

Department of Planning and Budget

2017 Fiscal Impact Statement

1. Bill Number: SB 1222

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

2. Patron: Barker

3. Committee: Passed Senate

4. Title: Acute psychiatric patient registry; DBHDS to develop and administer.

5. Summary: Directs the Department of Behavioral Health and Developmental Services to develop and administer an acute psychiatric patient registry to collect, aggregate, and display de-identified information about individuals who meet the criteria for temporary detention to facilitate the timely identification of a facility for temporary detention and treatment of the individual. The bill provides that every state facility, community services board, behavioral health authority, and private provider of mental health services licensed by the Department may participate in the acute psychiatric patient registry and requires that each participating community services board and behavioral health authority update information contained in the acute psychiatric patient registry to include information about a person found to meet the criteria for temporary detention and requires private providers to identify patients for whom they are able to provide temporary detention and treatment and to contact the state facility, community services board, or behavioral health agency having custody of the individual to facilitate the transfer of the patient to the provider for temporary detention and treatment. The provisions of the bill will not become effective unless an appropriation effectuating the purposes of the bill is included in a general appropriation act passed in 2017 by the General Assembly

6. Budget Amendment Necessary: Yes. Item 313.

7. Fiscal Impact Estimates: See 8 below.

8. Fiscal Implications: The amended version of the bill does not significantly alter the fiscal impact of the requirements of the legislation. The Department of Behavioral Health and Developmental Services (DBHDS) does not currently maintain an acute psychiatric patient registry to collect, aggregate, and display de-identified information about individuals who meet the criteria for temporary detention to facilitate the timely identification of a facility for temporary detention and treatment of the individual. Therefore, DBHDS would need to buy software, build infrastructure, and hire additional staff to implement such a system.

Information technology and security staff at DBHDS have provided preliminary estimates for the cost of implementing a web-based system that includes de-identifying information; however, these estimates vary in range and would require a more in-depth assessment to

gauge more concrete needs. They estimate that the following components will be needed and require the following general fund resources:

Software: Software would need to be purchased that ensures that all identifiable patient information has been removed from records before posting to the web-based registry. It is estimated that this software would cost approximately \$75,000 initially and incur \$1,000 annually for updates and maintenance.

Infrastructure: Cloud infrastructure would be necessary in order to build a web-based registry that can be accessed and manipulated by the Department as well as each of the 40 Community Services Boards (CSBs). However, it is unclear if this functionality can be built into the existing cloud infrastructure without a more in-depth analysis. If functionality cannot be built into the current infrastructure, then new code will have to be written onto DBHDS servers. This would require approximately \$80,000 for the first year and \$60,000 each year on-going.

If the functionality can be built into the existing infrastructure, it would reduce costs by approximately \$50,000 each year. If the information required by the bill allows for the fields within the registry to be limited to drop-down boxes only, the infrastructure costs would be decreased to \$20,000 for the first year and \$15,000 on-going. Open text fields require higher security standards and infrastructure and therefore incur a higher cost. The bill does not specify which types of fields would be active in the proposed registry.

Staff: An additional staff member would be required to implement, test, and monitor the system in order to ensure not only that the bed registry is operating according to the proposed legislation but also to provide assurance that all identifiable patient information is being removed by the software, as to not violate state or federal privacy regulations. This IT Privacy Officer position would cost approximately \$108,000 (which includes salary, benefits, and non-personnel services) for 22 pay periods in 2018 and approximately \$116,000 all-included for 24 pay periods in 2019.

ITEM	FY 2018 Cost	FY 2019 Cost (On-Going)
Software	\$75,000	\$1,000
Infrastructure	\$80,000	\$60,000
Staff	\$108,000	\$116,000
TOTAL	\$263,000	\$177,000

The amended version of the bill includes a clause making the legislation effective upon appropriation from the General Assembly.

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

10. Technical Amendment Necessary: No

11. Other Comments: None