

# Legislative Council Staff Nonpartisan Services for Colorado's Legislature

### **Fiscal Note**

Drafting Number: Prime Sponsors:	LLS 24-0274 Rep. Amabile; English Sen. Fields		January 12, 2024 House Judiciary Clayton Mayfield   303-866-5851 clayton.mayfield@coleg.gov		
Bill Topic:	PERSONS DETAINED IN JAIL ON EMERGENCY COMMITMENT				
Summary of Fiscal Impact:	□ State Revenue ⊠ State Expenditure	□ State Transfer □ TABOR Refund	<ul><li>Local Government</li><li>Statutory Public Entity</li></ul>		
	The bill prohibits jails as an option for emergency commitments and requires reporting to the Behavioral Health Administration on emergency commitments. The bill increases state expenditures and local government workload on an ongoing basis starting in FY 2024-25.				
Appropriation Summary:	For FY 2024-25, the bill requires an appropriation of \$64,738 to the Behavioral Health Administration.				
Fiscal Note Status:	The fiscal note reflects the introduced bill, which was recommended by the Legislative Oversight Committee Concerning the Treatment of Persons with Behavioral Health Disorders in the Criminal and Juvenile Justice Systems.				

#### Table 1 State Fiscal Impacts Under HB 24-1079

		Budget Year FY 2024-25	Out Year FY 2025-26
Revenue		-	-
Expenditures	General Fund	\$64,738	\$44,123
	Centrally Appropriated	\$9,269	\$9,269
	Total Expenditures	\$74,007	\$53,392
	Total FTE	0.5 FTE	0.5 FTE
Transfers		-	-
Other Budget Impacts	General Fund Reserve	\$9,711	\$6,618

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#### **Summary of Legislation**

Starting July 1, 2024, the bill prohibits the use of jails for emergency commitments of persons under the influence of or incapacitated by substances. Local law enforcement agencies that take persons into protective custody pursuant to an emergency commitment must report certain data about these persons to the Behavioral Health Administration (BHA). Additionally, approved treatment facilities and emergency medical service providers that hold a person pursuant to an emergency commitment must also report certain data to the BHA, which must protect personal information and use the data to plan service levels.

#### **State Expenditures**

The bill increases state expenditures in the BHA by \$74,007 in FY 2024-25, and by \$53,392 in FY 2025-26 and future years, paid from the General Fund. Expenditures are detailed in Table 2 below.

		FY 2024-25	FY 2025-26
Behavioral Health Administration			
Personal Services		\$38,483	\$38,483
Operating Expenses		\$640	\$640
Capital Outlay Costs		\$6,670	-
Data Collection System		\$13,945	-
Data Storage Costs		\$5,000	\$5,000
Centrally Appropriated Costs <sup>1</sup>		\$9,269	\$9,269
	Total Cost	\$74,007	\$53,392
	Total FTE	0.5 FTE	0.5 FTE

## Table 2Expenditures Under HB 24-1079

**Staff.** The bill requires 0.5 FTE to collect and manage data received on emergency commitments from local law enforcement, approved treatment facilities, and emergency medical service providers. Staff costs include standard operating and capital outlay costs.

**Data collection system.** To collect data from local law enforcement, approved treatment facilities, and emergency medical service providers the BHA will build a data collection system at an estimated cost of \$13,945 in FY 2024-25.

**Data storage costs.** In addition, the BHA requires \$5,000 in ongoing funding starting in FY 2024-25 to store collected data.

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**Emergency commitment placements.** Under current law, emergency commitments are placed first at an approved treatment facility. If space is unavailable, then they may be placed at an emergency medical facility or jail. Since capacity at approved treatment facilities is limited and the bill is removing jails as a placement option, the bill will likely increase the number of emergency commitments placed at emergency medical facilities; however, since the current number of emergency commitments placed in jails is unknown, this fiscal note cannot estimate the impact to emergency medical facilities. It is assumed that the BHA will work with facilities to provide care for additional placements, which may include reimbursements to facilities, within existing resources. If additional resources are needed, the BHA will seek them through the annual budget process.

**Involuntary commitments.** Under current law, emergency commitment stays at treatment facilities are limited to five days unless a petition for involuntary commitment is filed. By increasing the number of individuals referred to treatment facilities, the bill may increase the number of involuntary commitments. To the extent the bill increases the number of involuntary commitments to the BHA, costs in the BHA will increase to assume custody of these individuals. Because it is unknown how many more involuntary commitment petitions there will be, the fiscal note assumes costs will be addressed through the annual budget process, if necessary, based on actual caseload amounts.

**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.

#### **Local Government**

The bill increases local law enforcement workload to provide the data on emergency commitments required by the bill and to ensure emergency commitments are placed appropriately. Additionally, county jail space will no longer be used to house emergency commitments, which will reduce costs and increase space for other types of jail placements. These impacts will vary by jurisdiction depending on the number of emergency commitments.

#### **Effective Date**

The bill takes effect July 1, 2025, except for Section 2 of the bill which takes effect July 1, 2024, assuming no referendum petition is filed.

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#### **State Appropriations**

For FY 2024-25, the bill requires a General Fund appropriation of \$64,738 to the Behavioral Health Administration, and 0.5 FTE.

#### **State and Local Government Contacts**

Behavioral Health Administration	Human Services	Public Safety	

The revenue and expenditure impacts in this fiscal note represent changes from current law under the bill for each fiscal year. For additional information about fiscal notes, please visit: <u>leg.colorado.gov/fiscalnotes</u>.