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FISCAL IMPACT REPORT

SPONSOR Begaye DATE TYPED 1/25/05 HB 80

SHORT TITLE Farmington Behavioral Health Services SB _____

ANALYST Collard

APPROPRIATION

Appropriation Contained		Estimated Additional Impact		Recurring or Non-Rec	Fund Affected
FY05	FY06	FY05	FY06		
	\$200.0			Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From

Department of Health (DOH)

No Response Received From

Department of Finance and Administration (DFA)

SUMMARY

Synopsis of Bill

House Bill 80 appropriates \$200 thousand from the general fund to the Department of Finance and Administration for the purpose of contracting in FY05 and FY06 with the City of Farmington for behavioral health care services to individuals who have substance abuse problems. Any unencumbered balance at the end of FY06 will revert to the general fund. The bill contains an emergency clause.

FISCAL IMPLICATIONS

The appropriation of \$200 thousand contained in this bill is a recurring expense to the general fund due to loss of federal Health Resources and Services Administration Grant (HRSA) funding. Any unexpended or unencumbered balance remaining at the end of FY06 shall revert to the general fund.

OTHER SUBSTANTIVE ISSUES

The Department of Health notes the Farmington area has a high incidence of substance abuse, especially among the Native American population.

There is an existing program, Totah, administered through the City of Farmington that provides services to Native Americans. The funding to Totah by a federal HRSA grant is no longer available.

Substance abuse services in the Farmington area are currently provided through the Region 1 Regional Care Coordinator, Presbyterian Medical Services, and the Navajo Nation Department of Behavioral Health. The City of Farmington's Totah program collaborates with the Region 1 Regional Care Coordinator, the Navajo Nation Department of Behavioral Health and the Na'nizhoozhi Center.

Additional substance abuse services to individuals in the Farmington area would enlarge the service capacity and possibly offer a wider choice of providers and/or services to the population.

ALTERNATIVES

DOH suggests, rather than appropriate funds to DFA, consider providing the funds to the Behavioral Health Purchasing Collaborative, headed out of the Human Services Department. The collaborative would then be responsible for contracting with community programs, like those in the Farmington area. The infrastructure is in place through the Behavioral Health Purchasing Collaborative to identify, develop, administer and monitor the services funded with this allocation.

KBC/lg