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FISCAL IMPACT REPORT

SPONSOR Ortiz y Pino **ORIGINAL DATE** 1/26/21
LAST UPDATED _____ **HB** _____
SHORT TITLE Study State Data Pertinent to Brain Injury **SB** 65
ANALYST Chilton

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Nonrecurring	Fund Affected
FY21	FY22		
	\$150.0	Nonrecurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From

Department of Health (DOH)

Human Services Department (HSD)

Governor’s Commission on Disability (GCD)

SUMMARY

Synopsis of Bill

Senate Bill 66, “Study State Data Pertinent to Brain Injury” appropriates \$150 thousand from the general fund to the department of health for the purpose of contracting with an outside provider to study statewide data on patients suffering brain injuries and the adequacy of resources to serve them, to study services available to brain injured patients in other states, and to make recommendations for expansion and development of additional services within New Mexico.

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

The appropriation of \$150 thousand contained in this bill is a nonrecurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of fiscal year 2022 shall revert to the general fund.

SIGNIFICANT ISSUES

According to the Mayo Clinic, “Traumatic brain injury usually results from a violent blow or jolt to the head or body. An object that penetrates brain tissue, such as a bullet or shattered piece of skull, also can cause traumatic brain injury.” Common causes include the following:

- **Falls.** Falls from bed or a ladder, down stairs, in the bath and other falls are the most common cause of traumatic brain injury overall, particularly in older adults and young children.
- **Vehicle-related collisions.** Collisions involving cars, motorcycles or bicycles — and pedestrians involved in such accidents — are a common cause of traumatic brain injury.
- **Violence.** Gunshot wounds, domestic violence, child abuse and other assaults are common causes. Shaken baby syndrome is a traumatic brain injury in infants caused by violent shaking.
- **Sports injuries.** Traumatic brain injuries may be caused by injuries from a number of sports, including soccer, boxing, football, baseball, lacrosse, skateboarding, hockey, and other high-impact or extreme sports. These are particularly common in youth.
- **Explosive blasts and other combat injuries.** Explosive blasts are a common cause of traumatic brain injury in active-duty military personnel. Although how the damage occurs isn't yet well-understood, many researchers believe that the pressure wave passing through the brain significantly disrupts brain function.

Traumatic brain injury also results from penetrating wounds, severe blows to the head with shrapnel or debris, and falls or bodily collisions with objects following a blast.

Traumatic brain injury, whether occurring on a single occasion or on multiple occasions, as with National Football League players, may cause both short-term and long-term problems, such as movement disorders and cognitive dysfunction.

Unfortunately, traumatic brain injuries are not uncommon. According to the Centers for Disease Control and Prevention,

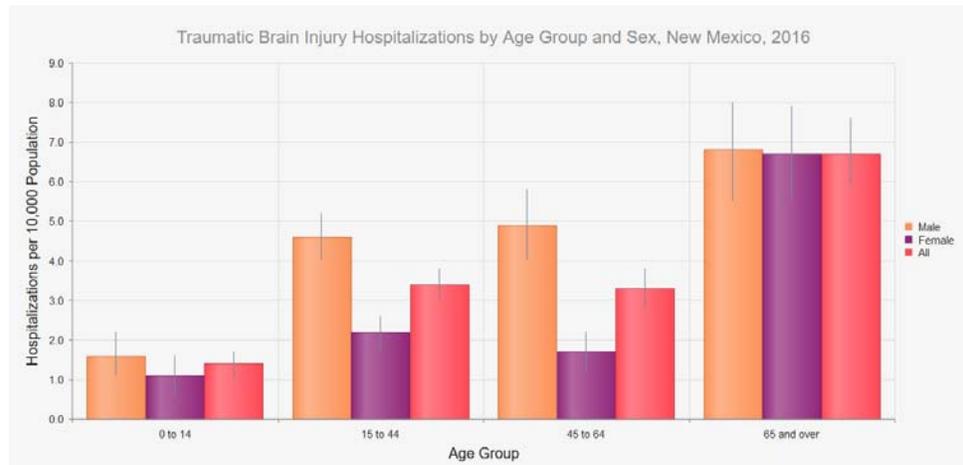
Traumatic brain injury (TBI) is a leading cause of death and disability among children and young adults in the United States. Each year an estimated 1.5 million Americans sustain a TBI. As a consequence of these injuries:

- 230,000 people are hospitalized and survive.
- 50,000 people die.
- 80,000 to 90,000 people experience the onset of long-term disability.

As the cumulative result of past traumatic brain injuries, an estimated 5.3 million men, women, and children are living with a permanent TBI-related disability in the United States today.

While the risk of having a TBI is substantial among all age groups, this risk is highest among adolescents, young adults, and persons older than 75 years. The risk of TBI among males is twice the risk among females.

DOH reports collecting some data on New Mexico residents’ experiences with traumatic brain injuries:



Consistent with national data, New Mexico’s statistics show that the elderly and younger males have the highest incidence of hospitalization for severe head injury.

DOH notes the following data about nationwide statistics on traumatic brain injury:

Even after surviving moderate to severe TBI and receiving rehabilitation services, the CDC

https://www.cdc.gov/traumaticbraininjury/pdf/Moderate_to_Severe_TBI_Lifelong-a.pdf) finds that a person’s life expectancy is 9 years shorter because a previous TBI increases the risk of seizures, accidental drug poisonings, infections, and pneumonia. In addition, people with TBI face a variety of chronic health problems. These issues add costs and burden to those with TBI and their families. Among those still living 5 years after injury, 57 percent are moderately to severely disabled, 55 percent do not have a job (despite being employed at the time of their injury), 50 percent return to a hospital at least once, 33 percent rely on others for help with everyday activities, 29 percent are not satisfied with life, and 29 percent use illicit drugs or misuse alcohol. Coordinated long-term care can help prevent or reduce consequences of TBI such as: decreased life expectancy, poor health, limited function, and low quality of life.

The bill will affect NMDOH stakeholders and customers positively if it results in a thorough assessment of available TBI data and resources and gaps, and if that assessment results in effective prevention and/or access to services.

HSD states that its Brain Injury Services Fund (BISF) currently serves 123 brain-injured New Mexicans awaiting Medicaid eligibility and 743 Medicaid-eligible patients throughout the state with brain injury.

ADMINISTRATIVE IMPLICATIONS

DOH indicates that its staff “will have to spend time locating a qualified contractor, and monitoring the contract associated with the funds appropriated by this bill.” HSD would be charged with delivering data on those traumatic brain-injured patients it serves.

RELATIONSHIP with SB109, which would appropriate \$500 thousand to the brain injury services fund (BISF), referred to above. The BISF is one of the resources that would be evaluated as part of the contracted survey.

TECHNICAL ISSUES

GCD suggests using the term “traumatic brain injury” in the bill, rather than “acquired brain injury,” as the latter term also encompasses stroke, aneurysm and brain tumor.

OTHER SUBSTANTIVE ISSUES

As noted by HSD, “New Mexico is currently in the process of establishing an all-payer claims database (APCD), which is a consolidated database that will contain claims from both public and private insurance. The lack of an existing database may increase the administrative burden for collecting statewide data pertinent to brain injury until the APCD is operational. DOH is the lead state agency for the APCD.”

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