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## FISCAL IMPACT REPORT

SPONSOR: Campos DATE TYPED: 3/5/03 HB 930  
 SHORT TITLE: De Baca County Alcohol Treatment Center SB \_\_\_\_\_  
 ANALYST: Dunbar

### APPROPRIATION

Appropriation Contained		Estimated Additional Impact		Recurring or Non-Rec	Fund Affected
FY03	FY04	FY03	FY04		
\$2,500.0				Recurring	GF

(Parenthesis ( ) Indicate Expenditure Decreases)

Conflicts with SB 876, SB 638, HB 719

### SOURCES OF INFORMATION

Responses Received From  
 Department of Health (DOH)

### SUMMARY

#### Synopsis of Bill

House Bill 930 appropriates \$2,500,000 from the general fund to the Department of Health (DOH) for expenditure in FY 2003 and FY 2004 for the purpose of funding the operation of an alcohol treatment center in De Baca County.

The bill contains an emergency provision.

#### Significant Issues

There is a shortage of substance abuse treatment funding for all levels of treatment services and, specifically, there is an absence of alcohol residential treatment beds in the northeastern area of New Mexico. The closest publicly funded residential treatment beds are in Roswell and Albuquerque.

According to the Office of Epidemiology of DOH, which maintains the state repository and database for DWI offenders screened for alcohol/drugs, a total of 1,747 DWI offenders were screened from the eight-county area mentioned above, during the period of July 1, 1999 to June 30, 2002. Of that total screened, 104 (6%) were recommended for inpatient treatment services.

According to the UNM Center on Alcoholism, Substance Abuse and Addictions, most studies have shown no significant difference in the effectiveness between inpatient and outpatient treat-

ment in reducing recidivism of substance abusers. The cost of inpatient treatment, however, is significantly higher than that of outpatient treatment services.

### **FISCAL IMPLICATIONS**

The appropriation of \$2,500.0 contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of FY 04 shall revert to the general fund.

Currently two DOH Behavioral Health Services Division (BHSD) Regional Care Coordinators (RCCs) that coordinate care in De Baca and the counties of northeast New Mexico have allocated approximately \$276,500 for outpatient services to persons who meet the clinical and financial criteria for substance abuse treatment services. The RCCs coordinate (inter- and intra-regionally) the inpatient and residential services for persons who meet established criteria.

### **ADMINISTRATIVE IMPLICATIONS**

The administrative burden would be minimal. The two DOH/BHSD Regional Care Coordinators that coordinate care in De Baca County and the counties of northeast New Mexico would administer these treatment funds.

### **CONFLICT**

Conflicts with:

- SB 638 and HB 719 propose an appropriation of \$22,500,000 from the DWI fund for an alcohol treatment center, intensive after-care program and a transitional living program with a multi-year funding period from FY 2004 to FY 2008.
- SB 876 proposes an appropriation of \$3,611,336 from the general fund to the DWI program fund for an alcohol treatment center, intensive after-care program and a transitional living program for FY 2004 only.

### **OTHER SUBSTANTIVE ISSUES**

HB 930 was initiated by an eight county group of advocates made up mostly of DWI coordinators from the northeast counties of New Mexico. While there is an unmet need for intensive outpatient substance abuse services on a statewide basis, and while it is true that residential services are not evenly distributed geographically, DOH states that the need for residential services for the northeast counties may not be justified.

DOH suggests that a state planning process be initiated to assess the location and financial feasibility of inpatient treatment facilities throughout the state before specific solutions are adopted. That planning process should incorporate the need for such service, the levels of needed service, a plan for recruitment of needed professionals to provide the services and the long term funding options for maintaining the services beyond 2004.