Department of Planning and Budget 2015 Fiscal Impact Statement

1.	Bill Number:	HB1365		
	House of Origin	Introduced	Substitute	Engrossed
	Second House	In Committee	Substitute	Enrolled

- **2. Patron:** Campbell
- 3. Committee: Health, Welfare and Institutions
- **4. Title:** Discharge from state hospitals or training centers; local departments of social services
- **5. Summary:** Changes from mandatory to optional whether a local department of social services provides care for an individual who is discharged from a state hospital or training center because he is not a proper case for treatment. If the director of the appropriate local department of social services agrees to accept the individual for care, the provision of public assistance or social services to the individual is the responsibility of such local department of social services as determined by regulations adopted by the State Board of Social Services. Under current law, local departments are required to provide public assistance or social services to such individuals if such care is necessary for the individual's welfare.
- 6. Budget Amendment Necessary: No
- 7. Fiscal Impact Estimates: Indeterminate
- 8. Fiscal Implications: This bill makes it optional, rather than mandatory, for a local department of social services to receive and care for an individual discharged from a state facility operated by the Department of Behavioral Health and Developmental Services (DBHDS) after the determination that they are not a proper case for treatment. It is not anticipated that this bill will have an impact on the services provided by the Department of Social Services (DSS); therefore, this bill has no fiscal impact on DSS.

However, this bill could effectively slow the rate of discharges from state hospitals and training centers while the local DSS authority is determining eligibility for benefits. This could create a fiscal impact in the form of increased costs for individual hospital stays. The size of the fiscal impact is indeterminate because the bill does not provide language as to how much time the local DSS agent has in order to determine eligibility or what guidelines they would utilize to do so. Furthermore, the resulting increased length of hospital stays could vary greatly based on the patient's individual cost of care and whether or not the individual is insured.

9. Specific Agency or Political Subdivisions Affected: local departments of social service, state facilities.

10. Technical Amendment Necessary: No

11. Other Comments: None