

LEGISLATIVE FISCAL ESTIMATE

[First Reprint]

ASSEMBLY, No. 3005

STATE OF NEW JERSEY
219th LEGISLATURE

DATED: NOVEMBER 30, 2021

SUMMARY

Synopsis:	“Mental Health Early Action on Campus Act”; requires institutions of higher education to implement mental health programs and services.
Type of Impact:	Annual expenditure increases to public institutions of higher education and the State.
Agencies Affected:	The Office of the Secretary of Higher Education; public institutions of higher education.

Office of Legislative Services Estimate

Annual Fiscal Impact	
Cost Increases to Public Institutions of Higher Education	Indeterminate
State Cost Increases	Indeterminate

- The Office of Legislative Services (OLS) determines that this bill will result in indeterminate annual expenditure increases to public institutions of higher education to implement mental health awareness programs; establish student peer support programs; form strategic partnerships with local mental health service providers; and conduct certain program evaluations.
- Costs incurred by the institutions will vary depending on the extent to which each institution implements the discretionary provisions of the bill. In addition, some institutions may already meet the standards established under the bill while others may need to invest additional resources.
- The bill will result in an annual, indeterminate expenditure increase to the Office of the Secretary of Higher Education (OSHE), which will be required to develop a Technical Assistance Center to support the efforts of the public institutions of higher education.

BILL DESCRIPTION

This bill requires institutions of higher education to implement certain mental health programs and services.

The bill requires an institution of higher education to implement a mental health awareness program which must include, at a minimum: the development and implementation of an annual student orientation session for new students designed to raise awareness about mental health conditions; the assessment of courses and seminars and the implementation of mental health curricula if opportunities for integration exist; the creation and prominent display of information dedicated specifically to the mental health resources available to students on campus and in the surrounding community; the distribution of messages related to mental health resources that encourage help-seeking behavior through the online learning platform, the student portal of the institution's social media, e-mail, or other means at the discretion of the institution. As part of the mental health awareness program, an institution would provide on its website links to online screening tools validated by mental health professionals or organizations, beginning in the first full academic year three years following the effective date of the bill.

The bill requires the president of an institution of higher education to establish a panel with expertise in college mental health to develop and implement policies and procedures related to mental health awareness and training. It requires all student advisors, resident assistants in student housing facilities, and campus security personnel to participate in a national Mental Health First Aid training course or a similar program prior to the commencement of their duties.

The bill permits an institution of higher education to establish and implement at its discretion a student peer support or peer educator program that will utilize certain best practices for peer support.

The bill also permits each institution to form at its discretion strategic partnerships with local mental health service providers to improve overall campus mental health wellness and augment on-campus capacity. The partnerships may include linkage agreements with off-campus mental health service providers that establish a foundation for referrals for students when a student's mental health needs cannot be met on campus due to capacity concerns or preference of the student. Through a combination of on-campus capacity, off-campus linkage agreements with mental health service providers, and contracted telehealth therapy services, each institution would be required to attempt to reach a clinician-to-student benchmark ratio in line with best practices recommended by national organizations that conduct research in college mental health.

The Secretary of Higher Education will develop a Technical Assistance Center. The center's responsibilities will include: developing standardized policies for medical leave related to mental health conditions for students; providing tailored support to the institutions in reviewing policies related to students living with mental health conditions and their academic standing; establishing initial standards for policies and procedures of expert panels established by governing boards under the bill; disseminating best practices concerning peer support programs; and developing Statewide standards and best practices for partnerships between local mental health agencies and institutions of higher education.

FISCAL ANALYSIS

EXECUTIVE BRANCH

None received.

OFFICE OF LEGISLATIVE SERVICES

The OLS determines that this bill will result in indeterminate annual expenditure increases to public institutions of higher education to implement mental health awareness programs; establish student peer support programs; form strategic partnerships with local mental health service providers; and conduct certain program evaluations. Costs incurred by the institutions will vary depending on the extent to which each institution implements the discretionary provisions of the bill. In addition, some institutions may already meet the standards established under the bill while others may need to invest additional resources. Certain institutions may experience substantial increases in salary costs to meet the bill's provision that requires each institution to attempt to reach a certain clinician-to-student benchmark ratio, as established by best practices. The OLS does not have access to a source of information that details the inventory of mental health services and programs offered by each public institution of higher education in the State or the number of clinicians employed by each institution.

The OLS notes that Illinois passed similar legislation in August 2019 to address gaps in mental health services on college campuses. While the proposed bill and that in effect in Illinois differ in certain respects, the comparison is meant to illustrate the potential costs of the bill to the State. The Illinois Commission on Government Forecasting and Accountability (CGFA), in making recommendations to the Illinois General Assembly on the amount of funds needed to implement the law, distributed a survey to Illinois public universities and community colleges requesting information on how well each institution's current mental health programs meet the requirements of the law and how much additional funding would be necessary to fully implement the law. The survey results indicated that, in the aggregate, Illinois' 13 public universities are estimated to incur costs between \$5.6 million and \$5.8 million annually over three years to implement the law. Meanwhile, Illinois' 45 community colleges had an estimated aggregate cost of implementation of between \$11.8 million and \$12.7 million per year. For the purposes of comparing student populations in Illinois and New Jersey, the OLS notes that, according to the federal Integrated Postsecondary Education Data System, enrollment in public institutions of higher education in New Jersey is roughly two-thirds that of Illinois.

The findings of the survey conducted by the Illinois CGFA indicate that the highest-cost provision of the law was meeting a benchmark ratio of one clinical, non-student staff member to every 1,250 students. While four of the 13 universities and eight of the community colleges responded that they had mostly or fully implemented this goal, the survey responses indicated that the universities in total would incur additional costs of between \$2.5 million and \$2.8 million annually over three years and the community colleges would incur between \$7.7 million and \$8.2 million annually over three years to meet this particular mandate (although the latter range is on the low side due to the data not taking into account the five community colleges that did not respond to the survey). The proposed bill does not specify a certain benchmark ratio that must be attained and instead requires institutions to attempt to reach a clinician-to-student benchmark ratio in line with best practices. The International Accreditation of Counseling Services organization recommends that institutions maintain a staffing ratio in the range of one to every 1,000 to 1,500 students.

The survey conducted by the Illinois CGFA further indicated that the establishment of a Technical Assistance Center would annually cost between \$317,000 (if a "minimalist" Technical Assistance Center is established) and \$1.3 million (if a "robust" Technical Assistance Center is established). The OLS notes that, if the OSHE determines to staff the Technical Assistance Center in a manner consistent with the way it currently staffs other programs housed in the Academic and Student Programs portion of the office, the State may expect to annually incur total personnel costs

ranging between \$300,000 and \$450,000. The OSHE may experience additional costs to the extent it would need office space, supplies, and other materials for the Technical Assistance Center.

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This legislative fiscal estimate has been produced by the Office of Legislative Services due to the failure of the Executive Branch to respond to our request for a fiscal note.

This fiscal estimate has been prepared pursuant to P.L.1980, c.67 (C.52:13B-6 et seq.).