LEGISLATIVE BUDGET BOARD Austin, Texas

FISCAL NOTE, 80TH LEGISLATIVE REGULAR SESSION

April 24, 2007

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

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

IN RE: HB3690 by Coleman (Relating to advance directives.), As Introduced

Estimated Two-year Net Impact to General Revenue Related Funds for HB3690, As Introduced: a negative impact of (\$1,963,514) through the biennium ending August 31, 2009.

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
2008	(\$1,748,568)
2009	(\$1,748,568) (\$214,946)
2010	(\$214,946)
2011	(\$214,946)
2012	(\$214,946)

All Funds, Five-Year Impact:

Fiscal Year	Probable (Cost) from GENERAL REVENUE FUND 1
2008	(\$1,748,568)
2009	(\$214,946)
2010	(\$214,946)
2011	(\$214,946)
2012	(\$214,946)

Fiscal Year	Change in Number of State Employees from FY 2007
2008	3.0
2009	3.0
2010	3.0
2011	3.0
2012	3.0

Fiscal Analysis

The bill would require the Department of State Health Services (DSHS) to establish and maintain an advance directive registry that is accessible through an Internet website. The registry would be

designed to provide authorized health care providers immediate access at all times.

The bill would prohibit DSHS from charging fees for use of the advance directive registry. However, DSHS would be authorized to accept gifts and grants for the registry. It is assumed there would not be a significant revenue impact from gifts and grants.

The bill would require DSHS to provide a method for notating on driver's licenses or identification cards that an individual has registered an advance directive. There could be additional costs to the Department of Public Safety to include a notation on driver's licenses or identification cards.

The bill would authorize patients or surrogates to seek court orders for life-sustaining treatment and would provide for appeals. The bill would prohibit filing fees or court costs from being assessed for these proceedings. It is assumed there would not be a significant fiscal impact to the state for these proceedings.

Methodology

DSHS estimates a cost of \$131,538 in General Revenue in fiscal year 2008 and \$146,098 in General Revenue in fiscal years 2009-2012 for 3 additional Full-Time-Equivalent (FTE) positions to establish and maintain the advance directives registry. Estimates include salaries, benefits, and other administrative costs.

Technology

In addition, DSHS estimates total technology costs of \$1,617,030 in General Revenue in fiscal year 2008 and \$68,848 in General Revenue in fiscal years 2009-2012. This includes a one-time cost of \$1,512,000 in General Revenue in fiscal year 2008 to contract for the development of an advance directive registry (15,120 hours at \$100 per hour). Also included is \$105,030 in General Revenue in fiscal year 2008 and \$68,848 in fiscal years 2009-2012 for computer hardware and software for the additional FTEs and for contracted data center services.

Local Government Impact

The Office of Court Administration indicates that counties would not be compensated for administrative costs associated with processing cases authorized by the bill, because fees and court costs would be prohibited. It is assumed the fiscal impact to counties would not be significant.

Source Agencies: 211 Court of Criminal Appeals, 212 Office of Court Administration, Texas Judicial

Council, 405 Department of Public Safety, 503 Texas Medical Board, 507 Board of Nurse Examiners, 529 Health and Human Services Commission, 537 State Health

Services, Department of

LBB Staff: JOB, CL, PP, SSt