

Fiscal Note

BILL # SB 1250

TITLE: overdose; disease prevention; programs

SPONSOR: Barto

STATUS: Senate Engrossed

PREPARED BY: Lauren Jorgensen

Description

The bill would allow a variety of entities -- including cities, towns, counties, and nongovernmental organizations -- to implement a syringe service program (SSP), otherwise known as a needle exchange program. The state would not be permitted to operate such a program.

Estimated Impact

The bill will not have a General Fund impact since the state is not an authorized to implement an SSP. The local cost will depend on how many entities opt to participate. Researchers from the Centers for Disease Control and Prevention (CDC) estimated that a comprehensive syringe service program's annual costs could range from \$400,000 for a small, rural program to \$1.9 million for a large, urban program.

Analysis

Syringe service programs (SSPs) are disease prevention programs that address substance use disorder treatment, access to sterile injection equipment, and proper disposal for injection equipment. The bill would require the programs to offer needle disposal and exchange, educational materials, opioid antagonist options, and personal consultations about mental health and substance use disorder treatment upon request.

The bill does not require any of the specified entities to implement a program. In 2019, researchers from the CDC published a study analyzing SSPs in Maine, California, Kentucky, and Georgia. The study estimated the cost range of a comprehensive syringe service program to be \$400,000-\$1.9 million depending on the size of a local program (i.e., number of clients served) and its geographic location (i.e., rural, suburban, or urban). The annual cost per client was cited as \$700 in a large program in a rural area to \$2,000 in a small program in an urban area. The study also notes that costs depends on the types of services provided.

The CDC views syringe service programs as a cost-effective measure to prevent disease transmission and reduce drug use and overdoses. Therefore, syringe service programs may generate cost-savings over-time, but we cannot estimate such savings given the uncertainty of how many programs and what types of programs might be offered.

Local Government Impact

Cities, towns, or counties who choose to implement a prevention program would incur costs as outlined above.

3/18/21

JLBC