LEGISLATIVE BUDGET BOARD Austin, Texas

FISCAL NOTE, 79TH LEGISLATIVE REGULAR SESSION

April 17, 2005

TO: Honorable Jane Nelson, Chair, Senate Committee on Health & Human Services

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

IN RE: SB330 by Deuell (Relating to stroke and the designation of certain facilities as stroke facilities; providing an administrative penalty.), Committee Report 1st House, Substituted

Estimated Two-year Net Impact to General Revenue Related Funds for SB330, Committee Report 1st House, Substituted: a negative impact of (\$2,500,000) 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	(\$1,250,000)	
2007	(\$1,250,000) (\$1,250,000)	
2008	(\$1,250,000)	
2009	(\$1,250,000)	
2010	(\$1,250,000)	

All Funds, Five-Year Impact:

Fiscal Year	Probable (Cost) from GENERAL REVENUE FUND 1	Change in Number of State Employees from FY 2005
2006	(\$1,250,000)	2.0
2007	(\$1,250,000)	5.0
2008	(\$1,250,000)	5.0
2009	(\$1,250,000)	5.0
2010	(\$1,250,000)	5.0

The bill would amend the Health and Safety Code, chapter 773, by adding subchapter H, Emergency Stroke Services. The bill would state legislative intent to create an emergency treatment system for victims of stroke. It requires the appointment of a stroke committee to assist the Emergency Medical Services advisory council in development of a statewide stroke plan and stroke facility designation criteria.

The Department of State Health Services (DSHS) would establish a grant program for rural health care facilities located in counties with a population of less than 250,000. The grants would be used for developing and maintaining appropriate stroke care. The bill would allow DSHS to use funds appropriated for the grant program to pay for administrative expenses incurred in developing the stroke plan, adoption of rules, and implementing the grant program.

The bill would take effect September 1, 2005.

Fiscal Analysis

The bill would allow the Department of State Health Services (DSHS) to use grant funds to pay for staff to develop the stroke plan, implement rules, and to develop the grant program for rural facilities. The bill would allow DSHS to impose and collect fees in connection with the stroke facility designation program. DSHS would review the need for and use of fees to determine how charges would be administered. This cost estimate assumes that the cost of two full-time-equivalents in FY 2006 and five FTEs in FY 2007-2010 is covered by the funds that would be appropriated for the grant program. Should fee revenue become available, it would offset this General Revenue cost.

Methodology

It is assumed that the appropriation to the Department of State Health Services would be \$1,250,000 in General Revenue per year for the stroke grant program. For the purposes of this cost estimate, any fee revenue that may accrue to DSHS is not assumed to offset the cost of staff.

Local Government Impact

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

Source Agencies: 357 Office of Rural Community Affairs, 529 Health and Human Services Commission,

537 Department of State Health Services

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