

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 86TH LEGISLATIVE REGULAR SESSION

March 11, 2019

TO: Honorable Lois W. Kolkhorst, Chair, Senate Committee on Health & Human Services

FROM: John McGeady, Assistant Director Sarah Keyton, Assistant Director
Legislative Budget Board

IN RE: **SB384** by Nelson (Relating to the reporting of health care-associated infections and preventable adverse events at health care facilities.), **As Introduced**

Estimated Two-year Net Impact to General Revenue Related Funds for SB384, As Introduced: a negative impact of (\$460,634) through the biennium ending August 31, 2021.

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
2020	(\$230,317)
2021	(\$230,317)
2022	\$0
2023	\$0
2024	\$0

All Funds, Five-Year Impact:

Fiscal Year	Probable Savings/(Cost) from General Revenue Fund
2020	(\$230,317)
2021	(\$230,317)
2022	\$0
2023	\$0
2024	\$0

Fiscal Analysis

The bill would change the list of reportable health care-associated infections in Chapter 98 of the Health and Safety Code. These changes would align Texas health care-associated infection reporting requirements with the federal reporting requirements set forth by the Centers for Medicaid and Medicare services (CMS). The bill would also repeal Section 98.105 of the Health and Safety Code, which allows the Health and Human Services Commission (HHSC) to change the list of procedures required to be reported in rule.

HHSC would be required to adopt rules to implement these changes no later than January 1, 2020. The bill would require reports for health care-associated infections occurring on or after January 1, 2020 to comply with the provisions of the bill.

The bill would take effect September 1, 2019.

Methodology

The Department of State Health Services (DSHS) indicates that the agency would need to update the existing reporting database, the Texas Healthcare Safety Network, in order to conform to the changes in the health care-associated infections reporting requirement. DSHS assumes that the agency could not complete these modifications until January 1, 2021. LBB analysis of DSHS finds that these activities would cost \$460,634 in General Revenue and \$460,634 in All Funds for the 2020-21 biennium.

HHSC indicates that the provisions of the bill would have no fiscal impact for the agency.

Technology

LBB analysis of DSHS finds that application and system modifications to the Texas Healthcare Safety Network would cost \$460,634 for the 2020-21 biennium.

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

LBB Staff: WP, AKi, JQ, MNa