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Final Fiscal Note

Drafting Number:LLS 23-0568Date:August 8, 2023Prime Sponsors:Rep. MartinezBill Status:Signed into Law

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Bill Topic:	VETERANS MENTAL HEA	LTH SESSION REIMBURSEMENT PROGRAM	
Summary of Fiscal Impact:	□ State Revenue⊠ State Expenditure□ State Transfer	□ TABOR Refund□ Local Government□ Statutory Public Entity	
	The bill creates a program in the Department of Military and Veterans Affairs to reimburse mental health care providers for up to 26 sessions with veterans who have exhausted their federal veterans administration mental health benefits. Starting in FY 2023-24, the bill increases state expenditures on an ongoing basis.		
Appropriation Summary:	For FY 2023-24, the bill requires and includes an appropriation of \$642,645 to the Department of Military and Veterans Affairs.		
Fiscal Note Status:	The fiscal note reflects the enacted bill.		

Table 1 State Fiscal Impacts Under HB 23-1088

		Budget Year FY 2023-24	Out Year FY 2024-25
Revenue		-	-
Expenditures	General Fund	\$642,645	\$660,143
	Centrally Appropriated	\$26,133	\$33,378
	Total Expenditures	\$668,778	\$693,521
	Total FTE	1.6 FTE	2.0 FTE
Transfers		-	-
Other Budget Impacts	General Fund Reserve	\$96,397	\$99,021

Summary of Legislation

The bill creates the Veterans Mental Health Services Program in the Department of Military and Veterans Affairs (DMVA), with assistance from the Behavioral Health Administration (BHA) in the Department of Human Services (DHS).

Department of Military and Veterans Affairs. The bill requires the DMVA to reimburse mental health care providers for up to 26 mental health sessions with veterans residing in veterans' community living centers (VCLC). Subject to available appropriations, the DMVA may reimburse more than 26 sessions if a provider determines additional sessions are necessary. Providers must be able to provide at least 4 sessions, either in person or through telehealth, to an eligible veteran to qualify for reimbursement. Veterans must attest to providers that they have exhausted their federal benefits upon seeking services. The DMVA must adopt rules for the program, determine a reimbursement rate, and deliver a report on the performance of the program to the General Assembly by December 31, 2024.

Behavioral Health Administration. The bill requires the BHA to publish a list of participating providers online.

Background and Assumptions

VHA mental health care. The United States Veterans Health Administration (VHA) provides mental health care services as long as they are clinically warranted. However, once a veteran is deemed to be in a stable condition, the VHA can limit the annual mental health sessions received by a veteran. It is assumed that the bill will provide coverage for veterans in such situations.

Eligible veterans. There are an estimated 500 veterans living at VCLCs across the state. It is unknown how many of these veterans experience a limit on their federal health benefits. This fiscal note assumes that 50 percent, or 250, of these veterans would qualify for services under the bill.

Assumed service level and costs. This fiscal note assumes that, on average, participating veterans will us about 15 sessions per year. Each session will cost \$143.

State Expenditures

The bill increases expenditures in the DMVA by about \$670,000 in FY 2023-24 and by about \$690,000 in FY 2024-25, paid from the General Fund, and minimally increases workload for the BHA. Expenditures are shown in Table 2 and detailed below. Costs may vary from this estimate depending on the actual number of eligible veterans and their use of available services under the program.

Table 2 Expenditures Under HB 23-1088

	FY 2023-24	FY 2024-25		
Department of Military and Veterans Affairs				
Personal Services	\$90,895	\$121,193		
Operating Expenses	\$2,160	\$2,700		
Capital Outlay Costs	\$13,340	-		
Mental Health Services	\$536,250	\$536,250		
Centrally Appropriated Costs ¹	\$26,133	\$33,378		
Total Cost	\$668,778	\$693,521		
Total FTE	1.6 FTE	2.0 FTE		

¹ Centrally appropriated costs are not included in the bill's appropriation.

DMVA. The DMVA will reimburse providers, develop program rules, set reimbursement rates, and provide required reports.

- **Personal services.** The DMVA requires 2.0 FTE for administrative and accounting staff to develop and monitor the program, create rules, set reimbursement rates, provide reimbursements, and provide required reports. Amounts include standard operating and capital outlay costs, and are prorated for FY 2023-24 for a September 1 start date, and the General Fund pay date shift.
- **Mental health services.** Based on assumptions stated above, the DMVA will reimburse participating providers about \$536,250 per year for the mental health sessions used by eligible veterans. Costs may vary from this estimate if a higher or lower number of eligible veterans access services, or if veterans use more or less than the assumed number of sessions per year.

BHA. The BHA will collaborate with providers to develop and publish an online list of participating providers. This minimally increases workload for the BHA, and no change in appropriations is required.

Centrally appropriated costs. Pursuant to a Joint Budget Committee policy, certain costs associated with this bill are addressed through the annual budget process and centrally appropriated in the Long Bill or supplemental appropriations bills, rather than in this bill. These costs, which include employee insurance and supplemental employee retirement payments, are shown in Table 2.

Other Budget Impacts

General Fund reserve. Under current law, an amount equal to 15 percent of General Fund appropriations must be set aside in the General Fund statutory reserve. Based on this fiscal note, the bill is expected to increase the amount of General Fund held in reserve by the amounts shown in Table 1, decreasing the amount of General Fund available for other purposes.

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Effective Date

This bill was signed into law by the Governor and took effect on May 16, 2023.

State Appropriations

For FY 2023-24, the bill requires and includes a General Fund appropriation of \$642,645 to the Department of Military and Veterans Affairs, and 1.6 FTE

State and Local Government Contacts

Behavioral Health Administration Health Care Policy and Financing Information Technology

Military Affairs

Counties

Human Services

Law

Regulatory Agencies