

COMMITTEE ON LEGISLATIVE RESEARCH
OVERSIGHT DIVISION

FISCAL NOTE

L.R. No.: 1225-10
Bill No.: Truly Agreed and Finally Passed CCS for SS for HCS No. 2 for HB 568
Subject: Children and Minors; Family Law; Family Services Division
Type: Original
Date: June 6, 2005

FISCAL SUMMARY

ESTIMATED NET EFFECT ON GENERAL REVENUE FUND			
FUND AFFECTED	FY 2006	FY 2007	FY 2008
Total Estimated Net Effect on General Revenue Fund	\$0	\$0	\$0

ESTIMATED NET EFFECT ON OTHER STATE FUNDS			
FUND AFFECTED	FY 2006	FY 2007	FY 2008
Total Estimated Net Effect on <u>Other</u> State Funds	\$0	\$0	\$0

Numbers within parentheses: () indicate costs or losses.
This fiscal note contains 7 pages.

ESTIMATED NET EFFECT ON FEDERAL FUNDS			
FUND AFFECTED	FY 2006	FY 2007	FY 2008
	\$0	\$0	\$0
Total Estimated Net Effect on <u>All</u> Federal Funds	\$0	\$0	\$0

ESTIMATED NET EFFECT ON LOCAL FUNDS			
FUND AFFECTED	FY 2006	FY 2007	FY 2008
Local Government	\$0	\$0	\$0

FISCAL ANALYSIS

ASSUMPTION

Officials from the **Office of State Courts Administrator**, the **Office of Attorney General**, and the **Department of Mental Health** assume this proposal would not fiscally impact their agency.

Officials from the **Department of Social Services - Children's Division** (CD) state section 210.110 states, "The screening battery may be performed by a licensed mental health professional familiar with the effects of abuse and neglect on young children, who will then serve as the liaison between all service providers in ensuring that needed services are provided. Such treatment services may include in-home services, out of home placement, intensive twenty-four hour treatment services, family counseling, parenting training and other best practices."

The CD interprets this language to mean that the licensed mental health professional may do the original assessment and may become a case manager for these services, and any services prescribed by the individual would be provided by the State. Some of these services would not be covered by Medicaid. The CD assumes that the costs would need to be paid by the CD. The CD currently provides some of these services not covered by Medicaid on a discretionary basis. The cost of the services deemed needed by the licensed mental health professional which are not covered by Medicaid, and are over and above the services already provided by the Division,

could easily exceed \$100,000.

ASSUMPTION (continued)

CD states since the language states the term "may", the assessment and services are not mandatory. However, if the CD were to implement the new provisions of Sections 210.110 and 210.112, the cost would be "unknown but greater than \$100,000." However, since the term "may" is used, the Division is showing a range of "\$0 to unknown but greater than \$100,000."

Officials from the **Department of Social Services - Division of Medical Services (DMS)** state since the proposal does not require the assessments for children, it does not have a fiscal impact on DMS. However, if the assessments are performed, there would be costs to DMS. DMS states the Children's Division (CD) estimates 8,409 children under the age of ten will be eligible for these services.

Section 210.110.2 - Missouri Medicaid currently covers a screening for children under the age of two at 1 month, 2-3 months, 4-5 months, 6-8 months, 9-11 months, 12-14 months, 15-17 months, and 18-23 months. A screening is also covered for each year from age 2 to 5, one screening from 6 to 7 years, and one screening from 8 to 9 years. DMS states the proposal allows for a screening within thirty days of the child's entry and every six months thereafter. The cost of the screening is \$60. This cost was applied to the screenings that may be performed which fall outside the current EPSDT schedule. If the additional screenings are done, the estimated cost is \$434,760.

Section 210.110.2(b) - A developmental, behavioral, and emotional screening in addition to EPSDT services is allowed for each child. If this screening is done, the estimated cost is \$126,135 (8,409 x \$15).

The screening battery may be performed by a licensed mental health professional who will serve as the liaison between service providers to ensure that needed services are provided. This individual would be reimbursed for case management services. The current average rate for case management is \$16 per fifteen-minute unit and the average number of units is 16 per month, which is equivalent to four hours. Based on this average, the estimated cost for case management services is \$25,832,448 if the service is performed by a licensed mental health professional.

The CD has estimated that 30% of the active children's screenings will indicate an area of concern and require a comprehensive assessment. If the comprehensive assessment is done, the estimated cost is \$45,450.

Oversight assumes since the language in section 210.110(2) is permissive, the fiscal impact is \$0.

ASSUMPTION (continued)

Officials from the **Department of Elementary and Secondary Education (DESE)** state Section 167.229 requires DESE to establish a "Model School Wellness Program." DESE states it would require three FTE and would contract for the services of an evaluator to do program evaluation. These staff would administer the program. Funding would need to be appropriated for the funds that go to the school districts and to DESE for the additional personnel.

The fiscal calculations assume funds will be available for 40-50 contracts to schools to participate in this program. The three FTE would provide technical assistance, consultation, and contract monitoring to the schools; develop the selection criterion and methods for distribution of grants to districts applying for the funds; manage the day-to-day financial and program issues, ensuring participants receive their funds in a timely manner; and provide clerical support to program staff.

A contract for an evaluator for the program would require a similar workload of a public health epidemiologist at .25 FTE ($\$57,060 \times \frac{1}{4} = \$14,625$ annually). DESE states it is unknown how much funding would be required for contracts. Assuming \$50,000 per contract, the cost could range \$2-2.5 million for program costs.

DESE does not assume the moneys appropriated shall be from the Child Nutrition and WIC Reauthorization federal grant money. These moneys cannot be used for this purpose; therefore, DESE assumes any impact will be to the state's General Revenue fund.

Oversight assumes since the Child Nutrition and WIC Reauthorization federal grant money cannot be used for this program and since the proposal requires moneys other than General Revenue to be used, the fiscal impact is \$0.

Officials from the **Department of Health and Senior Services (DOH)** state this proposal establishes a Model School Wellness Program in the Department of Elementary and Secondary Education. There will be no cost to the DOH, but the bill proposes using WIC Reauthorization federal grant money to cover the cost of this program. DOH states DOH is the agency granted WIC funding by the federal government.

<u>FISCAL IMPACT - State Government</u>	FY 2006 (10 Mo.)	FY 2007	FY 2008
	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
<u>FISCAL IMPACT - Local Government</u>	FY 2006 (10 Mo.)	FY 2007	FY 2008
	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>

FISCAL IMPACT - Small Business

No direct fiscal impact to small businesses would be expected as a result of this proposal.

DESCRIPTION

This proposal:

- (1) Clarifies the provision prohibiting a child under the care of the state or the jurisdiction of a juvenile court from being reunited with a parent or being placed back in the home with a parent who has been found guilty or plead guilty to specific crimes of sexual offenses or offenses against the family when a child was the victim;
- (2) Clarifies the provision allowing the Children's Division in the Department of Social Services to exercise discretion in awarding custody or visitation or the placing of a child back in the home of a parent, or any person residing in the home, who has been found guilty or plead guilty to any other offense;
- (3) Removes when a parent has had a full order of protection entered against them from the list of conditions preventing a child from being returned to a parent;
- (4) Clarifies the provision prohibiting a court from awarding custody or unsupervised visitation to a parent when that parent has been found guilty or plead guilty to specific crimes of sexual offenses or offenses against the family when a child was the victim;
- (5) Clarifies the provision prohibiting a court from granting visitation rights to the noncustodial

parent if that parent or any person residing with the parent has been found guilty or plead guilty to specific crimes of sexual offenses or offenses against the family when a child was the victim;

DESCRIPTION (continued)

(6) Clarifies the provision prohibiting a court from modifying an order granting or denying visitation rights if a parent or any person residing with the parent has been found guilty or plead guilty to specific crimes of sexual offenses or offenses against the family when a child was the victim; and

(7) Allows a court to appoint a guardian ad litem in any proceeding alleging child abuse or neglect.

(8) Establishes the Model School Wellness Program, administered by the Department of Elementary and Secondary Education, to create pilot programs in school districts encouraging students to avoid tobacco use, balance their diets, get regular exercise, and become familiar with chronic medical conditions resulting from being overweight. School districts receiving the grants will establish programs that address academic success and encourage links between school and home. The tobacco prevention initiative will focus on fourth and fifth grades, while the obesity prevention element will cover kindergarten through fifth grade. The bill requires hands-on professional development and an evaluation after the 2005-2006 school year that will include changes in body mass index and measurement of changing behaviors related to nutrition, physical activity, and tobacco use.

The provisions of this section will expire six years from the effective date.

(9) The Children's Division will recognize and treat the needs of at risk and abused or neglected children under the age of 10. Within 30 days of a child's entry into state custody and every six months thereafter as long as the child remains in custody, the division may conduct physical, developmental, and mental health screenings. Children whose screenings indicate an area of concern may conduct a comprehensive health, psycho-diagnostic, or developmental assessment within 60 days of entry into custody.

(10) Allows immunity from civil liability for a private contractor with the Children's Division providing services to children and their families when the child is not in their care. Immunity does not apply to a private contractor who knowingly violates a department policy.

This legislation is not federally mandated, would not duplicate any other program and would not

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require additional capital improvements or rental space.

SOURCES OF INFORMATION

Department of Elementary and Secondary Education

Department of Health and Senior Services

Office of State Courts Administrator

Department of Mental Health

Office of Attorney General

Department of Social Services

A handwritten signature in black ink that reads "Mickey Wilson". The signature is written in a cursive, slightly slanted style.

Mickey Wilson, CPA
Director

June 6, 2005