

SENATE APPROPRIATIONS COMMITTEE FISCAL NOTE

BILL NO. Senate Bill 1181

PRINTER NO. 1863

AMOUNT

See Fiscal Impact

FUND

General Fund

DATE INTRODUCED

May 30, 2018

PRIME SPONSOR

Senator Reschenthaler

DESCRIPTION

Senate Bill 1181 establishes a new Section 1425 (Early Intervention Depression Screening) in the Public School Code to require school age children to receive a depression screening beginning in 6th grade and thereafter in accordance with the current schedule for mandated medical examinations contained in Section 1402 (Health Services).

The legislation requires each child’s medical examination to include written confirmation from the physician or other qualified health care professional that the depression screening was completed.

The legislation requires each school entity to provide a notice of the depression screening to the parents and guardians of the child. The notice is to be developed by the Department of Health and is required to:

- Explain that the physician or other qualified health care professional is required to conduct a depression screening and provide written confirmation to the school entity that the screening was conducted;
- State that the parent or guardian may opt out of the required screening;
- Specify that the decision to act on the screening results rests entirely with the parent or guardian;
- State that the school entity will not receive the results of the screening unless the parent or guardian chooses to share the results of the screening with the school entity; and
- State that if a parent or guardian chooses to share the results of the screening with the school entity and the screening indicates the presence of depression, the school entity shall refer the child to the school’s student assistance program, to the school psychologist for evaluation, or for evaluation under the federal Individuals with Disabilities Education Act.

The legislation defines a school entity as a school district, charter school, cyber charter school, regional charter school, area vocational-technical school, intermediate unit, or nonpublic school.

The legislation requires the parent or guardian to be notified at the point of referral for services and provides that an evaluation may not be performed unless the parent or guardian consents.

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The legislation requires the Department of Health, in conjunction with the Department of Education, to make materials available in print and on the internet that explain the importance of the early diagnosis of mental health, common challenges of students with undiagnosed or untreated depression, federal and state privacy protections and parental rights related to a children of school age. It requires the Department of Health to amend the standard private or school physical examination of school age student form to accommodate depression screening. It also requires the Department of Health to promulgate regulations to implement the provisions contained in the act, including a determination of who can be deemed a qualified health care professional and privacy procedures that apply when a screening is conducted by a school entity contracted health care provider.

The legislation prohibits the inclusion of depression screening results or information indicating whether a screening was conducted in a child's academic record.

The legislation requires each school entity to adopt or revise procedures concerning its response if provided with a depression screening indicating that a child has thoughts or engages in behaviors associated with a diagnosis of depression.

The legislation is scheduled to take effect in 60 days.

FISCAL IMPACT:

The enactment of Senate Bill 1181 will have no adverse fiscal impact on Commonwealth funds. The administrative duties delegated to the Department of Health and the Department of Education under the legislation are routine functions of the agencies that can be accomplished within their existing operating budgets.

At present, current law (Section 1402) requires a school physical to be conducted upon original entry into school, while in sixth grade, while in eleventh grade and prior to the issuance of a farm or domestic services permit. The law allows for a school physical to be performed by the child's physician or a physician hired by the school entity. Based on information provided by the Department of Health, approximately 280,000 students annually will be required to obtain physical examinations that include a depression screening, and approximately 72,800, or 26%, of the physicals will be conducted by school entities' physicians. The cost to conduct a depression screening along with the physical exam should be de minimis as the depression screenings envisioned by the legislation are brief predictive question and answer surveys that can be completed and scored in a short period of time as part of a routine physical examination.

Additionally, school entities will likely incur costs related to reviewing depression screenings, evaluating students whose screenings indicate a presence of depression, and providing additional psychological services. Based on the school entities' most recent annual financial reports, \$152 million is spent annually on psychological services. In addition, information from the American Academy of Child and Adolescent Psychiatry and the National Institute of Mental Health indicates that between 5% and 12.8% percent of children and adolescents experience depression.

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Assuming a similar increase in the percentage of psychological services provided by school entities, the legislation is estimated to cost between \$7,600,000 and \$19,456,000 annually.