

Department of Planning and Budget

2002 Fiscal Impact Statement

1. Bill Number: HB887

House of Origin ☒ Introduced ☐ Substitute ☐ Engrossed
Second House ☐ In Committee ☐ Substitute ☐ Enrolled

2. Patron: Hamilton

3. Committee: Health, Welfare and Institutions

4. Title: Acute care psychiatric and residential beds, etc.

5. Summary/Purpose: This bill mandates the collection, dissemination and reporting of the number of licensed and staffed acute care psychiatric and residential treatment beds for children and adolescents under the age of 18 in public and private facilities. The bill allows any hospital or facility that must report this data to report it directly to the non-profit organization cited in §32.1-276.4. The bill requires the non-profit organization to establish a technical advisory committee to determine the actual demand for these beds. The provisions of this bill and Chapter 7.2 (§32.1 -276.2 et seq.) of Title 32.1 expire on July 1, 2003.

6. No Fiscal impact.

7. Budget amendment necessary: No.

8. Fiscal implications: This legislation requires that data on the number of and demand for licensed and staffed acute care psychiatric and residential treatment beds for children and adolescents under the age of 18 be made public. For the Department of Mental Health, Mental Retardation and Substance Abuse Services (DMHMRSAS), reporting of this data would have minimal impact, with the Commonwealth Center for Children and Adolescents being the main public facility affected. It is also likely that those facilities licensed by DMHMRSAS will be minimally impacted by the data submission requirements. The Virginia Department of Health, the contracting agency for this data collection, reports that this bill will have no fiscal impact on the agency.

9. Specific agency or political subdivisions affected: Virginia Department of Health, Department of Mental Health, Mental Retardation and Substance Abuse Services.

10. Technical amendment necessary: No.

11. Other comments: The costs associated with a technical advisory committee, development of a data collection tool, and assessment and dissemination of the data may or may not be handled within the non-profit's existing resources. Although some increase in costs may be expected by the non-profit organizations specified in the bill, that organization could not provide a definitive estimate at this time. This bill is a companion to SB426.

Date: 1/23/02/jlv

Document: G:\02-04\Efis02\Hb887.Doc Janet Vogelgesang

cc: Secretary of Health and Human Resources