

LEGISLATIVE BUDGET BOARD  
Austin, Texas

FISCAL NOTE, 84TH LEGISLATIVE REGULAR SESSION

April 7, 2015

**TO:** Honorable Byron Cook, Chair, House Committee on State Affairs

**FROM:** Ursula Parks, Director, Legislative Budget Board

**IN RE: HB2835** by King, Susan (Relating to the name of the program serving certain persons with special health care needs and prioritizing services provided under the program.), **As Introduced**

**Estimated Two-year Net Impact to General Revenue Related Funds** for HB2835, As Introduced: a negative impact of (\$1,305,029) through the biennium ending August 31, 2017.

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
2016	(\$1,305,029)
2017	\$0
2018	\$0
2019	\$0
2020	\$0

All Funds, Five-Year Impact:

Fiscal Year	Probable Savings/(Cost) from General Revenue Fund 1
2016	(\$1,305,029)
2017	\$0
2018	\$0
2019	\$0
2020	\$0

Fiscal Analysis

The bill would amend Chapter 35, Health and Safety Code, to change the name of the Children with Special Health Care Needs Program to the Texas Special Health Care Needs Program. The bill would require that, to the extent allowed by federal law, the Department of State Health Services

(DSHS) give priority to persons on the program's waiting list who can provide proof of U.S. citizenship.

### **Methodology**

According to DSHS, information technology costs for the Texas Medicaid Healthcare Partnership (TMHP) contractor to update its system would range from \$645,000 to \$1,290,000 for technology processes and would also include \$456,100 for operational implementation. It is assumed that DSHS costs related to webpage updates, printing of materials and reprogramming systems to require citizenship documentation could be absorbed by DSHS within current resources. This estimate assumes indirect costs of \$203,929 and the lower amount of the range for TMHP updates, for a total of \$1,305,029 in General Revenue Funds in fiscal year 2016 to implement the provisions of the bill.

### **Technology**

Technology costs account for \$1.1 million of the total cost to implement the legislation.

### **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, AG, WP, VJC, SS