LEGISLATIVE BUDGET BOARD Austin, Texas

FISCAL NOTE, 79TH LEGISLATIVE REGULAR SESSION

May 6, 2005

TO: Honorable Suzanna Gratia Hupp, Chair, House Committee on Human Services

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

IN RE: HB2449 by Naishtat (Relating to a pilot program for transferring money for certain persons in institutional care to provide community-based services to those persons.), Committee Report 1st House, Substituted

No significant fiscal implication to the State is anticipated.

The bill would amend Chapter 531, Government Code, by adding Section 531.085, requiring the Health and Human Services Commission to direct the Department of Aging and Disability Services (DADS) to develop and implement a pilot program to: (1) Quantify the amount of money appropriated by the legislature that would have been spent during the remainder of a state fiscal biennium to care for a person who lives in an ICF/MR facility but who is leaving that facility before the end of the biennium to live in the community using a medical assistance waiver program; and (2) Transfer, at the time the person leaves the facility, the amount quantified in the previous requirement within the department's budget or among the commission and health and human services agencies as necessary to comply with the requirements.

The Department of Aging and Disability Services assumes that consumers who leave ICF/MR community and state schools for other community alternatives would enroll in the Home and Community Based Services (HCS) program, and that the ICF/MR bed is decertified and taken offline. DADS further assumed that the transfer would be limited to the monies needed to support the consumer in HCS. DADS noted that ICF/MR, being an entitlement program, may eventually have to serve future interested clients regardless of capacity issues resulting from the decertification of beds.

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 529 Health and Human Services Commission, 537 Department of State Health Services, 539 Department of Aging and Disability Services

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