

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 78TH LEGISLATIVE REGULAR SESSION

April 15, 2003

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

FROM: John Keel, Director, Legislative Budget Board

IN RE: HB2539 by Uresti (Relating to the requirements for transporting patients in certain vehicles.),
As Introduced

Estimated Two-year Net Impact to General Revenue Related Funds for HB2539, As Introduced: a negative impact of (\$981,379) 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	(\$502,505)
2005	(\$478,874)
2006	(\$478,874)
2007	(\$478,874)
2008	(\$478,874)

All Funds, Five-Year Impact:

Fiscal Year	Probable (Cost) from <i>GENERAL REVENUE FUND</i> 1	Change in Number of State Employees from FY 2003
2004	(\$502,505)	10.0
2005	(\$478,874)	10.0
2006	(\$478,874)	10.0
2007	(\$478,874)	10.0
2008	(\$478,874)	10.0

Fiscal Analysis

The bill would amend the Health and Safety Code to allow the Texas Department of Health (TDH), to inspect and license all non-emergency vehicles used to regularly transport patients between health care facilities and between health care facilities and residences, if a licensed health care provider is not in attendance. The bill would require the department to develop and implement rules associated with the review, verification, approval, and licensure of such vehicles. The bill would require the department to insure compliance and enforcement, monitor complaints, conduct inspections and maintain a data base for each transportation provider. The bill would take effect September 1, 2003.

The cost of administration regulation and monitoring functions results in a net impact to General Revenue of (\$981,379) through the biennium ending August 31, 2005.

Methodology

For the purposes of this analysis, the Texas Department of Health (TDH) assumed that agency costs associated with establishing rules, evaluating compliance, compliance enforcement, processing complaints, and data management would require additional General Revenue. TDH made the following assumptions:

- 1) New rules would have to be established and implemented by TDH for approximately 230 providers and 1,400 vehicles.
- 2) TDH would have to verify certification and training the non-emergency transport vehicles.
- 3) TDH would have to conduct random inspections of the non-emergency transport vehicles for minimum patient care and safety supplies.
- 4) Licensure documentation and verification will have to be conducted and monitored on an ongoing basis.
- 5) Complaints would require investigation, compliance verification, enforcement, due process appeals, and administrative hearings.

Due to the nature of the governing statute, the bill would not authorize TDH to collect fees for this activity. Therefore, TDH estimated that a non-emergency medical transport vehicle licensing and inspection program for 230 providers of 1,400 non-emergency medical transport vehicles would result in the addition of 2 Full Time Equivalents (FTE) at the TDH central office location and 8 FTEs in established TDH regional locations throughout the state, a total cost of \$239,958 in fiscal year 2004 and \$319,944 in fiscal year 2005. Additional in-state travel, computers, rent, utilities and associated administrative expenses are also assumed.

Technology

The bill would require the Texas Department of Health (TDH) to purchase laptops for field personnel and establish an ongoing data monitoring system for non-emergency medical transport vehicles at a cost of: \$60,000 (in house programming), \$24,000 (computers), and \$5,000 (software).

Total for Technology is \$89,000 in fiscal year 2004.

Local Government Impact

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

Source Agencies: 501 Department of Health

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