

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 86TH LEGISLATIVE REGULAR SESSION

April 24, 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: **SB1122** by Lucio (Relating to the establishment of a sanitarian recruitment and retention program in border counties for public health purposes.), **Committee Report 1st House, Substituted**

Estimated Two-year Net Impact to General Revenue Related Funds for SB1122, Committee Report 1st House, Substituted: a negative impact of (\$353,767) 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. The bill would make no appropriation but could provide the legal basis for an appropriation of funds to implement the provisions of the bill. The Department of State Health Services is required to implement a provision of this Act only if the legislature appropriates money specifically for that purpose. If the legislature does not appropriate money specifically for that purpose, the department may, but is not required to, implement a provision of this Act using other appropriations available for that purpose.

General Revenue-Related Funds, Five-Year Impact:

Fiscal Year	Probable Net Positive/(Negative) Impact to General Revenue Related Funds
2020	(\$169,107)
2021	(\$184,660)
2022	(\$184,660)
2023	(\$184,660)
2024	(\$184,660)

All Funds, Five-Year Impact:

Fiscal Year	Probable Savings/(Cost) from <i>General Revenue Fund</i> 1	Change in Number of State Employees from FY 2019
2020	(\$169,107)	1.0
2021	(\$184,660)	1.0
2022	(\$184,660)	1.0
2023	(\$184,660)	1.0
2024	(\$184,660)	1.0

Fiscal Analysis

The bill would amend the Health and Safety Code to require the Department of State Health Services (DSHS), to the extent funding is available, to develop a program in counties along the international border with Mexico that 1) provides grants to local health units, local health departments, or public health districts to improve the recruitment and retention of sanitarians; and 2) expands opportunities for training and registration of sanitarians to improve disease response and prevent foodborne, waterborne, vector-borne, and zoonotic diseases.

The bill would allow DSHS to solicit or accept gifts, grants, and donations to operate the program. The bill would also require DSHS to coordinate with appropriate entities to identify and solicit funding to administer the grant program.

The bill would take effect September 1, 2019.

Methodology

Under the provisions of the bill, the Department of State Health Services (DSHS) would be required to coordinate with health authorities, local health departments, and public health districts to administer the grant program to improve the recruitment and retention of sanitarians and expand training opportunities. According to the agency, an additional \$60,000 would be needed to award six contracts to local health units, local health departments, or public health districts at a cost of \$10,000 each to provide continuing education and expand training to counties along the international border with Mexico.

This analysis assumes an additional 1.0 full-time equivalent (FTE) to provide grant management and oversight to grantees; coordinate technical support to local jurisdictions on training needs; and manage continuing education training support would be needed to implement the provisions of the bill.

The cost for 1.0 FTE would be \$56,268 in fiscal year 2020 and \$75,024 in each subsequent fiscal year. An additional \$52,839 in other operating expenses, including rent, travel, and supplies that would be needed in fiscal year 2020 and \$49,636 in each subsequent fiscal year for this purpose.

The estimated total to implement the provisions of the bill would be \$169,107 in fiscal year 2020 and \$184,660 in each subsequent fiscal year.

Technology

Technology costs are estimated to be \$4,123 in the first year for Data Center Services (DCS), hardware, and software and \$4,118 in each subsequent fiscal year for the same purposes.

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: WP, AMa, AKi, EP, AF