# **OFFICE OF FISCAL ANALYSIS**

Legislative Office Building, Room 5200 Hartford, CT 06106  $\diamond$  (860) 240-0200 http://www.cga.ct.gov/ofa

## sSB-1285 AN ACT ESTABLISHING AN OVERDOSE PREVENTION CENTER PILOT PROGRAM.

## **OFA Fiscal Note**

#### State Impact:

Agency Affected	Fund-Effect	FY 26 \$	FY 27 \$
Mental Health & Addiction	Other Funds -	See Below	See Below
Serv., Dept.	Potential Cost		
Note: ZES6=Other Fund			

### Municipal Impact: None

## Explanation

The bill may result in a cost to the Department of Mental Health and Addiction Services (DMHAS) associated with an overdose prevention center pilot program. The bill allows, but does not require, DMHAS to establish the pilot in four municipalities and prohibits the use of state funds to implement or operate the pilot program.

DMHAS will incur staffing and contract costs to the extent the agency establishes the pilot and has non-state funds necessary to operate the overdose prevention centers. At a minimum, DMHAS would experience costs of approximately \$265,500 annually (with associated fringe of approximately \$108,100) to support agency staff to oversee the pilot, with additional contract costs to operate each of the four centers.

While the operational costs depend on the scope of the pilot in each location, program staff (ranging in cost from \$50,000 to \$140,000 annually depending on the position) are anticipated to include outreach and prevention specialists, harm reduction case managers, program managers and site directors. Additional professional medical staff may

be required in each location or shared across the pilot, depending on the provider(s) utilized to operate the program. Other costs may include facility modifications, drug testing and medical supplies, computer software and hardware, and training. For context, overdose prevention centers provide a community-based facility where individuals with substance use disorder can receive counseling, educational, and referral services, access basic support services, and may test and safely consume controlled substances under the observation of licensed health care providers.

#### The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to the establishment of the pilot and funds necessary to do so.