AGENCY BILL ANALYSIS 2024 REGULAR SESSION

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SECTION I: GENERAL INFORMATION

[Indicate if analysis is on an original bill, amendment, substitute or a correction of a previous bill]

Date 1/23/24 Bill No: SB156		
gency Name nd Code HSD-630 umber:		
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APPROPRIATION (dollars in thousands)

Appro	priation	Recurring	Fund Affected	
FY24	FY25	or Nonrecurring		
	\$1,000.0	Nonrecurring (non-reverting)	General Fund (Brain Injury Services Fund)	
	\$600.0	Nonrecurring (reverting)	General Fund (HCA)	
	\$300.0	Nonrecurring (reverting)	General Fund (UNM)	

(Parenthesis () Indicate Expenditure Decreases)

REVENUE (dollars in thousands)

Estimated Revenue			Recurring	Fund
FY24	FY25	FY26	or Nonrecurring	Affected
	\$1,900.0	NA	Nonrecurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY24	FY25	FY26	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
Total		\$140.7	\$140.7	\$281.4	Recurring	General Fund
		\$140.7	\$140.7	\$281.4	Recurring	Federal Match Dollars

(Parenthesis () Indicate Expenditure Decreases)

Duplicates/Conflicts with/Companion to/Relates to: None

Duplicates/Relates to Appropriation in the General Appropriation Act: None

SECTION III: NARRATIVE

BILL SUMMARY

Synopsis: SB156 provides that the "brain injury services fund" is created as a nonreverting fund in the state treasury. SB156 expands or clarifies the definition of brain injury to include hypoxia-ischemia; abusive head trauma; and exposure to a toxic or chemical substance. SB156 proposes to appropriate one million (\$1,000.000.00) of non-reverting general fund dollars to the Brain Injury Services Fund (BISF) to establish and support the brain injury registry and to purchase or develop a website for the brain injury registry. The fund is to be managed by the Healthcare Authority Department (HCA). SB156 also proposes to allocate six hundred thousand dollars (\$600,000.00) in reverting general funds to the HCA to conduct brain injury surveillance and three hundred thousand dollars (\$300,000.00) to the University of New Mexico (UNM) to partner with the HCA to facilitate an extension for community health care outcomes project focused on brain injury.

FISCAL IMPLICATIONS

Prior to FY24, the BISF was funded through a \$5 fee applied to each moving traffic violation. The BISF received on annual average of \$603,205.71 in funding from court fees. In addition to court fees, MAD sets aside \$460,000 annually in general fund dollars to supplement the program.

HB139 was chaptered during the 2023 legislative session. HB139 eliminated the state-mandate post-adjudication fees assessed in traffic cases but did not provide recommendations for additional funding for the BISF program. Under HB139, the BISF lost its main source of funding.

Recurring funds from SB156 to the BISF would ensure continuation of services for those already in the program and continuation of the program in future years for those seeking services.

SIGNIFICANT ISSUES

Non-recurring funds means that the brain injury surveillance and any initiatives under community health programs may not continue after FY25 or would require HCA to receive additional funds

for the maintenance of the registry, surveillance and outcomes programs.

PERFORMANCE IMPLICATIONS

Currently, Medicaid members with traumatic brain injury (TBI) who meet a Nursing Facility Level of Care can access home and community-based services through the Community Care Community Benefit program.

If a person with a TBI is not otherwise financially eligible for Medicaid, they can access brain injury services through the HCA managed Brain Injury Services Fund. The BISF offers short-term non-Medicaid services to individuals with a confirmed diagnosis of brain injury. The fund serves as a gateway for those who are newly injured and are waiting to become either Medicaid eligible or another payer source is identified, or the individual's crisis is otherwise resolved.

ADMINISTRATIVE IMPLICATIONS

Creation of a surveillance system is expected to result in increased reporting of the Centennial Care Community Benefit and BISF program data.

SB 156 calls for the purchase or development of a website for the brain injury registry. Detailed requirements would need to be gathered before an accurate cost estimate could be created for the design, development, and implementation (DDI) of the registry. The portion of the \$1,000,000.00 appropriation needed for the website is not known at this time.

Maintenance and support of proposed website and registry would require 2 FTE at total operating cost of \$187,600.

An extension of community health care outcomes projects with UNM will require an additional FTE from MAD at an operating cost of \$93,800.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

None

TECHNICAL ISSUES

None

OTHER SUBSTANTIVE ISSUES

None

ALTERNATIVES

None

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

If SB156 is not enacted the HCA will not establish and support a brain injury registry or purchase/develop a website for the brain injury registry, nor will it conduct brain injury surveillance or facilitate an extension for community health care outcomes project with UNM. Furthermore, the existing definition of "brain injury" will remain unchanged.

AMENDMENTS