



SB 2267 - HB 2498

March 11, 2020

SUMMARY OF ORIGINAL BILL: Creates the *Recovery Program for Pregnant Women and Women with Newborns Act*. Requires the Department of Mental Health and Substance Abuse Services (DMHSAS) to establish a recovery program for pregnant women or women with newborns to assist them by providing substance use disorder treatment in residential care facilities and through home visitation services.

Requires the DMHSAS to actively seek and apply for any available federal or private funds to support the program. In addition to any other funding sources, public or private, the DMHSAS, in coordination with the Department of Human Services (DHS), shall use no less than \$50,000,000 annually in Temporary Assistance to Needy Families (TANF) funds, or any successor program providing temporary assistance, to support the program if such amount in funds is available to the state.

Directs the DMHSAS to submit an annual report by January 1 each year on the success of the program, as well as any recommendations for improving the program, to the Chairs of the Health and Welfare Committee of the Senate and the Health Committee of the House of Representatives.

FISCAL IMPACT OF ORIGINAL BILL:

Increase State Revenue – Exceeds \$50,000,000/FY20-21 and Subsequent Years/
Department of Mental Health and Substance Abuse Services

Increase State Expenditures - \$249,600/FY20-21 and Subsequent Years/
Department of Mental Health and Substance Abuse Services

Other Fiscal Impact – Passage of the proposed legislation will result in a recurring increase federal Temporary Assistance for Needy Families (TANF) expenditures for the Department of Human Services (DHS) by an amount exceeding \$50,000,000 beginning in FY20-21; however, these expenditures can be absorbed within the DHS's existing TANF block grant. It is unknown if additional funding from federal or private sources is available or the timing of such funds being received.

SUMMARY OF AMENDMENT (016835): Deletes all language after the enacting clause. Requires the Department of Mental Health and Substance Abuse Services, Department of Human Services, Department of Children's Services, Department of Health, and the Division of TennCare to actively seek and apply for federal, private, or other available funds, and actively direct available state funds, for the development of recovery programs for residents of this state

who are pregnant or are women with newborns to assist those residents by providing substance use disorder treatment in out-patient treatment facilities, in residential facilities, or through home visitation programs. Requires the departments to coordinate wrap-around services that would assist the residents and must annually report by February 15 of each year to the Speaker of the House of Representatives and the Speaker of the Senate on any funds an entity applied for, any recommendations for changes to statutes or rules to develop recovery programs, and any benefits realized from any recovery programs.

FISCAL IMPACT OF BILL WITH PROPOSED AMENDMENT:

Other Fiscal Impact – The extent of federal, private, or other funds available to the state is unknown. The availability of any state funds for such program is unknown; however, any funding received or directed will be expended to develop the proposed recovery programs. The timing of any available funds and subsequent expenditures for the programs is unknown.

Assumptions for the bill as amended:

- The departments will not incur a significant increase in expenditures to seek and apply for federal, private, or other available funding to develop recovery programs for pregnant women and women with newborns.
- For the purpose of this analysis, it is assumed at least one of the departments will receive a grant.
- The number of pregnant women and women with newborns who would participate in any recovery programs are unknown.
- Based on research of states who have been awarded similar grants for the purpose of developing treatment programs for pregnant women and women with newborns, it is estimated a one-time grant of at least \$1,100,000 would be required.
- Should any state funds come available, the departments are encouraged to direct such funds to develop recovery programs for pregnant women and women with newborns.

CERTIFICATION:

The information contained herein is true and correct to the best of my knowledge.



Krista Lee Carsner, Executive Director

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