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FISCAL IMPACT REPORT

ORIGINAL DATE 1/24/06

SPONSOR Feldman LAST UPDATED _____ HB _____

SHORT TITLE Adult Suicide Prevention Resources SB 75

ANALYST Lewis

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Non-Rec	Fund Affected
FY06	FY07		
	500.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

Relates to SB 27 (Higher Ed Suicide & Binge-Drinking Prevention)

SOURCES OF INFORMATION

LFC Files

Responses Received From

Department of Health (DOH)

Human Services Department (HSD)

SUMMARY

FOR THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE

Synopsis of Bill

Senate Bill 75 appropriates \$500,000 from the general fund to the Department of Health to expand suicide prevention resources and support to the adult population through statewide community coordination.

FISCAL IMPLICATIONS

The appropriation of \$500,000 contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of fiscal year 2007 shall revert to the general fund.

Human Services Department (HSD) notes the possibility that some of the individuals who would benefit from the services outlined under SB 75 could be Medicaid recipients or Medicaid eligible. Any services provided to those individuals could be eligible for a federal Medicaid match.

SIGNIFICANT ISSUES

According to the Department of Health (DOH), suicide in adults and teens is a public health crisis. New Mexico's suicide rates have historically been nearly twice the national rate, ranking fifth highest among the states in 2002. Suicide accounted for 22% of all injury deaths in New Mexico between 2001 and 2003. Suicide rates among adult males are disproportionately higher than female suicide rates; and males older than 70 have the highest suicide rate of any other age group. Among males, American Indians have the highest suicide rates. Suicide attempt rates among women between 25 and 44 years of age are also higher than the attempt rates for other age-sex groups.

According to DOH, the 2002 analysis of Behavioral Health Needs & Gaps in New Mexico found that behavioral health services in New Mexico are inadequate, difficult to access and distributed geographically in an inequitable manner. The Gaps Analysis also found that 80% of psychiatrists, 70% of psychologists, 47% of social workers, and 53% of counselors are concentrated in Bernalillo and Santa Fe Counties.

According to the New Mexico Department of Health Epidemiology and Response Division Strategic Prevention Framework Epidemiology Profile (spring, 2005), suicide is closely associated with drug abuse, alcohol abuse, and mental health disorders. Although not all New Mexico suicide deaths can be attributed to these conditions, the suicide rate is a useful indicator of the extent of these problems. New Mexico's suicide rate is 1.5 to 2 times the national rate, and has consistently been one of the highest in the United States.

According to HSD, SB 75 provides funding for community coordination that will complement the work being done by the Interagency Behavioral Health Purchasing Collaborative. HSD suggests that the local collaboratives should be part of the decision-making process regarding the need for specific behavioral health services in their geographic area; and any community coordination activities that occur should be done in tandem with the local collaboratives.

ADMINISTRATIVE IMPLICATIONS

DOH would need additional FTEs for management of programs (contract monitoring, technical assistance to the providers and evaluation of process and outcome data) funded through SB 75.

ML/mt