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FISCAL IMPACT REPORT

ORIGINAL DATE 01/24/13

SPONSOR Lopez LAST UPDATED _____ HB _____

SHORT TITLE Sexual Assault Prevention & Services SB 46

ANALYST Esquibel

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Nonrecurring	Fund Affected
FY13	FY14		
	\$1,000.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

Relates to SB 74, Sexual Assault Prevention and Services
 Relates to Appropriation in the General Appropriation Act, Department of Health

SOURCES OF INFORMATION

LFC Files

Responses Received From

Department of Health (DOH)
 Human Services Department (HSD)

SUMMARY

Synopsis of Bill

Senate Bill 46 (SB46) appropriates \$1 million in general fund revenue in FY14 to the Department of Health (DOH) for sexual assault prevention, services and training.

FISCAL IMPLICATIONS

Senate Bill 46 contains a recurring appropriation of \$1 million from the general fund. Any unexpended or unencumbered balance remaining at the end of FY14 shall revert to the general fund.

The FY13 operating budget for the DOH includes a total of \$2.1 million for sexual assault prevention and treatment services. For FY14, the LFC budget recommendation for the DOH includes an additional \$400 thousand in general fund revenue for sexual assault prevention and treatment services, and the Executive recommendation includes \$1 million for the same purpose.

The DOH indicates it would request authority to use a minimum of 5 percent of the amount appropriated for services for the department's administrative costs.

The HSD indicates sexual assault services provided statewide by the Coalition of Sexual Assault Programs (NMCSAP) have been funded by the Behavioral Health Services Division (BHSD) of the Department in FY12, FY13, and in the FY14 request. The yearly amount available is \$927.3 thousand. In addition, a range of other sexual assault services provided by five direct service providers are funded by the BHSD in FY13 in the total amount of \$763.8 thousand. Allocations to these providers recur each year.

SIGNIFICANT ISSUES

The HSD reports some outpatient treatment services that are medically necessary as a consequence of sexual assault would be covered through Medicaid if all the following criteria are met:

- The patient is Medicaid-eligible;
- The service is a Medicaid covered service;
- The provider must be credentialed as a Medicaid provider of that service through the NM Medicaid fiscal agent and/or as a network provider of a Medicaid managed care organization; and
- The provider is providing services in accordance with his or her license.

ADMINISTRATIVE IMPLICATIONS

The HSD indicates additional funded services could be administered through the Behavioral Health Collaborative's statewide entity which contracts with the sexual assault agencies.

OTHER SUBSTANTIVE ISSUES

The DOH indicates SB46 proposes to expand sexual assault prevention programs and services, including the following examples:

- Prevention education and presentation: Developing public health approaches to primary prevention of sexual assault, including a focus risk and protective factors; developing and testing prevention strategies; and widespread implementation of evidence-based prevention strategies.
- Sexual Assault Nurse Examiners and Coordination: The victim of a sexual assault is one of the most severely psychologically traumatized individuals a nurse can encounter. Upon presentation to the hospital, the victim is often *re*-traumatized as well. The role of the sexual assault nurse examiner (SANE) is the best possible patient *support*. The SANE nurse is responsible for not only preserving the dignity of the victim, but for collecting forensic evidence that links the victim and the suspect. Funds also support SANE Training and Products.
- Training: Statewide and community events (presentations, workshops, mini-conferences) to professionals (law enforcement, prosecutors, medical staff, school staff, faith community, sexual assault service providers, probation and parole, and corrections staff).