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FISCAL IMPACT REPORT

ORIGINAL DATE 02/02/08

SPONSOR Komadina LAST UPDATED HB

SHORT TITLE Study To Treat Psychiatric Crises In Residential Settings SJM 15

ANALYST Hanika-Ortiz

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY08	FY09	FY10	3 Year Total Cost	Recurring or Non-Rec	Fund Affected
Total		\$0.1 See Fiscal				

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From
Department of Health (DOH)

SUMMARY

Synopsis of Bill

Senate Joint Memorial 15 requests the Human Services Department (HSD) to study a plan for implementing a system of response to and short-term treatment of persons suffering psychiatric crises who do not present a danger to themselves or others.

The Joint memorial provides for the following:

- Persons in apparent psychiatric crises who are not a danger to themselves or others are currently underserved by the mental health care system.
- Early treatment of persons in psychiatric crises at inpatient psychiatric facilities can be less costly than if those persons are untreated and become a danger to themselves or others.
- Persons suffering psychiatric crises and the mental health community are in need of an effective method of serving those suffering persons who are not yet a danger to themselves or others.
- The availability of inpatient psychiatric treatment facilities and other alternatives for the treatment of persons suffering psychiatric crises are limited.
- The prognosis for recovery of persons suffering psychiatric crises is substantially improved when early intervention and treatment are available and provided.

- A system that includes psychiatric emergency response medical teams and psychiatric urgent care clinics for short-term treatment options in a residential setting, with mobile capabilities to respond to psychiatric emergencies, can relieve law enforcement agencies from having to respond to persons suffering psychiatric crises.
- Appropriate treatment of persons suffering psychiatric crises can include several levels of effort, including short-term respite facilities; alcohol and drug treatment facilities for persons in recovery who are homeless; semi-independent and independent living facilities for persons transitioning from treatment to recovery; and life skills training.

SJM 15 also directs HSD to submit their finding to the interim Health and Human Services Committee by December 1, 2008.

FISCAL IMPLICATIONS

DOH reports that the fiscal impact will vary depending upon the way in which the bill is interpreted. The impact would be most significant if HSD is to create a plan, study the plan in consultation with the community, and then implement the plan. At its least significant fiscal and administrative impact, the Department would be reviewing a plan and reporting with recommendations.

As well as the fiscal and administrative impact to conduct the study or review a plan, any recommendations made by the SJM 15 Study Group could have major fiscal impact if new programming is requested for services implementation.

SIGNIFICANT ISSUES

DOH reports that SJM 15 directs HSD to study a plan to implement a system of response to and short-term treatment of persons suffering psychiatric crises to include options such as psychiatric emergency response teams, psychiatric urgent care clinics, mobile crisis response, short-term respite facilities, semi-independent and independent living facilities and life skills training.

PERFORMANCE IMPLICATIONS

DOH reports that crisis services are one of the Behavioral Health Collaborative's Strategic Plan priorities.

ADMINISTRATIVE IMPLICATIONS

HSD will be requested to report the findings of its study to the interim legislative health and human services committee no later than December 1, 2008.

TECHNICAL ISSUES

DOH seeks clarification about whether HSD is to prepare a plan or study a plan presented by some other body.

OTHER SUBSTANTIVE ISSUES

DOH further notes that one of the statements on which SJM 15 is founded refers to "suffering persons who are not yet a danger to themselves or others". Research shows that absent other

factors -- such as childhood victimization, a high crime neighborhood and substance abuse – even persons with severe behavioral health disorder diagnoses are no more likely to become violent than persons in the general population without such diagnoses.

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

Crisis services will continue to be developed by the Behavioral Health Collaborative and Local Collaboratives.

AHO/bb