

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 83RD LEGISLATIVE REGULAR SESSION

May 3, 2013

TO: Honorable Richard Peña Raymond, Chair, House Committee on Human Services

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: SB152 by Nelson (Relating to the protection and care of persons who are elderly or disabled or who are children.), **As Engrossed**

Estimated Two-year Net Impact to General Revenue Related Funds for SB152, As Engrossed: a negative impact of (\$782,740) 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	(\$348,549)
2015	(\$434,191)
2016	(\$434,096)
2017	(\$434,096)
2018	(\$434,096)

All Funds, Five-Year Impact:

Fiscal Year	Probable Savings/(Cost) from <i>General Revenue Fund</i> 1	Probable Savings/(Cost) from <i>Federal Funds</i> 555	Change in Number of State Employees from FY 2013
2014	(\$348,549)	(\$93,919)	3.0
2015	(\$434,191)	(\$109,457)	4.0
2016	(\$434,096)	(\$109,421)	4.0
2017	(\$434,096)	(\$109,421)	4.0
2018	(\$434,096)	(\$109,451)	4.0

Fiscal Analysis

The bill would amend the Health and Safety Code relating to the protection and care of persons who are elderly or disabled or who are children. The bill would require the Department of State

Health Services (DSHS) to develop an information management, reporting, and tracking system for each state hospital to monitor serious allegations of abuse, neglect, or exploitation and develop risk assessment protocols for state hospital employees to use in identifying and assessing possible instances of abuse or neglect.

Under the provisions of the bill, the executive commissioner of the Health and Human Services Commission (HHSC) would be required to adopt a policy requiring a state hospital employee who knows or reasonably suspects that another state hospital employee is illegally using a controlled substance to report that knowledge or reasonable suspicion to the superintendent of the state hospital.

The bill would require that DSHS provide new state hospital employees with competency training and a course of instruction about the general duties of a state hospital employee. Under the provisions of the bill, DSHS is authorized to obtain criminal history record information on certain persons who would be in direct contact with a patient at a state hospital.

The bill would require the HHSC Office of the Inspector General (OIG) to employ and commission peace officers by May 1, 2014, for the purpose of assisting a state or local law enforcement agency in the investigation of an alleged criminal offense involving a patient of a state hospital. The OIG would be required to provide status reports on each investigation and an annual report.

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

DSHS anticipates that implementing the provisions of the bill would require conducting random drug testing on approximately 2% of state hospital staff each month, as well as any reasonable suspicion testing, at a cost of \$56,560 in General Revenue in fiscal year 2014 and \$92,990 in General Revenue in fiscal year 2015 and each subsequent year.

It is assumed that a criminal history background check will be required of all new direct care state hospital employees and all new volunteers. The estimate of obtaining the checks is assumed to be \$44,443 in fiscal year 2014 and \$52,709 in fiscal year 2015 and subsequent years.

HHSC-OIG indicates that implementation of the legislation would require 4.0 additional Investigator VI positions, which would be phased in during fiscal year 2014. The additional FTEs will cost \$247,546 in General Revenue and \$93,919 in Federal Funds in fiscal year 2014, and \$288,492 in General Revenue and \$109,457 in Federal Funds in fiscal year 2015.

Based on the analysis provided by the Department of Aging and Disability Services, it is assumed that all other provisions of the bill relating to the agency can be implemented by utilizing existing agency resources.

Technology

HHSC- OIG anticipates a technology cost of \$7,250 in fiscal year 2014 and \$4,679 in fiscal year 2015, \$4,673 in fiscal year 2016 and subsequent years to support the FTEs, which is included in the staffing costs above.

Local Government Impact

No fiscal implication to units of local government is anticipated.

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

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