

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 86TH LEGISLATIVE REGULAR SESSION

May 1, 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: **SB1404** by Powell (Relating to consent to the disclosure of certain information and to other matters relating to newborn and infant screening tests.), **Committee Report 1st House, Substituted**

Estimated Two-year Net Impact to General Revenue Related Funds for SB1404, Committee Report 1st House, Substituted: a negative impact of (\$3,823,844) 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 only require the Department of State Health Services to implement a provision of the bill if the Legislature appropriates money specifically for that purpose. If the Legislature does not appropriate money specifically for that purposes, the department may, but is not required to, implement a provision of the bill 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	(\$2,677,778)
2021	(\$1,146,066)
2022	(\$1,146,066)
2023	(\$1,146,066)
2024	(\$1,146,066)

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	(\$2,677,778)	2.0
2021	(\$1,146,066)	2.0
2022	(\$1,146,066)	2.0
2023	(\$1,146,066)	2.0
2024	(\$1,146,066)	2.0

Fiscal Analysis

The bill would amend the Health and Safety Code as it relates to the disclosure of certain information and to other matters relating to newborn and infant screening tests.

The bill would require the Department of State Health Services (DSHS) to create processes to permit the parent, managing conservator, or guardian of a newborn child to provide consent required under Chapters 33 and 47 of the Health and Safety Code through electronic means. The bill would also require DSHS to create processes to determine the manner of storing electronic consent records and ensure the newborn child's attending physician has access to the electronic consent records.

The bill would take effect September 1, 2019.

Methodology

DSHS indicates that the bill would require the agency to procure a new electronic portal to capture electronic parental consent and acknowledgement, at a cost of \$2,420,500 in fiscal year 2020 and \$765,433 in subsequent fiscal years. DSHS assumes that the new portal system would require 2.0 FTEs to provide technical support, at a cost of \$219,115 in fiscal year 2020 and \$262,259 in subsequent fiscal years.

DSHS estimates that the costs of contract procurement, agency support, and other expenses would be \$38,163 in fiscal year 2020 and \$118,374 in subsequent fiscal years.

The estimated cost to comply with the provisions of the bill is \$2,677,778 in General Revenue in fiscal year 2020, and \$1,146,066 in subsequent fiscal years.

Technology

Technology costs for the new electronic portal, maintenance and support of the portal, servers, storage, and FTE-related expenses are estimated to be \$2,576,224 in fiscal year 2020 and \$921,157 in subsequent fiscal years.

Local Government Impact

No fiscal implication to units of local government is anticipated.

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

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