

Department of Planning and Budget

2016 Fiscal Impact Statement

1. Bill Number: HB656

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

2. Patron: O'Bannon

3. Committee: Courts of Justice

4. Title: Syringes services program; public health emergency.

5. Summary: Authorizes the State Health Commissioner to establish a syringe services program and to authorize persons who are not otherwise authorized by law to dispense or distribute hypodermic needles and syringes to dispense or distribute hypodermic needles and syringes in order to control the transmission of disease when the Commissioner has declared a public health emergency and determines it is necessary to protect public health. The bill also provides that a court may, in determining whether an object is drug paraphernalia, consider whether possession or distribution of the object is part of participation in such a syringe services program.

6. Budget Amendment Necessary: No.

7. Fiscal Impact Estimates: Preliminary, see item #8.

8. Fiscal Implications: The total fiscal impact the provisions of this bill will have on the Commonwealth cannot be determined at this time and any fiscal implications are preliminary. The agency has stated that recurring annual costs are not anticipated at this time and any expenditure impact would be limited to circumstances when a public health emergency, such as a sudden increase in new cases of a bloodborne pathogen, would warrant the implementation of a syringe services program. The estimated cost for providing 6 months of syringe services to 100 people who inject drugs would be approximately \$76,296. This estimate is preliminary, as the fiscal impact would be affected by several variables, including the size of the community and size of the outbreak at the time of the public health emergency. The agency assumed a client population of 100 individuals as a preliminary estimate. Existing staff would be redirected to implement this emergency intervention. A recent Congressional action allows federal funds to be used for all aspects of syringe services programs except the purchase of hypodermic syringes and needles. Virginia Department of Health anticipates using special revenue for costs not covered by federal grants.

Timely implementation of syringe services would reduce new cases of Human Immunodeficiency Virus (HIV) and Hepatitis C Virus (HCV). The estimated lifetime treatment costs per each HIV infected person is \$391,223 and ranges from \$31,452-\$238,000

for each person infected with HCV, resulting in significant health care costs savings for each averted infection. These savings would be recognized by private and public health care payers and also providers and patients.

9. Specific Agency or Political Subdivisions Affected: Department of Health.

10. Technical Amendment Necessary: No.

11. Other Comments: None.