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FISCAL IMPACT REPORT

ORIGINAL DATE 2/18/07

SPONSOR Nava LAST UPDATED _____ HB _____

SHORT TITLE 3rd Judicial District Behavioral Health SB 1094

ANALYST Lucero

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Non-Rec	Fund Affected
FY07	FY08		
	\$200.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

Relates to Appropriation in the General Appropriation Act

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY07	FY08	FY09	3 Year Total Cost	Recurring or Non-Rec	Fund Affected
Total						

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

SUMMARY

Synopsis of Bill

Senate Bill 1094 appropriates two hundred thousand (\$200,000) from the general fund to Children, Youth and Families Department for expenditure in 2008 for flexible wrap-around behavioral health services in the third judicial district.

FISCAL IMPLICATIONS

The appropriation of two hundred thousand (\$200,000) contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of fiscal year 2008 shall revert to the general fund.

SIGNIFICANT ISSUES

All youth involved in the juvenile justice system should receive continued or wrap-around services for mental or substance use disorders, emotional or behavioral problems, and for suicide risk. Many justice systems lack adequate resources to mandate comprehensive behavioral health services. Many refer to the criminal justice system's revolving door, where those with behavioral disorders do not get adequate wrap-around services and re-offend.

Wrap-around behavioral health services typically include multi-agency, multi-system involvement. Typically each child's team includes the child and parents and any foster parents, and any individual important in the child's life. The team may also include all other persons needed to develop an effective plan, including, as appropriate, the child's teacher, the child's Child Protective Service and/or Division of Developmental Disabilities case worker, and the child's probation officer. The team (a) develops a common assessment of the child's and family's strengths and needs, (b) develops an individualized service plan, (c) monitors implementation of the plan and (d) makes adjustments in the plan if it is not succeeding.

There has been a significant increase in the need for mental health services for youth in the juvenile justice system. As many as 75% of juvenile offenders (Teplin et al., 2002) have one or more diagnosable psychiatric disorders. The justice system and those providing behavioral health services face a myriad of challenges – potential role conflicts, confidentiality issues, interface of multiple systems (i.e., police, probation, family courts, and social services), and negative perceptions toward delinquent youth.

Youth with behavioral health needs present a special challenge to the juvenile justice system. Research suggests that young persons with behavioral health needs are significantly more common among youthful offenders than in other youth groups (Cocozza, 1992; Atkins et al., 1999; Garland et al., 2001). Studies have shown that as many as 65%-75% of youthful offenders have one or more diagnosable psychiatric disorders (Teplin et al., 2002; Wasserman et al., 2003).

Detention alone is not effective at reducing recidivism, because within 3 years of release from prison, approximately 2/3 of all offenders, including drug offenders, are rearrested for a new offense; 1/2 are convicted of a new crime; and 1/2 are re-incarcerated for a new crime or parole violation.

TECHNICAL ISSUES

The bill is unclear whether the services are for adults or juveniles. With the appropriation being made to CYFD, one might assume it is for wrap-around services for juveniles.

OTHER SUBSTANTIVE ISSUES

CYFD, through the behavioral health collaborative, contracts behavioral health services to ValueOptions (VO). It is unclear if the sponsor of the bill wants an increased level of VO services, or whether there are other behavioral health services (outside of those provided by VO) are being sought.

The LFC has recommended that the legislature should consider creating a unified behavioral health services budget, possibly located at Human Services Department (HSD) to improve

accountability, coordination, and integration of services. The appropriation in this bill may be better suited at HSD if the services are aimed at adults.

ALTERNATIVES

The bill sponsor may want to consider sending the appropriation directly to the 3rd Judicial District to allow the district more flexibility in how the behavioral health services will be procured. Appropriating to CYFD may tie the services to those offered through the VO contract.

The sponsor may also want to clarify whether the services being provided for in the bill are for juveniles, adults, paroled, probationers, pre- or post adjudication.

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

Status Quo

DL/nt