

**LEGISLATIVE BUDGET BOARD**  
**Austin, Texas**

**FISCAL NOTE, 83RD LEGISLATIVE REGULAR SESSION**

**May 6, 2013**

**TO:** Honorable Lois W. Kolkhorst, Chair, House Committee on Public Health

**FROM:** Ursula Parks, Director, Legislative Budget Board

**IN RE:** **HB2625** by Coleman (Relating to disease management practices of local mental health authorities.), **Committee Report 1st House, Substituted**

**The fiscal impact of implementing the bill cannot be determined at this time due to the lack of information regarding the demand for and cost of the expanded treatment services for the additional covered disorders; however, the cost is likely significant.**

The bill would amend Chapter 533, Health and Safety Code relating to disease management practices of local mental health authorities (LMHAs). The bill would require LMHAs to provide assessment services, crisis services, and intensive and comprehensive services using disease management practices for an expanded list of disorders and to ensure that adults and children could receive services. The bill would require the Department of State Health Services (DSHS) to ensure that the LMHAs incorporate jail diversion strategies using disease management practices for an expanded list of disorders. The bill would take effect on January 1, 2014.

Health and Safety Code Section 533.001 requires DSHS to provide services first to those persons who are in the priority population, defined in the DSHS strategic plan as adults with schizophrenia, bipolar disorder, or major depressive disorder who have a significant functional impairment. Due to the current prioritization of these groups, it is assumed that additional state costs would be incurred to ensure that the expanded population identified in the bill receives services. Due to a lack of information on the demand for treatment for disorders on the expanded list, this treatment cost is indeterminate but likely significant and a cost to the state.

**Local Government Impact**

The Texas Council of Community Centers was unable to estimate costs to units of local government associated with implementing the provisions of the bill.

**Source Agencies:** 537 State Health Services, Department of

**LBB Staff:** UP, CL, MB, CH, NB, KKR