1	SENATE BILL 156
2	56TH LEGISLATURE - STATE OF NEW MEXICO - SECOND SESSION, 2024
3	INTRODUCED BY
4	Antoinette Sedillo Lopez
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10	AN ACT
11	RELATING TO BRAIN INJURY SERVICES; CREATING THE BRAIN INJURY
12	REGISTRY; MAKING CONFORMING AMENDMENTS TO THE BRAIN INJURY
13	SERVICES FUND; REQUIRING BRAIN INJURY SURVEILLANCE; MAKING
14	APPROPRIATIONS.
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16	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:
17	SECTION 1. Section 27-1-16 NMSA 1978 (being Laws 2013,
18	Chapter 44, Section 1, as amended) is amended to read:
19	"27-1-16. BRAIN INJURY SERVICES FUND CREATED
20	A. [There is created in the state treasury] The
21	"brain injury services fund" is created as a nonreverting fund
22	in the state treasury. The fund shall be invested in
23	accordance with the provisions of Section 6-10-10 NMSA 1978,
24	and all income earned on the fund shall be credited to the
25	fund.
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5 C. The [human services] health care authority 6 department shall adopt all rules [regulations] and policies 7 necessary to administer a statewide brain injury services 8 The [human services] health care authority department program. 9 shall coordinate with and seek advice from the brain injury 10 advisory council to ensure that the statewide brain injury 11 services program is appropriate for persons with brain 12 injuries.

D. All money credited to the brain injury services fund shall be appropriated to the [human services] <u>health care</u> <u>authority</u> department for the purpose of carrying out the provisions of this section [and shall not revert to the general <u>fund</u>].

E. Disbursements from the brain injury services fund shall be made upon warrant drawn by the secretary of finance and administration pursuant to vouchers signed by the secretary of [human services] health care authority.

F. For the purposes of this section <u>and Section</u> <u>27-1-17 NMSA 1978</u>, "brain injury":

(1) means an injury to the brain of traumatic
 or acquired origin, including an open or closed head injury
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1	caused by:
2	(a) an insult to the brain from an
3	outside physical force, regardless of severity;
4	(b) anoxia <u>or hypoxia-ischemia</u> ;
5	(c) electrical shock;
6	(d) <u>abusive head trauma or</u> shaken baby
7	syndrome;
8	(e) <u>exposure to</u> a toxic or chemical
9	substance;
10	(f) near-drowning;
11	(g) infection;
12	(h) a tumor;
13	(i) a vascular lesion; or
14	(j) an event that results in either
15	temporary or permanent, partial or total impairments in one or
16	more areas of the brain that results in total or partial
17	functional disability, including: 1) cognition; 2) language;
18	3) memory; 4) attention; 5) reasoning; 6) abstract thinking; 7)
19	judgment; 8) problem solving; 9) sensory perception and motor
20	abilities; 10) psychosocial behavior; 11) physical functions;
21	12) information processing; or 13) speech; and
22	(2) does not apply to an injury that is:
23	(a) congenital;
24	(b) degenerative;
25	(c) induced by birth trauma;
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1 (d) induced by a neurological disorder 2 related to the aging process; or 3 (e) a chemically caused brain injury 4 that is a result of habitual substance abuse." SECTION 2. A new Section 27-1-17 NMSA 1978 is enacted to 5 6 read: 7 "27-1-17. [NEW MATERIAL] BRAIN INJURY REGISTRY CREATED--8 PROGRAM REQUIREMENTS -- SURVEILLANCE .--9 For the purposes of this section: Α. 10 (1) "department" means the health care 11 authority department; and 12 "registrant" means a person with a brain (2) 13 injury or a suspected brain injury who voluntarily registers 14 with the brain injury registry. 15 Β. The department shall: 16 establish and administer a statewide brain (1)17 injury program that shall be known as the "brain injury 18 registry"; 19 (2) provide policies and procedures for the 20 brain injury registry by rule; 21 (3) maintain an accessible website through 22 which a person with a brain injury or a suspected brain injury 23 may register for the brain injury registry and through which a 24 registrant may access information and services; and 25 (4) conduct brain injury surveillance. .226967.2 - 4 -

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1	C. The brain injury registry shall:
2	(1) be a voluntary service for a person with a
3	brain injury or a suspected brain injury;
4	(2) provide a registrant with information
5	about brain injury treatment, services, supports, opportunities
6	to participate in medical research and other appropriate
7	information;
8	(3) provide a registrant with direct services,
9	including:
10	(a) brain injury screening and referral
11	services;
12	(b) resource navigation; and
13	(c) assistance with enrollment for a
14	public benefit or entitlement; and
15	(4) provide public education and conduct
16	outreach.
17	D. Brain injury surveillance consists of the
18	collection, compilation and maintenance of statistical
19	information concerning the prevalence and incidence of brain
20	injury in the state, including:
21	(1) type;
22	(2) cause;
23	(3) morbidity and mortality;
24	(4) effect on public health; and
25	(5) other information the department deems
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1 necessary and appropriate.

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E. The statistical information collected by the department pursuant to Subsection D of this section shall be available to the public.

F. Protected health information or other personally identifiable information maintained by the department for the purposes of the brain injury registry shall be confidential and shall not be disclosed without written consent.

G. The department shall submit an annual report to the appropriate interim legislative committees about the administration of the brain injury registry and the department's brain injury surveillance activities."

SECTION 3. APPROPRIATIONS.--

A. One million dollars (\$1,000,000) is appropriated from the general fund to the brain injury services fund for expenditure in fiscal year 2025 and subsequent fiscal years to establish and support the brain injury registry and to purchase or develop a website for the brain injury registry. Any unexpended or unencumbered balance remaining at the end of a fiscal year shall not revert to the general fund.

B. The following amounts are appropriated from the general fund to the specified recipients for expenditure in fiscal year 2025 for the specified purposes. Any unexpended or unencumbered balances remaining at the end of fiscal year 2025 shall revert to the general fund:

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1	(1) six hundred thousand dollars (\$600,000) to
2	the health care authority department to conduct brain injury
3	surveillance; and
4	(2) three hundred thousand dollars (\$300,000)
5	to the board of regents of the university of New Mexico to
6	partner with the health care authority department to facilitate
7	an extension for community health care outcomes project focused
8	on brain injury.
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