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FISCAL IMPACT REPORT

SPONSOR	Sandoval	ORIGINAL DATE LAST UPDATED		27
SHORT TITLE Legislative Beha		ioral Health Caucus	SB	
			ANALYST	Cox

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Non-Rec	Fund Affected
FY08	FY09		
	NFI		

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION LFC Files

<u>Responses Received From</u> Health Policy Commission (HPC)

SUMMARY

Synopsis of Bill

House Joint Memorial 27 proposes the creation of the New Mexico Behavioral Health Caucus and members of both houses and all political parties be encouraged to join or become familiar with the work of the Legislative Behavioral Health Caucus. Members of the Caucus would learn about the priority of mental health and wellness, and find solutions that bridge unmet needs, improve the quality and outcomes of care.

FISCAL IMPLICATIONS

Some travel, per-diem and compilation expenses may need to be funded.

SIGNIFICANT ISSUES

HPC notes:

This joint memorial asserts that the Behavioral Health Caucus would help ensure that mental health services are funded at appropriate levels. The Caucus would contribute to the knowledge of legislative committees and address issues that could affect access to mental health services.

The Behavioral Health Caucus is encouraged to work with behavioral health advocacy groups to educate the Legislature and the public.

House Joint Memorial 27 – Page 2

According to New Mexico Health Policy Commission *Quick Facts 2008* reports an estimated 26.2 percent of Americans ages 18 and older suffer from a diagnosable behavioral health disorder in a given year. Even though behavioral health disorders are widespread in the population, the main burden of illness is concentrated in a much smaller proportion who suffer (about six percent) from a serious mental illness. In addition, behavioral health disorders are the leading cause of disability in the United States for ages 15-44. Many people suffer from more than one behavioral health disorder at a given time. Nearly half (45 percent) of those with any behavioral health disorder meet criteria for two or more disorders, with severity strongly related to co-morbidity.

- Major depressive disorder is the leading cause of disability in the United States for ages 15-44.
- Major depressive disorder affects approximately 14.8 million American adults, or about 6.7% of the American population age 18 and older in a given year.
- Bipolar disorder affects approximately 5.7 million American adults, or about 2.6 percent of the United States population age 18 and older in a given year.
- More than 90 percent of people who commit suicide have a diagnosable mental disorder, most commonly a depressive disorder or a substance abuse disorder.
- Approximately 2.4 million American adults or about 1.1 percent of the population age 18 and older in a given year have schizophrenia.
- Approximately 40 million American adults ages 18 and older, or about 18.1 percent of people in this age group in a given year, have an anxiety disorder.
- Approximately 7.7 million American adults age 18 and older, or about 3.5 percent of people in this age group in a given year, have Post-Traumatic Stress Disorder.
- More than 90 percent of people who commit suicide have a diagnosable mental disorder, most commonly a depressive disorder or a substance abuse disorder.

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

HJM27 is a duplication of SJM31, Legislative Behavioral Health Caucus.

POSSIBLE QUESTIONS

It is not stated in the memorial how the caucus is organized (who chairs the caucus, how frequently the caucus meets, or its relationship with the Behavioral Health Collaborative). Hence the following questions should be asked:

What will be the size of this caucus?

When will the caucus meet?

Where will the caucus meet?

What are the expenses of this meeting? (travel, per-diem, compilation, etc)

PRC/mt