LEGISLATIVE BUDGET BOARD Austin, Texas

FISCAL NOTE, 78TH LEGISLATIVE REGULAR SESSION

April 30, 2003

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

FROM: John Keel, Director, Legislative Budget Board

IN RE: HB1930 by Capelo (Relating to certain fees and administrative penalties applicable to emergency medical service providers.), Committee Report 1st House, Substituted

Estimated Two-year Net Impact to General Revenue Related Funds for HB1930, Committee Report 1st House, Substituted: a positive impact of \$30,400 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	\$15,200	
2005	\$15,200	
2006	\$15,200	
2007	\$15,200	
2008	\$15,200	

All Funds, Five-Year Impact:

Fiscal Year	Probable Revenue Gain from GENERAL REVENUE FUND 1	Probable (Cost) from GENERAL REVENUE FUND 1
2004	\$238,878	(\$223,678)
2005	\$238,878	(\$223,678)
2006	\$238,878	(\$223,678)
2007	\$238,878	(\$223,678)
2008	\$238,878	(\$223,678)

Fiscal Analysis

The bill would amend Chapter 773 of the Health and Safety Code to establish new maximum limits on all emergency medical services (EMS) regulatory and trauma facility designation fees. The bill would also increase the maximum administrative penalty amount that can be charged to a provider from \$1,000 to \$7,500 per violation.

Methodology

It is assumed that increased fees for emergency medical services (EMS) regulatory and trauma facility designation would generate \$223,678 per year over current collections. It is assumed that these funds would be used by the Department of Health (TDH) to cover the cost of administering the program.

With the increased cap on administrative penalties, it is assumed that an additional \$15,200 would be received each year. According to TDH, administrative penalty fees are not appropriated to the agency and may not be used to offset costs of administering the program.

There would be no additional cost to the agency to collect and process these fees, as existing staff would continue to perform this function.

Local Government Impact

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

Costs to emergency medical services (EMS) providers to implement the provisions of the bill could possibly increase if it is necessary for the Department of Health to modify the schedule for those fees for which Section 773.059, Health and Safety Code, does not prescribe the method for determining the amount.

Implementing Section 9 of the bill would result in no significant fiscal impact to EMS providers unless the provider is penalized under Section 773.065, Heath and Safety Code.

Source Agencies: 501 Department of Health **LBB Staff:** JK, EB, KF, LW, KG