

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 79TH LEGISLATIVE REGULAR SESSION

May 29, 2005

TO: Honorable David Dewhurst , Lieutenant Governor, Senate
Honorable Tom Craddick, Speaker of the House, House of Representatives

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

IN RE: HB1126 by Uresti (Relating to emergency medical services vehicles and personnel and the collection and use of certain health-related data.), **Conference Committee Report**

Estimated Two-year Net Impact to General Revenue Related Funds for HB1126, Conference Committee Report: 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 Revenue Gain from <i>EMERGENCY MGMT ACCT</i> 512	Probable (Cost) from <i>EMERGENCY MGMT ACCT</i> 512	Change in Number of State Employees from FY 2005
2006	\$128,000	(\$91,715)	2.0
2007	\$67,000	(\$103,285)	2.0
2008	\$171,000	(\$103,285)	2.0
2009	\$119,000	(\$103,285)	2.0
2010	\$247,000	(\$103,285)	2.0

Fiscal Analysis

The bill would allow the Department of State Health Services (DSHS) to compile, organize, and release health outcome data collected under Chapters 104 and 191 of the Health and Safety Code according to specified geographic areas.

The bill would require licensing (and compliance with other requirements of the Health and Safety Code) of currently unlicensed entities that transport patients via stretcher between medical facilities or between residences and medical facilities, by removing current exemptions to the licensing requirement. Licensed entities would also be required to include vehicles currently exempted from requirements under their license upon renewal.

The bill would include fire department employees whose primary duties are to provide emergency medical services for the municipality in the class of employees entitled to civil service protection and not required to take a competitive examination. The Department of State Health Services indicates this provision would have no fiscal impact.

Methodology

Revenue: According to the Department of State Health Services, revenue would be generated from increases in: the number of providers required to be licensed, the number of vehicles required to be included in licenses, and the number of EMS personnel certified by the Department. DSHS estimates increased revenue to the Emergency Management Account (General Revenue-Dedicated) would be \$195,000 for the biennium based on the estimated number of licenses and the current fee structure set in Chapter 773 of the Health and Safety Code.

Costs: DSHS reports additional FTE resources would be necessary to review applications, conduct surveys and inspections, and to investigate complaints associated with the new licensing requirements if the bill were to be implemented. It is assumed that 2 new FTE positions would be necessary to implement the provisions of the bill, and that the costs associated with 2 FTE positions would be offset by the amount of revenue estimated to be generated by DSHS. DSHS costs for complaint hearings at the State Office of Administrative Hearings are also included in the estimate. The biennial cost associated with implementation of the bill, assuming a phase-in of FTEs (75%) in fiscal year 2006, is estimated to be \$195,000.

Local Government Impact

The bill could result in increased revenue and workload in cities that regulate EMS providers under municipal ordinances or other regulations, due to the increased number of licensed providers.

Source Agencies: 357 Office of Rural Community Affairs, 537 Department of State Health Services

LBB Staff: JOB, BW, CL, KF