

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 84TH LEGISLATIVE REGULAR SESSION

May 20, 2015

TO: Honorable Charles Schwertner, Chair, Senate Committee on Health & Human Services

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB2950 by Klick (Relating to the Task Force on Infectious Disease Preparedness and Response.), **As Engrossed**

Estimated Two-year Net Impact to General Revenue Related Funds for HB2950, As Engrossed: a negative impact of (\$3,000,000) 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	(\$1,500,000)
2017	(\$1,500,000)
2018	\$0
2019	\$0
2020	\$0

All Funds, Five-Year Impact:

Fiscal Year	Probable (Cost) from General Revenue Fund 1	Probable (Cost) from Federal Funds 555
2016	(\$1,500,000)	(\$1,750,000)
2017	(\$1,500,000)	(\$1,750,000)
2018	\$0	\$0
2019	\$0	\$0
2020	\$0	\$0

Fiscal Analysis

The bill would amend Health and Safety Code to establish the Task Force on Infectious Disease Preparedness and Response as an advisory board to the Department of State Health Services. The bill would direct certain duties, eligibility of membership, and reporting and meeting requirements of the task force. The bill would authorize the Health and Human Services Commission (HHSC) to

enter into contracts or agreements, which may provide for payment by HHSC, to assist in the establishment of infectious disease emergency preparedness facilities at health care-related institutions; this authorization would expire September 1, 2017.

Methodology

According to HHSC, provisions of the bill would allow them to reimburse three facilities a total of \$6.5 million in all funds, including \$3.0 million in General Revenue Funds. There is no provision in the bill limiting the amount of reimbursement to an individual institution or the number of institutions reimbursed.

The Department of State Health Services indicates that any costs associated with implementing provisions of the bill relating to the establishment of the Task Force could be absorbed within existing resources.

Local Government Impact

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

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

LBB Staff: UP, NB, WP, SS, LBe