

Department of Planning and Budget 2023 Fiscal Impact Statement

1. Bill Number: HB1891

House of Origin ☒ Introduced ☐ Substitute ☐ Engrossed

Second House ☐ In Committee ☐ Substitute ☐ Enrolled

2. Patron: McGuire

3. Committee: Committee Referral Pending

4. Title: Transcranial magnetic stimulation; pilot program.

5. Summary: Requires the Department of Behavioral Health and Developmental Services to establish a pilot program to make electroencephalogram combined transcranial magnetic stimulation available for veterans, first responders, and law-enforcement officers. The bill requires the State Board of Behavioral Health and Developmental Services to establish regulations for the pilot program.

6. Budget Amendment Necessary: Yes, Item 311

7. Fiscal Impact Estimates: See 8 below.

8. Fiscal Implications: The fiscal impact of this legislation will be determinate on the amount of funding made available. However, this fiscal impact statement seeks to provide estimated costs of establishing pilot program sites.

Because this would be a new program, the costs of establishing the sites are rough estimates of what will be needed, but include both one-time and ongoing costs, including the cost to purchase, maintain, and operate a transcranial magnetic stimulation (TMS) machine and encephalogram (EEG) machine, and a psychiatrist to manage each site. Other projected costs include clinical positions required to meet the clinical trial requirements of the legislation, and a peer-to-peer support network through the Community Services Board.

For reference, a mobile transcranial stimulation pilot program was established in Los Angeles in 2017-2018 with an estimated operating cost of approximately \$725,000 per year per site (three-year pilot total of \$2.4 million). Additionally, Ohio has proposed similar legislation with a \$3.0 million annual budget. This estimate is based on the unit having a physical location. While a mobile program may not have the same physical space requirements, it would have additional associated costs, such as the purchase and maintenance of a transport vehicle. The total annual program cost will be dependent on the number of sites to be established.

Program Costs Per Site	FY 24 - one-time	FY 24 - ongoing
TMS Machine	\$50,000	
EEG Machine	\$5,000	
Technician Salary + Fringe (2 FTE)		\$100,000
Clinical Research Coordinator Salary + Fringe (1.5 FTE)		\$150,000
Research Lead Salary + Fringe (1 FTE)		\$150,000
One-time costs associated with site establishment	\$40,000	
Annual lease		\$40,000
Peer-to-Peer Support Network		\$25,000
Psychiatrist		\$300,000
Total	\$95,000	\$765,000
	Total first year	\$860,000
	Total ongoing	\$765,000

Actual funding need for the program will also be influenced by both the health concern being treated and if any insurance being used will cover TMS treatment. For instance, Tricare only covers TMS for depression, but not the full scope of diagnoses listed in the bill as it is currently written (substance use disorders, mental illness, sleep disorders, traumatic brain injuries, sexual trauma, post-traumatic stress disorder and accompanying comorbidities, concussions or other brain trauma, or other quality of life issues). Because of the wide variety of health concerns included, and the uncertainty of coverage, this estimate does not include any third-party revenue.

9. Specific Agency or Political Subdivisions Affected: Department of Behavioral Health and Developmental Services

10. Technical Amendment Necessary: No.

11. Other Comments: This bill is a companion to SB1234.