

LFC Requestor: Kelly Klundt

2024 LEGISLATIVE SESSION  
AGENCY BILL ANALYSIS

Section I: General

Chamber: Senate  
Number: 203PAS

Category: Bill  
Type: Substitution

Date (of THIS analysis): 02-02-2024

Sponsor(s): Bill Tallman and Antoinette Sedillo Lopez

Short Title: Brain Injury Program Funding Limits

Reviewing Agency: Agency 665 - Department of Health

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Section II: Fiscal Impact

APPROPRIATION (dollars in thousands)

Appropriation Contained		Recurring or Nonrecurring	Fund Affected
FY 24	FY 25		
\$0	\$600.0	Nonrecurring	General Fund

REVENUE (dollars in thousands)

Estimated Revenue			Recurring or Nonrecurring	Fund Affected
FY 24	FY 25	FY 26		
\$0	\$0	\$0	N/A	N/A

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY 24	FY 25	FY 26	3 Year Total Cost	Recurring or Non-recurring	Fund Affected	
Total	\$	\$600	\$575	\$1750	Recurring	General Fund	
	\$0	\$	\$	\$			
Staffing					Year 1	Year 2	Year 3

<b>Epidemiologist</b> (Recurring) Pay band 75-\$37.95 x 2080 x 1.36=107,353 (Epi A) for maintenance and creation of a surveillance system and registry	\$107,353	\$107,353	\$107,353
<b>Program Coordinator</b> (Recurring) Pay band 75-\$37.34 x 2080 x 1.36=\$105627 (Program Coordinator) for technical support on using data for action to support evidence based interventions and best practices, and management of contract to train providers on use of the system and correct evaluation and coding of TBI	\$105,627	\$105,627	\$105,627
<b>Subtotal</b>	<b>\$212,980</b>	<b>\$212,980</b>	<b>\$212,980</b>
<b><u>Office, Travel, Equipment</u></b>			
Computer \$2500/FTE/yr (Non Recurring)	\$5,000		
Software \$1000/FTE/yr (Recurring)	\$2,000	\$2,000	\$2,000
Fixed Program Administrative Support \$10,010/FTE/yr (Recurring)	\$20,020	\$20,020	\$20,020
Rent \$8000/FTE/yr (Recurring)	\$16,000	\$16,000	\$16,000
Travel: \$3000 FTE/Year (Recurring)	\$6,000	\$6,000	\$6,000
Training/continuing education \$4000/FTE/yr (Recurring)	\$8,000	\$8,000	\$8,000
<b>Subtotal</b>	<b>\$57,020</b>	<b>\$52,020</b>	<b>\$52,020</b>
<b><u>Contractual costs</u></b>			
Contract for website development (one time)	\$20,000		
Contract for website hosting and maintenance (Recurring)	\$10,000	\$10,000	\$10,000
Contract to teach medical coders, ensure correct ICD 10 codes are used, and train providers on notifiable conditions requirements. (Recurring)	\$300,000	\$300,000	\$300,000
<b>Subtotal</b>	<b>\$330,000</b>	<b>\$310,000</b>	<b>\$310,000</b>
<b>TOTAL</b>	<b>\$600,000</b>	<b>\$575,000</b>	<b>\$575,000</b>

### Section III: Relationship to other legislation

Duplicates: None

Conflicts with: None

Companion to: None

Relates to: SB0156, SB0203, and SB0254

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

## Section IV: Narrative

### 1. BILL SUMMARY

#### a) Synopsis

Senate Bill 203PAS (SB0203PAS) proposes to increase the appropriation for brain injury services and surveillance and specifies which agencies will receive the funding for the specified purposes in the specified fiscal years. The bill aims to:

- Appropriate \$2,500,000 from the general fund to the brain injury services fund. This appropriation is intended for use in fiscal year 2025 and subsequent years, with the aim of raising the funding limits for qualified individuals participating in statewide brain injury services programs.
- Appropriate 1,000,000 from the general fund to the brain injury services fund to establish and support a brain injury registry in alignment with the recommendations put forth by the Governor's Commission on Disability. This appropriation is intended for use in fiscal year 2025 and subsequent years.
- Appropriate \$600,000 to the Department of Health for expenditure in fiscal year 2025 to conduct surveillance on the prevalence and incidence of brain injury in the state.
- Appropriate \$300,000 to the Health Care Authority Department for expenditure in fiscal year 2025 to provide brain injury education to health care professionals. The education program will include mentorship and peer support facilitated through a virtual learning platform accessible statewide.

Is this an amendment or substitution?  Yes  No

This is a substitution for the Senate Bill 203 (SB0203)

Is there an emergency clause?  Yes  No

#### b) Significant Issues

Specifying recipients and purposes of the funding will enable agencies to more effectively utilize the funding.

### 2. PERFORMANCE IMPLICATIONS

- Does this bill impact the current delivery of NMDOH services or operations?  
 Yes  No

- Is this proposal related to the NMDOH Strategic Plan?  Yes  No

**Goal 1:** We expand equitable access to services for all New Mexicans

**Goal 2:** We ensure safety in New Mexico healthcare environments

**Goal 3:** We improve health status for all New Mexicans

**Goal 4:** We support each other by promoting an environment of mutual respect, trust, open communication, and needed resources for staff to serve New Mexicans and to grow and reach their professional goals

### 3. FISCAL IMPLICATIONS

- If there is an appropriation, is it included in the Executive Budget Request?  
 Yes  No  N/A
- If there is an appropriation, is it included in the LFC Budget Request?  
 Yes  No  N/A
- Does this bill have a fiscal impact on NMDOH?  Yes  No

Senate Bill 203PAS (SB0203PAS) proposes to appropriate \$600,000 to the NMDOH for expenditure to conduct surveillance on the prevalence and incidence of brain injury in the state for fiscal year 2025 only. NMDOH would also need funding of \$575,000 in subsequent fiscal years to continue to conduct brain injury surveillance in the state which includes one epidemiologist for the surveillance component of the work, and 1 project coordinator for technical support on using data for action to support evidence based interventions and best practices for preventing TBIs as well as management of a contract to train providers on use of the system and correct evaluation and coding of TBIs, and the website for sharing data. In subsequent fiscal years, there would need to be \$575,000 /year because of one times costs of computers (\$5000) and website development (\$20,000) in FY25.

### 4. ADMINISTRATIVE IMPLICATIONS

Will this bill have an administrative impact on NMDOH?  Yes  No

Under NMAC 7.4.3.13 Notifiable Conditions ([NOTIFIABLE CONDITIONS IN NEW MEXICO \(nmhealth.org\)](https://www.nmhealth.org)), Traumatic Brain Injury is a notifiable condition that must be reported to the NMDOH. However, additional staffing and resources would be required for IBEB to set up a TBI Surveillance System (see “Section II: Fiscal Impact” for information on staffing, office set-up and contractual costs).

### 5. DUPLICATION, CONFLICT, COMPANIONSHIP OR RELATIONSHIP:

Relates to: SB0156, SB0203, and SB0254

### 6. TECHNICAL ISSUES

Are there technical issues with the bill?  Yes  No

### 7. LEGAL/REGULATORY ISSUES (OTHER SUBSTANTIVE ISSUES)

- Will administrative rules need to be updated or new rules written?  Yes  No
- Have there been changes in federal/state/local laws and regulations that make this legislation necessary (or unnecessary)?  Yes  No
- Does this bill conflict with federal grant requirements or associated regulations?  
 Yes  No
- Are there any legal problems or conflicts with existing laws, regulations, policies, or programs?  Yes  No

None

## 8. DISPARITIES ISSUES

### **Disparity in TBI morbidity and mortality in New Mexico**

- The CDC reports the following groups are at greater risk of dying or experiencing long-term health problems from a TBI:
  - Older adults,
  - Racial and ethnic minorities,
  - Military service members and veterans,
  - People living in rural areas,
  - Survivors of intimate partner violence,
  - People who experience homelessness,
  - People in correctional and detention facilities
 (<https://www.cdc.gov/traumaticbraininjury/health-disparities-tbi.html>).
- In 2021, the age-adjusted rates for TBI-related deaths in New Mexico were highest among adults 75 years and older for both males and females (<https://wisqars.cdc.gov/reports/>).
- In 2021, the age-adjusted rate for TBI-related deaths in New Mexico was more than three times higher for males (46.0 deaths per 100,000 residents) than females (13.4 deaths per 100,000) [<https://wisqars.cdc.gov/reports/>].
- In 2021, the age-adjusted rate for TBI-related deaths in New Mexico was about 22% higher for American Indians/Alaskan Natives (39.6 deaths per 100,000 residents) and 26% higher for Blacks or African Americans (40.8 deaths per 100,000 residents) than non-Hispanic Whites (32.5 deaths per 100,000 residents) [<https://wisqars.cdc.gov/reports/>].
- In 2019, there were about twice as many hospitalizations for TBIs for males than females and close to twice as many hospitalizations for American Indian/Alaska Native residents than non-Hispanic White residents (2019 NM Hospitalization Inpatient Discharge Data).
- In 2021, male high school students were 10% more likely to experience a concussion from sports or being physically active in the past year than female students (2021 New Mexico Youth Risk and Resiliency Survey. Pre-published data provided by NMDOH IBEB).

### **Disparity in TBI registry in the United States**

- A TBI registry is a detailed and systematic collection of data about individuals with brain injury or suspected brain injury.
- According to the National TBI Registry Coalition, only 14 states currently have a TBI registry, and this system is decentralized, with specific states creating and overseeing their own registries (<https://nationaltbiregistry.org/about/>).
- New Mexico is one of the states lacking a TBI registry even though it has the fifth highest age-adjusted rate of TBI deaths among all states in the United States (<https://wisqars.cdc.gov/reports/>).
- Most individuals with TBI reside in states lacking a registry, leading to a situation where they might not be documented in any registry or database (<https://nationaltbiregistry.org/about/>).
- The existence of a limited number of registries in certain states results in geographical disparities in patient care. Consequently, individuals with brain injuries face unequal access to information regarding treatments and are not universally involved in the development and assessment of programs and research aimed at enhancing community well-being (<https://nationaltbiregistry.org/about/>).

## 9. HEALTH IMPACT(S)

- In 2021, New Mexico had the fifth highest age-adjusted rate of traumatic brain injury (TBI) deaths among all states in the United States (29.5 deaths per 100,000 residents), which was 51% higher than the national rate (19.5 deaths per 100,000 residents, age adjusted) (<https://wisqars.cdc.gov/reports/>).
- In 2021, the age adjusted TBI-related death rate in New Mexico was 29.5 deaths per 100,000 residents, which was the highest rate in New Mexico since 2001 (<https://wisqars.cdc.gov/reports/>).
- The age adjusted TBI-related death rate in New Mexico increased by 6% between 2020 and 2021 (from 27.8 to 29.5 deaths per 100,000 residents) with 34 more deaths than in 2021 (<https://wisqars.cdc.gov/reports/>).
- In 2021, 15.8% of New Mexico high school students had at least one concussion from playing sports or being physically active in the past year. Students who experienced a concussion in the past year were:
  - 80% more likely to have attempted suicide in the past year than students who did not experience a concussion;
  - 67% more likely to describe their average grades as Fs than students who did not experience a concussion (2021 New Mexico Youth Risk and Resiliency Survey. Pre-published data provided by NMDOH IBEB).

## 10. ALTERNATIVES

None

## 11. WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL?

If Senate Bill 203PAS (SB203PAS) is not enacted,

- Recipients for expenditures will not be specified.

## 12. AMENDMENTS

None

