

### Fiscal Estimate - 2019 Session

Original     
  Updated     
  Corrected     
  Supplemental

LRB Number <b>19-4567/2</b>	Introduction Number <b>SB-788</b>
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**Description**  
 opioid and methamphetamine data system and making an appropriation

**Fiscal Effect**

**State:**

<input type="checkbox"/> No State Fiscal Effect	<input type="checkbox"/> Increase Existing Revenues	<input checked="" type="checkbox"/> Increase Costs - May be possible to absorb within agency's budget <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Decrease Costs
<input type="checkbox"/> Indeterminate	<input type="checkbox"/> Decrease Existing Revenues	
<input type="checkbox"/> Increase Existing Appropriations	<input type="checkbox"/> Decrease Existing Appropriations	
<input type="checkbox"/> Decrease Existing Appropriations	<input type="checkbox"/> Create New Appropriations	

**Local:**

<input type="checkbox"/> No Local Government Costs	5. Types of Local Government Units Affected	
<input type="checkbox"/> Indeterminate	<input type="checkbox"/> Towns <input type="checkbox"/> Village <input type="checkbox"/> Cities <input type="checkbox"/> Counties <input type="checkbox"/> Others <input type="checkbox"/> 0 <input type="checkbox"/> School Districts <input type="checkbox"/> WTCS Districts	
1. <input type="checkbox"/> Increase Costs	3. <input type="checkbox"/> Increase Revenue	
<input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory	<input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory	
2. <input type="checkbox"/> Decrease Costs	4. <input type="checkbox"/> Decrease Revenue	
<input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory	<input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory	

<b>Fund Sources Affected</b>	<b>Affected Ch. 20 Appropriations</b>
<input type="checkbox"/> GPR <input type="checkbox"/> FED <input type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEGS	

<b>Agency/Prepared By</b> DOC/ Michael Slana (608) 240-5414	<b>Authorized Signature</b> Paulina De Haan (608) 240-5056	<b>Date</b> 3/17/2020
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## Fiscal Estimate Narratives

DOC 3/17/2020

LRB Number	19-4567/2	Introduction Number	SB-788	Estimate Type	Original
<b>Description</b> opioid and methamphetamine data system and making an appropriation					

### Assumptions Used in Arriving at Fiscal Estimate

This bill requires the Department of Administration (DOA) to issue a request for proposals, subject to approval by the Joint Committee on Finance (JCF) under its passive review process, to establish and maintain an opioid and methamphetamine data system to collect, format, analyze, and disseminate information on opioid and methamphetamine use as specified in the bill.

This bill requires DOA to collaborate with and collect data from various state agencies, including the Department of Corrections (DOC), for the opioid and methamphetamine data system. The bill requires that the opioid and methamphetamine data system allow those state agencies that submit data to the system access to the system's data as appropriate for the agencies to fulfill their function and as allowed by state and federal confidentiality laws.

The bill specifies various categories of data that the opioid and methamphetamine data system must include. The following category is particularly relevant to DOC:

"The number of persons who are incarcerated and who are receiving naltrexone for extended-release in injectable suspension, the number of persons who are on extended supervision or probation or on parole and who are receiving extended-release naltrexone, the total number of doses of extended-release naltrexone administered to persons who are incarcerated, on extended supervision or probation, or on parole in this state, and the length of time that persons who are incarcerated, on extended supervision or probation, or on parole are receiving extended-release naltrexone."

DOC currently tracks those required data elements for DOC-funded naltrexone treatments for inmates and offenders, and this data could be transmitted in some form to the proposed opioid and methamphetamine data system. DOC does not currently track non-DOC-funded naltrexone treatment for offenders and would likely be unable to do so, given strict federal privacy laws regarding substance use disorder (SUD) treatments.

DOC is unable to precisely estimate how much additional staff and resources would be needed to enter the required data into the proposed opioid and methamphetamine data system because DOC does not know (a) how this new system will operate, (b) whether DOC could automatically transfer data to it, and (c) how often DOC will need to provide updated data.

That said, assuming that DOC can report the necessary data out of its existing systems with a minimal amount of configuration, and assuming DOC is able to use a nightly backup job to send this data to the proposed opioid and methamphetamine data system, DOC estimates that roughly 2,000 hours of staff time would be required to implement a data transfer system. To avoid adversely impacting other departmental projects, DOC would need an additional contractor to help with the buildout of this data transfer system. Assuming an hourly rate of \$68, that contractor would cost \$136,000 for the estimated 2,000 hours of staff time needed for implementation. After implementation, DOC estimates that ongoing support for this data transfer system would amount to approximately 120 hours of staff time annually. DOC anticipates it would be able to absorb that ongoing support work without significant impacts on other projects.

### Long-Range Fiscal Implications