

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 86TH LEGISLATIVE REGULAR SESSION

April 8, 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: SB1121 by Lucio (Relating to public health laboratory capabilities in certain counties.),
As Introduced

Estimated Two-year Net Impact to General Revenue Related Funds for SB1121, As Introduced: a negative impact of (\$889,919) through the biennium ending August 31, 2021. In addition, there would be costs associated with entering into local agreements with institutions of higher education and public and private testing laboratories for certain testing, which cannot be determined.

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	(\$408,593)
2021	(\$481,326)
2022	(\$481,326)
2023	(\$481,326)
2024	(\$481,326)

All Funds, Five-Year Impact:

Fiscal Year	Probable Savings/(Cost) from General Revenue Fund 1	Change in Number of State Employees from FY 2019
2020	(\$408,593)	4.0
2021	(\$481,326)	4.0
2022	(\$481,326)	4.0
2023	(\$481,326)	4.0
2024	(\$481,326)	4.0

Fiscal Analysis

The bill would amend the Health and Safety Code to require the Department of State Health Services (DSHS) to prepare and submit a report to the legislature on public laboratories in counties that are adjacent to an international border by September 1, 2020. The bill would require DSHS to collaborate with local health departments and public and private laboratories to collect information and develop recommendations for the report.

The bill would require DSHS, using available resources as determined by DSHS, to enter into local agreements with institutions of higher education and public and private testing laboratories to increase the availability of public health laboratory services for local health departments.

The bill would require DSHS, using available resources as determine by DSHS, to provide year-round laboratory support access for vector-borne infectious diseases in certain counties that are most at risk for year-round outbreaks.

The bill would take effect September 1, 2019.

Methodology

Under the provisions of the bill, the Department of State Health Services (DSHS) would prepare and submit a report to the legislature public laboratories in counties that are adjacent to an international border. DSHS assumes they would use existing collaborations with local health departments to gather information required for the report.

Under the provisions of the bill, the DSHS would enter into an agreement with institutions of higher education and public and private testing laboratories to increase the availability of public health laboratory services for local health departments in counties adjacent to an international border.

Currently, only DSHS meets protocols that ensure confidentiality of the laboratory testing and provides laboratory testing for human and nonhuman specimens in the border counties. The costs related to entering into agreements with institutions for higher education, and public and private testing laboratories to enhance laboratory testing capacity, cannot be determined but is assumed to be significant because new agreements would accelerate testing capacity and increase testing volume at an unknown amount.

Under the provisions of the bill, DSHS would be required to provide year-round access to laboratory testing for vector-borne diseases in certain counties.

Currently, DSHS provides support for arboviral testing of vector-borne infectious diseases for seven months of the year, from May to November, for four border counties. The bill would require expansion of support and testing for five additional months and to 8 new counties.

According to the agency, additional full-time equivalents (FTEs), including 1.0 Molecular Biologist III to perform testing of mosquito pools and human samples for detection of disease; 1.0 Microbiologist I to assess specimen for proper shipping and receipt according to specimen submission criteria; 1.0 Administrative Assistant III to maintain specimen databases; and 1.0 Epidemiologist II to educate counties about trapping, specimen collection, and analyze testing results would be needed to implement the provisions of the bill.

The cost for 4.0 FTEs would be \$197,841 in fiscal year 2020 and \$263,788 in each subsequent

fiscal year. An additional \$67,380 in other operating expenses, including rent, travel, and supplies that is assumed in fiscal year 2020 and \$65,196 in each subsequent fiscal year for this purpose. Also, DSHS indicated that additional costs for chemicals and supplies to perform testing would be \$59,960 for each fiscal year.

The estimated total to comply with the provisions of the bill would be \$408,593 in fiscal year 2020 and \$481,326 in each subsequent fiscal year.

Technology

Technology costs are estimated to be \$16,492 in the first year for software equipment and Data Center Services (DCS) and \$16,472 in each subsequent year for the same purpose.

Local Government Impact

According to the Texas Association of Counties, no fiscal implication to county governments is anticipated.

Source Agencies: 537 State Health Services, Department of, 710 Texas A&M University System Administrative and General Offices, 720 The University of Texas System Administration, 768 Texas Tech University System Administration, 769 University of North Texas System Administration, 783 University of Houston System Administration

LBB Staff: WP, AKi, EP, AMa, AF