LEGISLATIVE BUDGET BOARD Austin, Texas

FISCAL NOTE, 83RD LEGISLATIVE REGULAR SESSION

April 23, 2013

TO: Honorable Lois W. Kolkhorst, Chair, House Committee on Public Health

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB245 by Menéndez (Relating to the authority of emergency room physicians and certain certified emergency medical services professionals to hold a person believed to have a mental illness; establishing mental health crisis intervention certification for certain emergency medical services personnel.), As Introduced

Estimated Two-year Net Impact to General Revenue Related Funds for HB245, As Introduced: a negative impact of (\$1,816,987) through the biennium ending August 31, 2015.

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	
2014	(\$887,476)	
2015	(\$929,511)	
2016	(\$930,897)	
2017	(\$918,838)	
2018	(\$920,312)	

All Funds, Five-Year Impact:

Fiscal Year	Probable Savings/(Cost) from <i>General Revenue Fund</i> 1	Change in Number of State Employees from FY 2013
2014	(\$887,476)	8.3
2015	(\$929,511)	11.0
2016	(\$930,897)	11.0
2017	(\$918,838)	11.0
2018	(\$920,312)	11.0

Fiscal Analysis

The bill would amend Chapter 573 and Chapter 773 of the Health and Safety Code relating to the authority of emergency room physicians and certain certified emergency medical services

professionals to hold a person believed to have a mental illness and establishing mental health crisis intervention certification for certain emergency medical services personnel. The bill would allow a physician or an emergency medical services professional (EMS) certified in mental health intervention to hold a person for up to 24 hours in a hospital emergency room. Under the provisions of the bill, the Department of State Health Services (DSHS) is required to establish minimum requirements for the training and testing of EMS personnel in mental health crisis intervention. The bill would take effect immediately if a two-thirds majority vote in both houses of the Legislature is received, otherwise the bill would take effect on September 1, 2013.

Methodology

It is assumed that the bill will not generate revenue since the bill does not authorize DSHS to charge a fee for the certification and EMS licensee fees are capped in statute.

DSHS estimates that development and continued validation of the exam will cost \$30,000 in fiscal year 2014 and \$20,000 in fiscal year 2015.

DSHS estimates a one-time technology cost of \$25,000 in fiscal year 2014 to licensing system for the new certification.

It is assumed that in the first year approximately all of the 61,000 licensed and certified EMS personnel would need to obtain this certification as it is assumed that all EMS personnel work on ambulances that could transport a person to a hospital emergency department and could be required to make the determination whether to place a person under the 24 hour hold. After the initial certification, DSHS assumes that the renewal of the certification would be tied to the EMS licensee renewal every four years.

It is assumed that the adopted rules will include the requirement for continuing education since that is a standard requirement of professional certifications. DSHS estimates that funding the continuing education requirement for DSHS EMS personnel who are required to maintain their certification to perform their job duties will be \$1,200 in fiscal year 2014 and \$300 in fiscal year 2015 and each year thereafter.

DSHS estimates there will be an increase in consumer complaints and regulatory investigations. DSHS estimates that implementation of the bill to create a new certification would require 11 FTEs to be hired in the second quarter of fiscal year 2014. The additional FTEs would cost \$416,974 in salary and wages and \$124,008 in benefits in fiscal year 2014 and \$554,275 in salary and wages and \$164,841 in benefits in each subsequent year. The other operating expenses and travel costs associated with the FTE are estimated to be \$215,163 in fiscal year 2014 and \$115,691 in fiscal year 2015. The associated Health and Human Services Commission enterprise cost is estimated to be \$75,131 in fiscal year 2014 and \$74,404 in fiscal year 2015.

Technology

DSHS estimates a one-time technology cost of \$25,000 in fiscal year 2014 to licensing system for the new certification; this cost is included above.

Local Government Impact

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

Source Agencies: 537 State Health Services, Department of

LBB Staff: UP, CL, MB, CH, NB