

## Department of Planning and Budget

### 2023 Fiscal Impact Statement

**1. Bill Number:** SB1415

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

**2. Patron:** Pillion

**3. Committee:** Passed both Houses.

**4. Title:** Opioid impact reduction.

**5. Summary:** Allows any person to possess and administer naloxone or other opioid antagonist used for overdose reversal other than naloxone in an injectable formulation with a hypodermic needle or syringe in accordance with protocols developed by the Board of Pharmacy in consultation with the Board of Medicine and the Department of Health, provided that certain other conditions enumerated in current law are met. The bill removes training requirements related to the possession and administration of naloxone. The bill directs the Department of Health, the Department of Behavioral Health and Developmental Services, and the Department of Corrections to collaborate to develop a statewide comprehensive plan for the distribution of naloxone throughout the Commonwealth and allows such agencies to begin implementation of the plan to the extent the agencies are able to do so with existing resources. The bill requires the Department of Health to provide a report on the development of the comprehensive statewide naloxone plan, including the resources needed to fully implement the plan, to the Chairs of the House Committee on Appropriations and the Senate Committee on Finance and Appropriations by September 1, 2023. The bill directs the Department of Health to begin the development of a registry consisting of nonprofit organizations that work to reduce the impact of opioids in the Commonwealth and directs the Department of Corrections to amend its regulations to require that training in the administration of naloxone be provided to every inmate prior to release.

**6. Budget Amendment Necessary:** Yes, item 291.

**7. Fiscal Impact Estimates:**

**7a. Expenditure Impact:**

<i>Fiscal Year</i>	<i>Dollars</i>	<i>Positions</i>	<i>Fund</i>
2024	\$265,794	2	01000
2025	\$247,276	2	01000
2026	\$247,276	2	01000
2027	\$247,276	2	01000
2028	\$265,794	2	01000
2029	\$247,276	2	01000
2030	\$247,276	2	01000

- 8. Fiscal Implications:** The bill tasks VDH with the development and maintenance of the Commonwealth Opioid Impact Reduction Registry (the Registry). There would be a one-time cost of \$9,950 to establish the Opioid Impact Reduction Registry with a searchable web-based component. Ongoing maintenance costs would be \$10,500 annually. VDH is also required to develop a process to determine what organizations that work to reduce the impact of opioids in the Commonwealth should be included in such registry, and what criteria and metrics should be utilized to determine their inclusion in such registry. VDH would require an Opioid Impact Registry Coordinator to oversee the development and maintenance of the Registry; cost for this position would be \$105,244 (including salary, fringe, IT, etc.).

The bill also directs VDH, the Department of Behavioral Health and Developmental Services and the Department of Corrections to develop a plan for naloxone distribution throughout the state. VDH would need a Program Analyst to oversee the development of the Naloxone distribution plan; cost for this position is \$131,532 (including salary, fringe, IT, etc.). The agencies shall begin implementation of the plan contingent to the extent the agencies have existing resources to do so.

VDH would also need contractual staff in the first year to help author reports and coordinate with VDH staff as well as a coordinator to assist with the development of a naloxone distribution plan and ongoing coordination of opioid prevention efforts. VDH can absorb this cost within existing resources. The total fiscal impact from the general fund for VDH in the first year is \$265,794 and \$247,276 ongoing.

The bill states that the Department of Corrections shall amend its regulations to require that training in the administration of naloxone be provided to every inmate prior to release. DOC has stated this can be handled within existing resources.

The development of a plan may be able to be absorbed within existing resources by the Department of Behavioral Health and Developmental Services.

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

- 10. Technical Amendment Necessary:** No.

- 11. Other Comments:** None.