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FISCAL IMPACT REPORT

ORIGINAL DATE 1/29/16

SPONSOR Maestas/Armstrong **LAST UPDATED** _____ **HB** 231

SHORT TITLE Sexual Assault Services Programs **SB** _____

ANALYST Chenier

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Nonrecurring	Fund Affected
FY16	FY17		
	\$1,500.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY16	FY17	FY18	3 Year Total Cost	Recurring or Nonrecurring	Fund Affected
Total		\$1,500.0	\$1,500.0	\$3,000.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

HB 231 relates to HB 130, HB 131, HB 230, SB 18, and SB 125.

SOURCES OF INFORMATION

LFC Files

Responses Received From

Department of Health (DOH)

Human Services Department (HSD)

Children, Youth & Families Department (CYFD)

SUMMARY

Synopsis of Bill

House Bill 231 appropriates \$1.5 million from the general fund to the Department of Health for sexual assault services programs.

FISCAL IMPLICATIONS

The appropriation of \$1.5 million contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of FY17 shall revert to the general fund.

SIGNIFICANT ISSUES

HSD, DOH, and the Children Youth and Families Department (CYFD) all have a role in sexual assault services. CYFD currently manages \$11.6 million in domestic violence funds which includes sexual assault services.

The Behavioral Health Services Division (BHSD) of HSD focuses on funding local programs to provide behavioral health treatment for victims. In FY16, the BHSD budget includes \$823 thousand in general fund revenue for sexual assault programs which would remain in the department's base budget for FY17.

DOH provides sexual violence prevention and crisis services using \$2.6 million in general fund revenue. Ninety-five percent of these funds are expended through contracts with community service providers throughout the state to fund sexual violence crisis and prevention services.

Consolidation and or improved coordination between the three agencies would help to improve sexual assault services in New Mexico.

ADDITIONAL BACKGROUND INFORMATION

New Mexico has a significant need for trauma-informed services for victims of sexual assault. Recognizing the need, in 1978, the New Mexico Legislature created the Sexual Crimes Prosecution and Treatment Act. This law mandates that the state provide services to professionals (medical, mental health, law enforcement, social services) to assist them in offering appropriate and effective services to victims of sexual assault. This law outlines the necessity of providing ongoing training and mandates the collection of sexual assault evidence in order to provide victims with the best possible prosecution of their cases. Additionally, the law provides for payment of all victims' medical exams following an assault or the discovery of abuse. (Sections 29-11-1, et seq., NMSA 1978).

The New Mexico Coalition of Sexual Assault Programs (Coalition), a private, non-profit organization, was created and continues to exist to fulfill the requirements of this statute. The Coalition provides technical assistance and training services statewide, with an emphasis on children, to sexual abuse programs coordinator and statewide training for all professionals working with sexual abuse victims. In addition, the coalition processes and verifies sexual assault bills (i.e. medical treatment bills and forensic medical exams bills) for victims of a sexual assault in accordance with the Sexual Crimes Prosecution and Treatment Act.

The Behavioral Health Services Division (BHSD), as the state mental health authority, has funded a NM Sexual Assault Coalition, and sexual assault service providers, for a number of years. In SFY 2016, HSD, through its Behavioral Health Services Division, funds the Coalition about \$1.221 million each year. An additional \$1 million is allocated to fund local service providers.

In SFY 2016, BHSD funds the following sexual assault service providers:

- Rape Crisis Center of Central New Mexico - Albuquerque (Bernalillo, Sandoval, Torrance & Valencia) Allocation for FY16=\$265,154; 115 Clients served in 2015;
- Community Against Violence – TAOS, NM (Taos, Colfax, Union, Guadalupe, Mora, San Miguel & Rio Arriba) Allocation for FY16=\$60,460; 47 clients served in 2015;
- La Pinon Sexual Assault Recovery Services of Southern New Mexico- Las Cruces, NM (Dona Ana, Hidalgo, Luna Otero & Sierra) Allocation for FY16= \$166,710; clients served data unavailable;
- Solace Crisis Treatment Center - Santa Fe, NM (Santa Fe, Los Alamos, Rio Arriba & San Miguel) Allocation for FY16=\$309,460; 282 clients served in 2015;
- Desert View, Inc. - Farmington, NM (San Juan) Allocation for FY16 \$226,000; 370 clients served in 2015.

Sexual assault providers use Trauma-informed Care, Person-centered Planning, Evidence-based Programs and Recovery-Oriented Systems of Care. Providers are trained in Cultural Competency and Health Privacy laws.

The NM Sexual Assault Coalition provides local programs and providers with training on evidence collection, legal advocacy, treatment methodologies and requirements of state law. Of the \$1.0 million allocated to the Coalition, about \$100,000 is used for training and about \$800,000 is used for Forensic Medical Services and the rest is for needed exam supplies.

BHSD has established a comprehensive billing and reporting system BHSDSTAR that many BHSD contractors use that streamlines billing and strengthens accountability.

HSD ensures that the medical coverage for Medicaid enrolled individuals provides the additional health and behavioral health services that support victim's needs.

DOH provided the following:

According to “Sex Crimes in New Mexico XII: An Analysis of 2013 data from The New Mexico Interpersonal Violence Data Central Depository” in 2013, there were 3,967 rapes reported by law enforcement agencies and 1,654 victims served by sexual assault service providers. However, since many victims of sexual assault do not report their rape or assault to either law enforcement or medical providers, these numbers may underestimate the prevalence of sexual assault in New Mexico.

Persons who have experienced sexual assault are at elevated risk for many adverse health outcomes, including an increased risk of poor physical health, poor mental health, high medical costs, chronic health conditions, sexual or substance use risk behaviors, suicidal ideation, and suicide attempts. Competent and comprehensive responses to survivors reduce Posttraumatic Stress Disorder (PTSD) symptoms and mental and physical health problems.

In FY16, DOH received \$2.6 million in general funds for sexual assault services and has included the same amount in its FY17 request. Both DOH and the Human Services Department (HSD) have roles in sexual assault prevention and treatment. HSD provides

health care services, including counseling services, for victims of sexual assault. DOH provides a broad range of services, but not direct health care services, to prevent and address sexual assault. These services include system infrastructure support, technical services to providers, crisis response services, client advocacy, SANE program infrastructure, training for therapists, prevention services, and surveillance.

ADMINISTRATIVE IMPLICATIONS

Having three state agencies separately fund Sexual Assault and Rape Crisis Centers results in confusion in billing and reporting and results in administrative duplication for providers and agencies.

DUPLICATION, CONFLICT, COMPANIONSHIP OR RELATIONSHIP

HB 131 proposes to appropriate one million two hundred thousand dollars (\$1,200,000) to the Department of Public Safety to increase the number of state crime laboratory full time employees for the purpose of processing sexual assault examination kits.

HB 230 proposes to appropriate two million dollars (\$2,000,000) to the Department of Public Safety for the scientific testing and analysis of sexual assault examination kits.

SB 18 proposes to appropriate one million dollars (\$1,000,000) to the Department of Health to provide sexual assault and rape crisis center services.

SB 125 proposes to appropriate one million dollars (\$1,000,000) to the Department of Health to fund sexual assault prevention and sexual assault services and training.

EC/jo/jle