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FISCAL IMPACT REPORT

ORIGINAL DATE 01/22/08

SPONSOR Gutierrez, J LAST UPDATED _____ HB 63

SHORT TITLE Services for Autistic Persons SB _____

ANALYST Weber

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Non-Rec	Fund Affected
FY08	FY09		
	\$6,725.0	Recurring	General

(Parenthesis () Indicate Expenditure Decreases)

Duplicates Appropriation in the General Appropriation Act
Relates to Appropriation in the General Appropriation Act

REVENUE (dollars in thousands)

Estimated Revenue			Recurring or Non-Rec	Fund Affected
FY08	FY09	FY10		
	\$7,070.5		Recurring	Federal Medicaid

(Parenthesis () Indicate Revenue Decreases)

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY08	FY09	FY10	3 Year Total Cost	Recurring or Non-Rec	Fund Affected
Total		\$65.0	\$65.0	\$130.0	Recurring	General Fund and Federal Medicaid split evenly

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From

Human Services Department (HSD)

Department of Health (DOH)

Public Education Department (PED)

Higher Education Department (HED)

SUMMARY

Synopsis of Bill

House Bill 63 appropriates \$6.75 million from the General Fund to the following agencies for the purpose of supporting a variety of autism spectrum disorder services.

To the Human Services Department (HSD) a total of \$4,525.0

- \$2,900.0 to support specific treatment services for Medicaid-eligible recipients with autism;
- \$100.0 to extend the study group created by last year's SB197 to expand stakeholder representation and to conduct public forums to identify regional needs and priorities;
- \$175.0 to study service needs and best practices treatments for high-functioning adults with autism spectrum disorder who do not meet the criteria for developmental disability;
- \$1,000.0 for the behavioral health collaborative's development of a flex-funding program for the autism spectrum disorder population; and
- \$350.0 of the total amount would be appropriated to HSD for behavioral health collaborative seed money for development of in-state residential treatment centers for the autism spectrum population.

To the Department of Health (DOH) a total of \$1,200.0

- 1,000.0 to support statewide diagnostic and autism spectrum disorder-specific groups in a minimum of four counties for specific treatment services for persons who are not eligible for Medicaid; and
- \$200.0 for the creation and implementation of a statewide autism spectrum disorder surveillance and registration program in a minimum of four counties.

To the Higher Education Department a total of \$1,000.0

- \$1,000.0 to development and implement pre-service programs focusing on best practice interventions for person with autism spectrum disorder

FISCAL IMPLICATIONS

The appropriation of \$6.725 million contained in this bill is a recurring expense to the General fund. Any unexpended or unencumbered balance remaining at the end of FY09 shall revert to the General fund.

HSD estimates that the \$2.9 million appropriated for Medicaid eligible individuals and services will create \$7.07 million of federal Medicaid revenue.

HSD estimates an annual continuing operational cost of \$65 thousand that would be the equivalent of approximately 1 FTE.

SIGNIFICANT ISSUES

HSD projects that \$2.9 million GF would provide service to 800 children for 6 months and \$5.8 million in GF is needed to serve 800 children for 1 year.

DOH notes that the Centers for Disease Control (CDC) placed the prevalence of ASD at 1 in 150 of children from birth to 21 years of age. Based on the CDC guide, approximately 3,000 New Mexico children have some level of ASD. The National Institute of Mental Health states, “One point that most professionals agree on is that early intervention is important; another is that most individuals with ASD respond well to highly structured, specialized programs.”

DOH continues an appropriation for specific services to persons with ASD would enable the Department of Health to expand Adaptive Skills Building services for individuals who are not eligible for Medicaid. Adaptive Skills Building services focus on evidence-based practices that have shown to be highly effective at mitigating the effects of the core challenges of ASD. These services have the potential to maximize an individual’s potential to live independently with improved quality of life as the ASD individual ages. Additionally, the appropriation for diagnostic services would enable the Department of Health to expand diagnostic services. The UNM Center for Development and Disability currently provides multidisciplinary diagnostic evaluations to approximately 225 children per year. No source of evaluation for adults currently exists. This appropriation would enable these evaluations to be expanded to adults, many of whom have never been diagnosed. There is currently a waiting list for children to receive such a diagnostic evaluation.

PED reports that the increase in the number of children who are being diagnosed as having autism leads to an increased number of adults who have autism. According to (Adults with Autism, 2008), a national autistic society survey shows that out of 450 children and adults who have autism, 70% are unable to live independently, 49% live with family members, and 6% hold full-time jobs. Adults with autism are in need of treatment programs which focus on improving family life, self-perception, self-esteem, confidence, ability to compete in employment opportunities, ability to live in the least restricted environment, and the ability to decrease mental health issues, (Adults with Autism, 2008).

Adults and children who have autism oftentimes have difficulties with social interaction, motor skills, and coordination, (High Functioning Adult Autism, 2007). They are oftentimes categorized as having High-functioning autism and Low-functioning autism. High-Functioning autism is defined as an informal term applied to individuals with autism having an IQ of 80 or above, and the ability to speak, read, and write (High Functioning Adult Autism, 2007).

Currently, funds are available for families who have children or adults living at home with autism. These programs include Social Security Disability Insurance (SSDI), Supplemental Security Income (SSI), and Medicaid waivers, (High Functioning Adult Autism, 2007). Many living arrangements are also available for adults and children who have autism. These include: foster homes, skill-development homes, supervised group living, institutions, day programs, and day habilitation, (High Functioning Adult Autism, 2007). According to the article, (High Functioning Adult Autism, 2007), it has been the trend to avoid placing persons with disabilities into long-term-care institutions, but today’s facilities view their residents as individuals who have human needs, and they are offered opportunities for recreation and fun.

MW/bb