Department of Planning and Budget 2008 Fiscal Impact Statement (Revised)

1.	Bill Number: SB106					
	House of Orig	<u>X</u>	Introduced	Substitute		Engrossed
	Second House		In Committee	Substitute		Enrolled
2.	Patron:	Cuccinelli				
3.	Committee:	Courts	of Justice			
4.	Title:	Involun	tary commitm	ent; criteria for	deteri	mining outpatient treatment.

5. Summary: Changes the criteria for determining when outpatient treatment may be ordered for a person whose involuntary commitment is sought. The new criteria would be that the person has a mental illness and, as a result of that mental illness, (i) there is a substantial likelihood that in the near future he will cause serious physical harm to himself or another person as evidenced by recent behavior causing, attempting, or threatening such harm, (ii) there is a substantial likelihood that in the near future he will suffer serious harm due to substantial deterioration of his capacity to protect himself from such harm or to provide for his basic human needs, or (iii) he is unable to comprehend the nature of his illness or the need for treatment, is experiencing a substantial impairment of his judgment, reasoning, or behavior, and will, if not treated, suffer or continue to suffer a substantial deterioration in his previous ability to function in the community. Currently, the criteria for involuntarily committing a person to inpatient or outpatient treatment is the same.

6. Fiscal Impact Estimates: Tentative

7. Budget Amendment Necessary: Tentative

- 8. Fiscal Implications: This change broadens the existing criteria in a similar manner to SB246, the comprehensive reform bill, but also adds a third factor that an individual is unable to comprehend the nature of his illness. Unlike SB246, the criteria would apply only to involuntary outpatient treatment. Currently, approximately 1,000 individuals each year are ordered into involuntary outpatient treatment. Outpatient treatment is significantly less expensive than inpatient treatment, averaging less than \$800 per 90 day treatment for a base level of services (including case management). A client requiring more intensive outpatient services could cost as much as \$16,000 per 180 day treatment period. Therefore, if an additional 1,000 individuals are committed, the cost of this bill could range from \$800,000 for basic level services to \$16.0 million for intensive outpatient care.
- **9. Specific Agency or Political Subdivisions Affected:** Department of Mental Health, Mental Retardation and Substance Abuse Services; Community Services Boards
- 10. Technical Amendment Necessary: No

Date: 1/29/2008 dpb

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cc: Secretary of Health and Human Resources