

**LEGISLATIVE BUDGET BOARD**  
**Austin, Texas**

**FISCAL NOTE, 82ND LEGISLATIVE REGULAR SESSION**

**February 13, 2011**

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

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

**IN RE: SB243** by Patrick (Relating to the reestablishment of the Texas Bleeding Disorders Advisory Council.), **As Introduced**

**Estimated Two-year Net Impact to General Revenue Related Funds** for SB243, As Introduced: a negative impact of (\$260,026) through the biennium ending August 31, 2013.

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:**

<b>Fiscal Year</b>	<b>Probable Net Positive/(Negative) Impact to General Revenue Related Funds</b>
2012	(\$192,967)
2013	(\$67,059)
2014	(\$192,059)
2015	(\$67,059)
2016	\$0

**All Funds, Five-Year Impact:**

<b>Fiscal Year</b>	<b>Probable Savings/(Cost) from General Revenue Fund 1</b>	<b>Change in Number of State Employees from FY 2011</b>
2012	(\$192,967)	0.4
2013	(\$67,059)	0.5
2014	(\$192,059)	0.5
2015	(\$67,059)	0.5
2016	\$0	0.0

**Fiscal Analysis**

The bill would reestablish the Texas Bleeding Disorders Advisory Council (Council). The bill would require the Department of State Health Services (DSHS) to provide administrative support to the Council.

The Council would study and advise DSHS, the Texas Department of Insurance (TDI), and the Health and Human Services Commission (HHSC) on issues affecting individuals with hemophilia and other bleeding or clotting disorders. The bill would require the Council to report on its findings and recommendations by December 1st of even numbered years and would require the Commissioner of DSHS to report on efforts to implement the recommendations.

The bill would allow for reimbursement of Council members for actual and necessary expenses

incurred while performing Council business.

The Council is abolished and the provisions of the bill expire September 1, 2015.

### **Methodology**

In order to implement the provisions of the bill, the following assumptions are made:

1) 1/2 a full-time-equivalent (FTE) position - Program Specialist II is needed to coordinate Council activities and assist in the development of the reports. It is assumed that this individual would only be needed for nine months in the first year.

2) The cost for travel expenses for the 15 member board to meet quarterly for two day meetings is \$24,420 a year. This includes airfare (\$200), meals (\$36 per day), ground transportation (\$25 per day), and hotel (\$85 per night).

3) \$125,000 is needed in fiscal years 2012 and 2014 to conduct the hemophilia or other bleeding or clotting disorder studies required by the bill. It is assumed that these studies will be outsourced.

DSHS also assumes some small additional operating costs to implement the provisions in the bill.

### **Local Government Impact**

No fiscal implication to units of local government is anticipated.

**Source Agencies:** 537 State Health Services, Department of

**LBB Staff:** JOB, CL, MB, JF