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FISCAL IMPACT REPORT

ORIGINAL DATE 1-28-06

SPONSOR Papen LAST UPDATED _____ HB _____

SHORT TITLE Aging Department Info and Referral Task Force SB 496

ANALYST Collard

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Non-Rec	Fund Affected
FY06	FY07		
	\$203.8	Non-Rec	General Fund
	\$258.2	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

Duplicates HB 143

SOURCES OF INFORMATION

LFC Files

Responses Received From

Aging and Long-Term Services Department (ALTSD)
 Developmental Disabilities Planning Council (DDPC)
 Children, Youth and Families Department (CYFD)
 Office of Workforce Training and Development (OWTD)
 Department of Health (DOH)

SUMMARY

Synopsis of Bill

Senate Bill 496 appropriates \$462 thousand from the general fund to ALTSD for the purpose of funding the existing 211 information and referral system, expanding the system into new areas of the state, creating a statewide information and referral task force, developing of a strategic plan and hiring a certified operator and data entry training.

FISCAL IMPLICATIONS

The appropriation of \$258.2 thousand contained in this bill is a recurring expense and \$203.8 thousand is a non-recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of FY07 shall revert to the general fund.

ALTSD indicates at least one state staff person will be required permanently to support the project at a cost of approximately \$108.2 thousand per year, according to DDPC's estimate. ALTSD estimates \$258.2 thousand of the FY07 projected budget will go to recurring staff costs for the project manager and staff at five United Ways. There is no indication at present that any United Way in the state has the capacity to support its 211 system without ongoing financial support from the state. Required fiscal support will vary by site around the state.

SIGNIFICANT ISSUES

DOH describes the system as a toll free dialing code, available 7 days a week and 24 hours a day, that enables citizens to access information and call centers when they are in need and not sure where to turn for social, employment and other services. The system is not available in all communities in the state.

Support includes: project management and operating expenses for the existing system; expansion into two new areas of the state; a statewide information and referral task force; development of a strategic plan; and certified operator and data entry training.

ALTSD states this bill provides funds to continue and finalize the strategic planning process for statewide implementation of the 211 general information and referral system (211 I&R). This process has been in place, with state staff to partially support it, for the past year. The sole staff member has been employed by and housed in the Developmental Disabilities Planning Council (DDPC). An additional portion of the intended funds would go to directly support eight United Way 211 systems around the state, some to assist with operating costs and others to support start up operational and staffing costs. The institutionalization of an I&R or 211 task force, facilitated by ALTSD, would ensure adequate oversight of financial and program planning.

ALTSD also notes the Office of the Chief Information Officer's (OCIO) Social Services Resource Directory (SSRD) Committee needs to decide if 211 is the best vehicle for generalized entry into the statewide integrated data system. The possible resultant mix of private (United Way) systems and state-run data and program systems creates possible conflict and incompatibility in the areas of IT integration, provider oversight, contract management, and taxonomy configuration.

ADMINISTRATIVE IMPLICATIONS

ALTSD's Aging and Disabilities Resource Center Director and Consumer and Elder Rights Division Director would acquire additional responsibilities in implementing this program. The Resource Center would house the 211 staff coordinator, although staff space is extremely limited at present. The Resource Center already houses the United Way of Santa Fe County's 211 staff, although their I&R system is not currently integrated into the Resource Center's database.

DUPLICATION

Senate Bill 496 duplicates House Bill 143.

TECHNICAL ISSUES

ALTSD states if each United Way adopts a different 211 system, and each has to integrate with

the platform selected by the OCIO to support an integrated statewide Resource Directory, there may be significant compatibility problems across the entry, I&R, and data warehouse platforms. The IT staff in ALTSD, working with the SSRD Business Consultant would need to carefully manage IT implementation of the whole system, but would ultimately lack fiscal and technical control over the United Ways and other private vendors.

OTHER SUBSTANTIVE ISSUES

ALTSD states, in order to expedite the process of implementation of a statewide 211 system, local United Ways should seek alternative funding sources for long-term operational support. This could consist of federal funds or a combination of local government and private funding.

An alternative to a 211 entry point into the state-run SSRD is creation of a shared user interface by the SSRD vendors who will be providing planning services for the development of the SSRD. A shared user interface with appropriate links would provide adequate general I&R services for the majority of consumers since the combined databases in all state agencies contain virtually all public and private resources. The ALTSD Resource Center, for example, contains over 6,000 listings to serve the elderly and adult disabled residents of the state. The DOH Public Health system contains over 7,000 listings.

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

ALTSD indicates a coordinated statewide 211 I&R system would assist in centralizing access to the broadest range of resources sought by the residents of New Mexico. The strategic planning exercise intended in this bill would assist in creating that system. Without these funds, planning efforts would remain fragmented and it is unlikely that a viable coordinated system would ultimately be developed.

DDPC indicates the 211 lines for Information and Referral Services would be a significant part of the infrastructure of our communities without which we remain the status quo. Currently, access to community/State Health and Human Services information and referral is fractured and to large parts of the public within New Mexico, obscure. Multiple and competing telephone lines, 1-800 numbers (listed by names not by service type), websites and walk-in access points are poorly promoted. Many people find it difficult or impossible to find the agency to serve their needs by searching phone directories and making countless calls. Communities are not aware of these gateways to human services and consequently, these services may be under-utilized.

KBC/nt