission may accept donations or grant funds from foundations or other state and federal agencies as it deems suitable and in keeping with purposes of the commission and may deposit these donations into a revolving fund to further its statutory purposes."

This amendment removes qualifiers on the types of donations which were identified as money, gifts, contributions, property, bequests or memorials.

Synopsis of HHGAC Amendment

The House Health and Government Affairs Committee amendment to House Bill 613 restores the original language to duties of HPC to develop a plan for and monitor the implementation and the implementation of the state's health policy, and to prepare and publish at least one report annually addressing the states' health policy including a workplan of goals and objectives.

Synopsis of Original Bill

House Bill 613, Donations to Health Policy Commission, creates the New Mexico Health Policy Commission Revolving Fund to consist of donations of money, gifts, contributions, property, bequests or memorials from persons, corporations, foundations or agencies or the federal government. The fund is a non-reverting fund and will be administered by DFA to further the purposes of HPC.

The bill changes responsibilities of HPC:

- collaborating with DOH on developing a plan for the state's health policy,
- developing recommendations for the state's health policy,
- obtaining and evaluating factors affecting health care delivery,
- explaining topics related to health care reform and provide economic analyses of health care costs to employers and businesses,
- collection data on the financing and costs of health care including inpatient facilities, emergency departments, outpatient clinics, public health clinics and in the private sector, and
- publishing and preparing various reports.

FISCAL IMPLICATIONS

HPC estimates \$5 thousand annually might to collected.

SIGNIFICANT ISSUES

HPC reports the governing statute has not been reviewed since the commission was created and the bill would allow drawing on other sources of revenue in its operations.

DOH states the clarification in functions would provide a broader authority to HPC in planning for the health care system and in the development of recommendations for health care reform. The collaborative effort with DOH in developing health policy more clearly defines a multi-agency effort that has already been developed.

HSD reports the governor and executive agencies involved with health issues, including DOH and HSD, are supporting a bill that would move HPC under DOH as the Office of Health Policy [SB 332].

DFA assesses "Given the reductions in staff that the agency has experienced over the last several years, the expansion of duties may impair the agency's abilities to effectively fulfill its other duties as defined in current law."

The AGO assesses "House Bill 613 eliminates the Commission's responsibility of "implementing" and monitoring the state's health policy but does not indicate where that responsibility will fall otherwise. The bill also eliminates an annual reporting requirement in

favor of requiring the Commission to prepare “various reports.” However, there are no parameters or guidelines for such reporting. Absent clear guidelines, the Commission would have broad discretion over its reporting requirement. The Commission would no longer be required to report its progress on an annual basis, as long as it prepares “various reports” within an indeterminate time period.”

TECHNICAL ISSUES

To allow earning from sales of reports and other earning by the commission, recommend adding to the end of line 18, “payments,”

POSSIBLE QUESTIONS

1. How much additional revenue is expected?
2. What reports are required by other statutes? On average, how many reports are tasked to the agency by other sources, such as the Legislative Health and Human Services Committee?

GAC/mt:mc