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FISCAL IMPACT REPORT

ORIGINAL DATE 2/13/09

SPONSOR Varela LAST UPDATED _____ HB 523

SHORT TITLE Behavioral Health Collaborative Services SB _____

ANALYST Earnest

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY09	FY10	FY11	3 Year Total Cost	Recurring or Non-Rec	Fund Affected
Total		See Fiscal Implications Section				

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From

Human Services Department
 Department of Health
 Children, Youth and Families Department
 Health Policy Commission
 Department of Finance and Administration

SUMMARY

Synopsis of Bill

House Bill 523 amends Section 9-7-6.4 NMSA 1978 to require the Interagency Behavioral Health Purchasing Collaborative (Collaborative) to provide at least \$800,000 per year to fund statewide screening, brief intervention, treatment and referral (SBIRT) services through primary care and school-based clinics. The bill requires the Collaborative to include in any contract for operation of one or more behavioral health entities the requirement for such screening, intervention, treatment and referral.

FISCAL IMPLICATIONS

The bill does not include an appropriation, but requires that the Collaborative expend at least \$800,000 per year for SBIRT services from existing contract funds. HSD notes that by essentially earmarking funds for this purpose out of any given contract, funds for other behavioral health services and community based behavioral health providers would need to be

reduced.

SIGNIFICANT ISSUES

According to DOH, New Mexico has received an SBIRT grant of \$2.5 million per year for the past five years from the Substance Abuse and Mental Health Services Administration (SAMHSA) to implement SBIRT infrastructure in the state. This grant has been administered by the Sangre De Cristo Community Health Partnership and has extended SBIRT services into 18 primary care sites, 11 school-based health centers and 19 telehealth sites around the state. Between 2003 and 2007, almost 50,000 patients were screened in these settings, and data collected by Sangre De Cristo suggests that SBIRT has been successful in reducing excessive alcohol use and related outcomes (e.g., emergency department use, criminal justice involvement) in the population that received SBIRT services. New Mexico's SAMHSA-funded SBIRT grant ended in 2008. Cost-benefit analyses and cost-effectiveness analyses have demonstrated net cost savings from these interventions (<http://sbirt.samhsa.gov/>).

According to HSD:

The bill seeks to amend the statute governing the Behavioral Health Collaborative by introducing a specific service requirement, a particular kind of service provider, and a minimum appropriation or budget requirement. Such a specific provision is not appropriate for a statutory provision. The Collaborative directs provision of a wide continuum of behavioral health services and wide range of provider types, including local community mental health centers, substance abuse providers, programs specializing in provision of integrated therapies, housing and psychosocial supports, services to families, children, adults, youth in transition and elders.

The Collaborative is engaged in work on children's and adult purchasing plans and needs assessments with the Behavioral Health Planning Council and 18 Local Collaboratives. Advice to the Collaborative about what array of services are needed in which communities and what providers are best equipped to provide those services an ongoing process in which maximum community engagement is sought, including the advice of consumers and family members in those communities.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

HB523 relates to HB221 which appropriates \$800,000 from the general fund to the Human Services Department to fund a program of behavioral health screening, brief intervention, and referral to treatment services. HB523 is also a duplicate of SB473 and SB481.

BE/mc