

Fiscal impact reports (FIRs) are prepared by the Legislative Finance Committee (LFC) for standing finance committees of the NM Legislature. The LFC does not assume responsibility for the accuracy of these reports if they are used for other purposes.

Current and previously issued FIRs are available on the NM Legislative Website (www.nmlegis.gov).

FISCAL IMPACT REPORT

SPONSOR Schmedes ORIGINAL DATE 01/22/21
 LAST UPDATED 02/10/21 HB _____

SHORT TITLE Early Detection for Cerebral Palsy SB 33/aSHPAC

ANALYST Chilton

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Nonrecurring	Fund Affected
FY21	FY223		
	\$200.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From

Governor's Commission on Disability
 Department of Health (DOH; declined)
 Early Childhood Education and Care Department (ECECD)

SUMMARY

Synopsis of SHPAC Amendment

The Senate Health and Public Affairs Committee amendment to Senate Bill 33 replaces in two locations the designation "Department of Health" with "Early Childhood Education and Care Department" as the destination for the appropriation. The intended recipient of the funds, the family, infant toddler program, was transferred from DOH to ECECD when the new department came into existence.

Synopsis of Original Bill

Senate Bill 33 appropriates \$200 thousand to the Department of Health's Family, Infant and Toddler (FIT, which is now located in the Early Childhood Education and Care Department rather than DOH) program to conduct training and technical assistance to health care providers on early detection of children at risk for cerebral palsy.

There is no effective date of this bill. It is assumed that the effective date is 90 days following adjournment of the Legislature.

FISCAL IMPLICATIONS

Senate Bill 33 would appropriate \$200 thousand to the family, infant and toddler program, now part of the early childhood education and care department, to train health care practitioners on the early signs of cerebral palsy in infants in fiscal years 2022 and 2023.

The appropriation of \$200 thousand contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of each fiscal year shall revert to the general fund.

SIGNIFICANT ISSUES

In a 2019 article by te Velde et al, “Early Diagnosis and Classification of Cerebral Palsy: An historical perspective and barriers to early diagnosis,” J. Clinical Medicine 2019 (10): 1599, the authors point both to the importance of early diagnosis of cerebral palsy (CP) and the difficulty clinicians find in making an early diagnosis. If the diagnosis is made early, specific therapy can ameliorate the symptoms, taking advantage of the plasticity of the infant’s nervous system, avoiding later deficits and their associated costs.

There are a two major factors mentioned by te Velde et al that may interfere with early diagnosis: criteria may be easily missed in young infants where movement abnormalities may be especially subtle, and different types of cerebral palsy (for example, hypotonic, dyskinetic, spastic/hypertonic) present in markedly different ways. In addition, these authors point out a lack of measurable laboratory or radiographic findings or definitive examination findings in CP, worry about making a false diagnosis and causing attendant worry and grief and possibly self-blame among parents of their patients, as well as a desire to rule out any treatable conditions before coming to the diagnosis of CP. Te Velde et al conclude that “Identifying barriers to clinicians feeling confident to make an early diagnosis of CP will help to ensure we do not disadvantage children by a late diagnosis denying them CP-specific early intervention opportunities aimed at optimizing future outcomes.”

As noted by the Governor’s Commission on Disability, “Early detection and treatment of cerebral policy can improve a child’s muscle control, cognitive outcomes, and increases early learning to accomplish tasks independently and with support. More information can be found here - <https://www.cdc.gov/ncbddd/cp/diagnosis.html>; <https://www.ninds.nih.gov/Disorders/All-Disorders/Cerebral-Palsy-Information-Page>”

Research on the effectiveness of health care provider education in leading to early detection could not be found in the medical literature, but would be expected, both to lead to early treatment and to a greater sensitivity of providers to the needs of families with infants deemed to be at risk of cerebral palsy.

TECHNICAL ISSUES

As noted by ECECD, the bill does not indicate an effective date for the training and technical assistance to commence.