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FISCAL IMPACT REPORT

SPONSOR <u>Alcon/Garcia, H./Martinez, A./Jaramillo</u>	LAST UPDATED <u>2/9/24</u>	ORIGINAL DATE <u>2/2/24</u>
SHORT TITLE <u>Service Members Suicide Prevention</u>	BILL NUMBER <u>House Bill 298/aHAFC</u>	ANALYST <u>Klundt</u>

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT* (dollars in thousands)

Agency/Program	FY24	FY25	FY26	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
		\$170.0	\$170.0	\$340.0	Recurring	General Fund

Parentheses () indicate expenditure decreases.
 *Amounts reflect most recent analysis of this legislation.

Sources of Information

LFC Files

Agency Analysis Received From
 Veterans' Services Department (VSD)

SUMMARY

Synopsis of HAFC Amendment to House Bill 298

The House appropriations and Finance Committee amendment to House Bill 298 (HB298) strikes the appropriation contained in this bill.

Synopsis of House Bill 298

House Bill 298 (HB298) appropriates \$100 thousand from the general fund to the Veterans' Services Department (VSD) to implement the provisions in the proposed Services Members and Veterans Suicide Prevention Act. Provisions of this act include:

- (1) Raise awareness of and reduce death by suicide within the population of service members, veterans, and family members;
- (2) Work to reduce barriers at the community and individual level that increase the risk of suicide by increasing access to crisis and suicide prevention services;
- (3) Connect service members, veterans, and family members whose need for services are based upon a risk of death by suicide or other circumstances outlined by the program, with appropriate community and mental health providers and resources;
- (4) Raise awareness of and access to behavioral health services and resources and promote evidence based best practices and safe messaging to increase awareness of suicide prevention hotlines and other crisis resources available to service members,

veterans, and family members;

(5) Within the framework of the program, advocate for service members, veterans, and family members at risk for suicide; and

(6) Work to increase public awareness about the issue of suicide among service members, veterans, and family members and its root causes.

Additionally, VSD shall collaborate with the Department of Health and any other appropriate state agency to promote mental health awareness, including:

(1) The 988 suicide and crisis lifeline;

(2) The veterans crisis line and the veterans crisis line for those who are deaf or hard-of-hearing;

(3) the national suicide prevention lifeline; and

(4) Local resources available to assist in crisis intervention and ongoing supports.

VSD is also required to provide training to staff and provide annually reporting on the program.

FISCAL IMPLICATIONS

The HAFC amendment to this bill strikes the appropriation of \$100 thousand. VSD reported the department would need additional FTE to manage the program and to provide reporting and oversight to the Military and Veterans Affairs Committee. VSD believes 2 FTE would be necessary, including one data analyst and one program coordinator at an estimated cost of \$170 thousand to implement the Services Member and Veterans Suicide Prevention Act.

SIGNIFICANT ISSUES

According to the most recent data from the U.S. Center for Disease Control (CDC) New Mexico ranked fourth in the nation for highest suicide rate, 533 deaths in 2021.

The U.S. Veterans Administration reported in 2021, after accounting for age differences, the Veteran suicide rate in New Mexico was significantly higher than the national veteran suicide rate and was significantly higher than the national general population suicide rate.

New Mexico Veteran and Total New Mexico, Western Region, and National Suicide Deaths and Rates by Age Group, 2021^c

Age Group	New Mexico Veteran Suicides	New Mexico Total Suicides	Western Region Total Suicides	National Total Suicides	New Mexico Veteran Suicide Rate per 100,000	New Mexico Suicide Rate per 100,000	Western Region Suicide Rate per 100,000	National Suicide Rate per 100,000
18-34	10	184	3,733	14,230	83.3*	38.5	20.0	18.8
35-54	19	162	3,859	15,263	52.8*	32.2	19.0	18.2
55-74	27	119	3,071	12,411	43.5	23.4	17.9	16.2
75+	13	49	1,229	4,508	35.1*	31.9	24.9	20.3
All	69	514	11,892	46,412	46.9	31.3	19.5	18.0

* Rates calculated from suicide counts lower than 20 are considered unreliable.



The 2023 National Veteran Suicide Prevention Annual Report states,

Both mental health and SUDs are risk factors for Veteran suicide. Obtaining prompt access to services is critical not only during times of crisis, but when first initiating

treatment, and in a sustained manner to complete a full episode of care. What You Can Do: Connect Veterans with information on how to obtain same-day mental health services by visiting this website. Save the VCL number in your phone (Dial 988 then Press 1) and spread the word about VCL through your community connections. Link Veterans to information about the mental health and SUD services available to them. If you are not sure about how to talk with a Veteran about available services, reach out to Coaching into Care, a free service for families and friends of Veterans where you can learn about resources and referrals.

VSD reports,

NMDVS Healthcare Division currently serves as the state lead for the Governor’s Challenge to Prevent Suicide among SMVF. In its third year, the Governor’s Challenge has completed a strategic plan, identified priorities, and is implementing a public awareness campaign, with support from the Department of Health (DOH). The Governor’s Challenge is a partnership between the DOH, Human Services Department (Health Care Authority,) Veteran service organizations, county behavioral health centers, nonprofit organizations, the VA, and the federal Substance Abuse and Mental Health Administration (SAMHSA.)

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