

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 78TH LEGISLATIVE REGULAR SESSION

April 8, 2003

TO: Honorable Dianne White Delisi, Chair, House Committee on State Health Care Expenditures, Select

FROM: John Keel, Director, Legislative Budget Board

IN RE: HB1868 by Coleman (Relating to the provision of medical assistance to certain legal immigrants.), **As Introduced**

Estimated Two-year Net Impact to General Revenue Related Funds for HB1868, As Introduced: a negative impact of (\$4,377,888) 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	\$878,976
2005	(\$5,256,864)
2006	(\$11,391,264)
2007	(\$17,528,544)
2008	(\$22,097,664)

All Funds, Five-Year Impact:

Fiscal Year	Probable (Cost) from <i>GR MATCH FOR MEDICAID</i> 758	Probable (Cost) from <i>FEDERAL FUNDS</i> 555	Probable Savings from <i>TOBACCO SETTLMNT RECEIPTS</i> 5040
2004	(\$3,323,520)	(\$4,985,280)	\$4,202,496
2005	(\$9,459,360)	(\$14,189,040)	\$4,202,496
2006	(\$15,593,760)	(\$23,390,640)	\$4,202,496
2007	(\$21,731,040)	(\$32,596,560)	\$4,202,496
2008	(\$26,300,160)	(\$39,450,240)	\$4,202,496

Fiscal Analysis

The bill would direct the Health and Human Services Commission (HHSC) to provide Medicaid to qualified aliens who have resided in the United States for a period of five years after the date the person entered as a qualified alien (on or after August 22, 1996). It is estimated this provision would result in a net increase in expenditures. An increase in Medicaid expenditures would be partially offset by a reduced spending in the Immigrants health insurance program.

The bill would direct HHSC to provide pregnancy related Medicaid to lawfully present immigrants regardless of the date on which the person entered the United States. The impact of this provision has not been determined at this time.

Methodology

It is estimated that Medicaid average monthly caseloads would increase by the following: 2,308 in fiscal year 2004, 6,569 fiscal year 2005, 10,829 for fiscal year 2006, 15,091 for fiscal year 2007, and \$18,264 for fiscal year 2008. The estimated average monthly cost per client is \$300. General Revenue would finance approximately 40 percent of the cost.

It is estimated that Immigrants Health Program average monthly caseloads would decrease by 3,072 for each fiscal year. The estimated savings per month per client is \$114. All savings would accrue to General Revenue (Tobacco Settlement Receipts).

Local Government Impact

No significant fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission

LBB Staff: JK, EB, PP