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FISCAL IMPACT REPORT

| | | | | | |
|--------------|---------------------------------|-------------|---------|----------|----------|
| SPONSOR: | Feldman | DATE TYPED: | 1/24/00 | HB | |
| SHORT TITLE: | Statewide Home Visiting Program | | | SB | 22 |
| | | | | ANALYST: | Esquibel |

APPROPRIATION

| Appropriation Contained | | Estimated Additional Impact | | Recurring or Non-Rec | Fund Affected |
|-------------------------|------------|-----------------------------|----------|-------------------------|------------------|
| FY00 | FY01 | FY00 | FY01 | | |
| | \$ 2,000.0 | | \$ 200.0 | Recurring | General Fund |

(Parenthesis () Indicate Expenditure Decreases)

Conflicts with HB2, SB2; Relates to HB8 and SB48.

SOURCES OF INFORMATION

Human Services Department

Department of Health

SUMMARY

Synopsis of Bill

The bill appropriates \$2,000.0 in general fund to establish a statewide voluntary home visiting program for at-risk pregnant women, infants and children.

FISCAL IMPLICATIONS

The bill appropriates \$2,000.0 in general fund to the Department of Health in FY01.

The bill does not indicate if the Department of Health would use these funds to leverage Medicaid funds for which a portion of the services described in the bill qualify.

The Human Services Department indicates there are currently multiple Medicaid primary and behavioral health programs providing in-home services for pregnant women, infants and children, either through SALUD! or through the fee-for-service program for clients who do not qualify for SALUD!. Medicaid covers case management, home health care, private duty nursing, personal care and behavior management services.

ADMINISTRATIVE IMPLICATIONS

The Department of Health indicates it would require funds for personnel, materials and supplies. Ten percent

of the total appropriation, or \$200.0 is the estimated amount required for administration of the new program.

CONFLICT/DUPLICATION/COMPANIONSHIP/RELATIONSHIP

Senate Bill 22 conflicts with House Bill 2 and Senate Bill 2 given that both these bills currently provide \$1,000.0 in tobacco settlement revenue to expand services for home visiting prevention services in an effort to supplement funding that currently exists for these services in the Department of Health's FY00 budget and FY01 proposed budget.

TECHNICAL ISSUES

The Human Services Department (HSD) indicates the bill needs to define "at-risk".

Additionally, HSD indicates to avoid duplication and to provide continuity of care, clarification is needed regarding the focus and goals of the home visiting program, what type of providers would be qualified to deliver the services, what specific services would be provided, and how the service would be coordinated with existing in-home programs.

OTHER SUBSTANTIVE ISSUES

The Department of Health indicates an option to proceeding with the provisions of the bill is to continue negotiations with the federal Health Care Financing Administration (HCFA) to gain approval of the SCHIP Part II application.

RAE/gm