

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 83RD LEGISLATIVE REGULAR SESSION

May 13, 2013

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

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: **SB421** by Zaffirini (Relating to the Texas System of Care and the development of local mental health systems of care for certain children.), **Committee Report 2nd House, Substituted**

No significant fiscal implication to the State is anticipated.

The bill would amend Chapter 531 of the Government Code to require the Health and Human Services Commission (HHSC) to have responsibility for and oversight of the Texas System of Care Consortium, previously known as the Texas Integrated Funding Initiative. The bill would expand the scope of the consortium to develop local mental health systems of care to certain children receiving mental health hospitalization or who are at risk of being removed from the minor's home for purposes of receiving mental health services. The bill would expand membership of the consortium and direct HHSC and the consortium to maintain a comprehensive plan for the delivery of mental health services and supports to a minor and the minor's family, implement strategies to expand system of care practices throughout the state, identify funding sources for support, and develop an evaluation system to measure outcomes of the state and local systems of care efforts. The bill would require the consortium to submit a report to the legislature and Council on Children and Families each even-numbered year, including the evaluation of the outcomes of the Texas System of Care and recommendations for strengthening support for local systems of care. The bill would require HHSC and the Department of State Health Services (DSHS) to monitor the progress of communities that implement local systems of care and to provide technical assistance. The bill would repeal sections of the statute related to request for proposals for the local systems of care, grants to local systems of care communities, and certain evaluation requirements.

HHSC estimates there would be a minimal cost associated with implementing the provisions of the bill, but it is assumed that the cost could be absorbed within current resources. DSHS indicates any additional work resulting from the bill could be reasonably absorbed within current resources.

Local Government Impact

No significant fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission, 537 State Health Services,
Department of

LBB Staff: UP, CL, ES, VJC