

Department of Planning and Budget 2018 Fiscal Impact Statement

1. **Bill Number:** HB 1157

House of Origin	<input type="checkbox"/> Introduced	<input type="checkbox"/> Substitute	<input checked="" type="checkbox"/> Engrossed
Second House	<input type="checkbox"/> In Committee	<input type="checkbox"/> Substitute	<input type="checkbox"/> Enrolled

2. **Patron:** Pillion

3. **Committee:** Health, Welfare and Institutions

4. **Title:** Substance-exposed infants; plan for services.

5. **Summary:** Provides that the Department of Health shall serve as the lead agency with responsibility for the development, coordination, and implementation of a plan for services for substance-exposed infants in the Commonwealth. Such plan shall (i) support a trauma-informed approach to identification and treatment of substance-exposed infants and their caregivers and (ii) include (a) options for improving screening and identification of substance-using pregnant women, (b) use of multidisciplinary approaches to intervention and service delivery during the prenatal period and following the birth of the substance-exposed infant, and (c) referral among providers serving substance-exposed infants and their families and caregivers. The Department shall report annually on December 1 to the General Assembly regarding implementation of the plan.

6. **Budget Amendment Necessary:** Yes.

7. **Fiscal Impact Estimates:** See item 8.

7a. Expenditure Impact:

<i>Fiscal Year</i>	<i>Dollars</i>	<i>Positions</i>	<i>Fund</i>
2018	47,000	0	General
2019	47,000	0	General
2020	47,000	0	General
2021	47,000	0	General
2022	47,000	0	General
2023	47,000	0	General
2024	47,000	0	General

8. **Fiscal Implications:** This bill, as engrossed, would have a fiscal impact on the Commonwealth. The provisions of the bill provide that the Department of Health (VDH) will serve as the lead agency for the development, coordination and implementation of a plan for services for substance exposed infant (SEI). VDH would need one additional wage staff for the development, coordination, and implementation of the plan. Cost estimates for the wage position including technology and supplies. Since this would be an additional task for the Virginia Neonatal-Perinatal Collaborative (VNPC) and VDH, the agency would not be able

to absorb the workload within their limited staff and accomplish current efforts. However, any additional workload as a result of the reporting requirement can be absorbed within existing resources.

- 9. Specific Agency or Political Subdivisions Affected:** The Virginia Department of Health, the Department of Social Services, and the Department of Behavioral Health and Developmental Services.

- 10. Technical Amendment Necessary:** No.

- 11. Other Comments:** SB 389, introduced by Senator Chafin, is a companion bill.