

LEGISLATIVE BUDGET BOARD

Austin, Texas

FISCAL NOTE, 78TH LEGISLATIVE REGULAR SESSION

March 24, 2003

TO: Honorable Jaime Capelo, Chair, House Committee on Public Health

FROM: John Keel, Director, Legislative Budget Board

IN RE: HB965 by Mercer (Relating to requiring the Texas Department of Health in consultation with the Texas Education Agency to study the cost and feasibility of installing automated external defibrillators in public high school buildings.), **As Introduced**

Estimated Two-year Net Impact to General Revenue Related Funds for HB965, As Introduced: a negative impact of (\$3,200) through the biennium ending August 31, 2005.

The bill would make no appropriation but could provide the legal basis for an appropriation of funds to implement the provisions of the bill.

General Revenue-Related Funds, Five-Year Impact:

Fiscal Year	Probable Net Positive/(Negative) Impact to General Revenue Related Funds
2004	(\$3,200)
2005	\$0
2006	\$0
2007	\$0
2008	\$0

All Funds, Five-Year Impact:

Fiscal Year	Probable Savings/(Cost) from GENERAL REVENUE FUND 1
2004	(\$3,200)
2005	\$0
2006	\$0
2007	\$0
2008	\$0

Fiscal Analysis

This bill would direct the Texas Department of Health (TDH), in consultation with the Texas Education Agency (TEA), to conduct a study concerning the cost and feasibility of placing automated external defibrillation (AED) machines in public high school buildings. Components of the study include; improvement of survival rate, placement, cost, integration of AEDs with existing services, and training of school personnel. The bill would require the results of the study to be presented to the governor and legislative leadership by November 1, 2004.

TEA indicates that the consultation required under this bill could be accommodated within the agency's existing interagency coordination efforts, there would be no significant effect on the operations of the agency.

Methodology

The Texas Department of Health estimates that the bill would require 160 FTE hours to complete this study. Based on an estimated cost of \$20 per FTE hour, it is assumed the bill would cost \$3,200 in General Revenue in fiscal year 2004. The department indicates the cost could be absorbed within current resources.

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 501 Department of Health, 701 Central Education Agency

LBB Staff: JK, EB, UP, PQ