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FISCAL IMPACT REPORT

SPONSOR	Cisneros	ORIGINAL DATE LAST UPDATED	01/22/08 HB	
SHORT TITL	LE Healing Program I	For Substance Abuse	SB	5
			ANALYST	Hanika Ortiz

APPROPRIATION (dollars in thousands)

Appropr	iation	Recurring or Non-Rec	Fund Affected
FY08	FY09		
	\$100.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From
Department of Health (DOH)
Health Policy Commission (HPC)
New Mexico Corrections Department (NMCD)

SUMMARY

Synopsis of Bill

Senate Bill 5 appropriates \$100 thousand from the General Fund to DOH for use in funding a traditional healing program in northern New Mexico for treating persons with substance abuse and related disorders.

FISCAL IMPLICATIONS

The appropriation of \$100 thousand 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.

The appropriation of \$100,000 to DOH is not included in the Executive Budget Request for the Department of Health or the Human Services Department in FY09.

DOH reports that in the 2007 Legislative regular session a recurring appropriation of \$30 thousand was made for a traditional training program in northern New Mexico for treating people with substance abuse and related disorders.

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HPC reports DOH has indicated that several recognized traditional healing approaches from various ethnicities exist in New Mexico. Many Native American traditional healing practices have been shown to be an effective means of addressing substance abuse and related disorders in the state. The federally funded Access to Recovery (ATR) grant funds traditional healing through its substance abuse recovery support services and has shown positive outcomes with this approach. In 2004, New Mexico was among 14 states and one tribal organization to be awarded an ATR grant from the Department of Health and Human Services' Substance Abuse and Mental Health Services Administration. The Office of the Governor was awarded \$7.5 million for each of three grant years for a total of \$22.5 million. The Governor designated the Behavioral Health Services Division of the New Mexico DOH to administer the funds.

In September 2007, the State of New Mexico was awarded a second ATR grant. The Department of Health and Human Services' Substance Abuse and Mental Health Services Administration awarded the Office of the Governor \$14.5 million for three years of services. The grant will be administered in Santa Fe, Bernalillo, Dona Ana and Curry counties with a focus on gender-specific services and recovery services for methamphetamine abuse or dependence.

SIGNIFICANT ISSUES

SB5 addresses the need for culturally appropriate traditional healing services.

DOH notes that *Services to Native Americans* is one of the Behavioral Health Collaborative's Strategic Plan priorities and development of the behavioral health workforce is an identified area of focus. Both Local Collaborative 14 and 15 identified a need for additional culturally competent services to Native Americans. LC15 further included in its legislative priorities a study of the effectiveness of traditional healing and cultural teachings for behavioral health and recommendations to the Behavioral Health Collaborative.

PERFORMANCE IMPLICATIONS

DOH notes that SB5 relates to the Governor's Performance and Accountability Contract, "A Healthy New Mexico" - Goal 4: Improve Behavioral Health through an Interagency and Collaborative Model: Task 4.2 Improve access, quality, and value of mental health and substance abuse services; Task 4.3 Provide enhanced services for high-risk and high-need individuals; Task 4.4 Increase rural, frontier, and border access to behavioral health services and Goal 6: Improve Health Care and Human Services by Investing in Workforce development and Infrastructure: Task 6.2 Enhance New Mexico's behavioral health workforce.

ADMINISTRATIVE IMPLICATIONS

DOH will need to determine which types of traditional healing are considered to be most effective in the treatment of substance abuse, the design and development of the program, requirements of trainers and trainees, and administration of the program. DOH requests collaboration with the Consortium for Behavioral Health Training and Research (CBHTR) to coordinate the development of any traditional healing training program.

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TECHNICAL ISSUES

DOH suggests directing the appropriation in the bill to Human Services Department (HSD) for behavioral health services as opposed to the DOH; as HSD contains functions related to behavioral health treatment within the Behavioral Health Services Department.

The bill provides no clarification regarding which types of traditional healing are to be included in order to guide the development of the program. The bill also does not indicate whether the intention is to use the funds to develop the program and pay for trainers; and/or whether the training should be free to the trainees or not.

AHO/jp