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### FISCAL IMPACT REPORT

SPONSOR:	Griego		DATE TYPED:	2/24/03	HB	
SHORT TITLI	E: _	Alcohol & Substance	e Abuse Treatment	Services	SB	784
	ANALYST:					Dunbar

# **APPROPRIATION**

Appropriation	on Contained	Estimated Additional Impact		Recurring or Non-Rec	Fund Affected
FY03	FY04	FY03	FY04		
	\$60.0			Recurring	GF

(Parenthesis ( ) Indicate Expenditure Decreases)

#### SOURCES OF INFORMATION

Responses Received From

Department of Health (DOH) Health Policy Commission (HPC)

#### **SUMMARY**

### Synopsis of Bill

Senate Bill 784 appropriates \$60,000 from the general fund to the Department of Health for expenditure in fiscal year 2004 to contract for alcohol and substance abuse treatment services in Talpa in Taos County. The service includes long-term outpatient services for relapse prevention, anger management, yoga, self-esteem and domestic money management skills counseling.

### Significant Issues

The Department of Health is committed to addressing substance abuse as an urgent public health problem broadly and collaboratively, using various prevention strategies at the individual, family and community level. The following indicators of substance abuse are reported from the 1997 New Mexico Social Indicator Project Report (1995-1997). In District 2 (Northern NM), San Miguel and Rio Arriba Counties ranked numbers two and three in the state on the composite measure of substance abuse (Hospitalization, Mortality, Traffic, and Youth).

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Rio Arriba County had the highest rates in the state of both drug- and alcohol- related morbidity and mortality. It has also one of the highest rates of alcohol-involved crash fatality and high-school dropout. Clearly, there is a need for funding of programs to address treatment and intervention in regard to substance abuse in the geographical region of Northern New Mexico. Currently, there is only one inpatient facility in Taos -- Taos Detoxification.

DOH's Behavioral Health Services Division is unfamiliar with the organization identified in the bill as "Talpa"; however, if funded, monies would be directed toward Region II Behavioral Health Providers, Inc. (R2BHP). The R2BHP is the regional coordinator for Northern New Mexico and would be responsible for evaluating the programs capability to delivery services as prescribed by the department

SB 784 prescribes the treatment modalities to be offered, some of which are not necessarily generally accepted as science-based best practices in treatment (most notably yoga). Given the relatively small amount of dollars available, there is at least the possibility that more urgently needed treatment modalities would be crowded out by secondary ones mandated in the legislation.

It is suggested that DOH/BHSD and Region 2 RCC conduct a resources assessment of the Talpa program in Taos County to determine the most effective use of the appropriation. This would include determination of services to be provided and performance standards and measures to ensure that funds are being used effectively.

#### PROGRAM MEASURE

Proposed Performance Measures: The number and percent of clients successfully completing the program in Talpa supported by the proposed funds

## FISCAL IMPLICATIONS

The appropriation of \$60.0 contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of FY 04 shall revert to the general fund.

### ADMINISTRATIVE IMPLICATIONS

The provisions of SB 274 could be managed with current staff resources

## **OTHER SUBSTANTIVE ISSUES**

Statistics on drug use in Northern New Mexico are staggering. In 1999, 31.3 percent of the Rio Arriba County school students responding to the Youth Risk and Behavior Survey (YRBS) felt that it was either "very easy" or "sort of easy" to obtain illegal drugs, such as cocaine or LSD. To the same question, 45.7 percent of the respondents in Taos County felt that it was either "very easy" or "sort of easy" to obtain illegal drugs. In the same survey, 68.9 percent of Rio Arriba County respondents and 79.8 percent of Taos County respondents felt it was either "very easy" or "sort of easy" to obtain marijuana. In 1999, in the same YRBS, 24.1 percent of Rio Arriba County respondents and 33.8 percent of Taos County respondents knew more than 5 adults who dealt drugs. Also in the same survey, 36.6 percent of Rio Arriba County respondents and 61.9 percent of Taos County respondents knew more than 5 adults who had used drugs. Approxi-

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mately 7 percent of Rio Arriba County respondents and 8.1 percent of Taos County respondents had used heroin at least once in their lifetimes.

In the past three fiscal years, programming has been focused on youth mentoring, family case management, faith-based prevention programming, increased adolescent substance abuse treatment services, and increased community-based environmental prevention strategies through municipal, tribal, and state government leadership. Evaluation of outcomes from the past three years shows that there are some strengths in the areas of capacity building and community mobilization, which are outlined below.

DOH has observed substantial increases in the involvement of community clergy in substance abuse prevention work, culminating in last summer's Pacific Institute of Community Organizing (PICO) training, a national faith-based community organizing model. A contingent of 180 clergy from Rio Arriba, Santa Fe, Taos, Mora, San Miguel and Bernalillo counties participated in the training. Subsequent to this training, local clergy have initiated the Interfaith LEAP project (Leadership for the Empowerment of All People). There are fourteen members in LEAP from Taos, Santa Fe and Rio Arriba Counties, representing the following denominations: Presbyterian, Methodist, Roman Catholic, Evangelical Pentecostal, Lutheran, Episcopalian and Sikh. LEAP is continuing efforts to address black tar heroin and other substance use by implementing local "Social Concerns" committees to develop grass roots community organizing in their own communities.

### **AMENDMENTS**

Amend the bill to read "to include long-term outpatient services for relapse prevention, which <u>may</u> include anger management, yoga, self-esteem and domestic money management skills counseling".

### BD/njw