LEGISLATIVE BUDGET BOARD Austin, Texas

FISCAL NOTE, 79TH LEGISLATIVE REGULAR SESSION

May 3, 2005

TO: Honorable Dianne White Delisi, Chair, House Committee on Public Health

FROM: John S. O'Brien, Deputy Director, Legislative Budget Board

IN RE: HB677 by Thompson (Relating to emergency services for sexual assault survivors.), Committee Report 1st House, Substituted

Estimated Two-year Net Impact to General Revenue Related Funds for HB677, Committee Report 1st House, Substituted: an impact of \$0 through the biennium ending August 31, 2007.

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	
2006	\$0	
2007	\$0	
2008	\$0	
2009	\$0	
2010	\$0	

All Funds, Five-Year Impact:

Fiscal Year	Probable (Cost) from HOSPITAL LICENSING ACCT 129	Probable Revenue Gain from HOSPITAL LICENSING ACCT 129	Change in Number of State Employees from FY 2005
2006	(\$53,511)	\$53,511	0.8
2007	(\$62,927)	\$62,927	0.8
2008	(\$62,927)	\$62,927	0.8
2009	(\$62,927)	\$62,927	0.8
2010	(\$62,927)	\$62,927	0.8

Fiscal Analysis

The bill relates to emergency services for sexual assault survivors. The bill would add a chapter to the Health and Safety Code. Under Sec.322.002 of the bill, the Department of State Health Services (DSHS) would be required to approve or reject a plan, not later than the 120th day after the plan is submitted by a health care facility, regarding minimum standards for emergency services provided to sexual assault survivors. Sec. 322.003 would require the agency to return a plan that is not approved to the health care facility and to identify the specific provisions for which the plan is not in compliance. Under Sec.322.006 of the bill, DSHS may conduct an inspection of a health care facility to ensure compliance with the provisions of the bill. If enacted, the bill would take effect September 1, 2005.

Methodology

It is assumed that approximately .75 full-time equivalent position would be needed to implement the provision in Sections 322.002, 322.003 and 322.006 of the bill. It is also assumed that the costs associated with the FTE in FY 2006 would be 75% of the total amount for this purpose allowing for three months to fill the position. The estimated cost of implementing the provisions of the bill would total \$53,511 in FY 2006 and would support .75 full-time-equivalent position (Nurse IV position) for nine months. The estimated cost includes \$32,840 for salary and fringe benefits, \$11,250 for in-state-travel, \$2,273 for rent and utilities. Other operating expenses would total \$5,828 including \$5,632 for office furnishings and telephone and \$196 for office supplies and postage. The estimated cost for IT equipment totals \$1,320 for a leased notebook computer and printer in FY 2006.

In FY 2007-2010, the estimated cost of implementing the provisions of the bill would total \$62,927 each year. The estimate cost includes \$43,787 for salary and benefits, \$15,000 for in-state travel, \$3,031 for rent and utilities and \$291 for other operating expenses. The estimated cost for IT equipment totals \$818 for a leased notebook computer. It is assumed that DSHS would increase fees (hospital licensing) to cover the FTE-related costs of implementing the provisions mentioned above in FY 2006-2010. Further, it is assumed that these incremental General Revenue Dedicated funds would be appropriated to the agency to implement the provisions of the bill.

It is assumed that the agency would implement the other provisions of the bill within existing resources, including existing staff.

Technology

The estimated costs for IT equipment totals \$1,320 in FY 2006 and \$818 in subsequent years.

Local Government Impact

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

Source Agencies: 537 Department of State Health Services

LBB Staff: JOB, CL, PP, RM