

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 89TH LEGISLATURE 2nd CALLED SESSION 2025

September 3, 2025

TO: Honorable Dustin Burrows, Speaker of the House, House of Representatives

FROM: Jerry McGinty, Director, Legislative Budget Board

IN RE: HB1 by Darby (Relating to youth camp emergency plans and preparedness; authorizing penalties.), As Passed 2nd House

Estimated Two-year Net Impact to General Revenue Related Funds for HB1, As Passed 2nd House: a negative impact of (\$5,431,146) through the biennium ending August 31, 2027.

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:

<i>Fiscal Year</i>	<i>Probable Net Positive/(Negative) Impact to General Revenue Related Funds</i>
2026	(\$2,882,320)
2027	(\$2,548,826)
2028	(\$2,548,826)
2029	(\$2,548,826)
2030	(\$2,548,826)

All Funds, Five-Year Impact:

<i>Fiscal Year</i>	<i>Probable Savings/(Cost) from General Revenue Fund 1</i>	<i>Change in Number of State Employees from FY 2025</i>
2026	(\$2,882,320)	16.0
2027	(\$2,548,826)	16.0
2028	(\$2,548,826)	16.0
2029	(\$2,548,826)	16.0
2030	(\$2,548,826)	16.0

Fiscal Analysis

Among other provisions, the bill would expand youth camp health and safety standards set by rule of the executive commissioner of the Health and Human Services Commission (HHSC), including the required development of an emergency plan by a youth camp operator that would be subject to approval by the Department of State Health Services (DSHS). A resident youth camp operator would not be required to submit the plan to DSHS until April 1, 2026. The bill would require DSHS to investigate each parental complaint filed with the agency for a youth camp to ensure the youth camp operator is properly implementing the camp's emergency plan and complies with provisions concerning youth camp safety. The bill would require such an investigation to include an inspection.

The bill would create the Resident Youth Camp Safety Multidisciplinary Team within DSHS to develop proposed minimum standards for resident youth camps and would require DSHS to store in a digital database each youth camp emergency plan and provide access to that database to the Texas Division of Emergency Management and each member of the Youth Camp Safety Multidisciplinary Team.

The bill would also require youth camp operators to provide and maintain redundant internet connections and to notify DSHS of any modification of certain youth camp structures or activity locations. The bill would also provide for the denial or suspension of a youth camp license for noncompliance with the bill's expanded youth camp health and safety standards and the redundant internet connections requirement.

Methodology

According to DSHS, the agency would need 16.0 additional full-time-equivalent (FTE) positions to implement the provisions of the bill: 10.0 Sanitarian IIs, 1.0 Sanitarian IV, and 5.0 Emergency Management Program Coordinator IIIs. The agency reports that all additional FTEs would require standard office setups and that the 10.0 Sanitarians IIs would need a dedicated vehicle at an estimated cost of \$50,000 each and \$8,000 travel budgets to support travel related to youth camp inspections. 4.0 Emergency Management Program Coordinator IIIs would also need \$8,000 travel budgets. Total costs excluding those related to technology would be \$2,617,357 in fiscal year 2026 and \$2,536,910 each year thereafter.

It is assumed that costs to HHSC would be insignificant.

Technology

According to DSHS, the agency would use existing technology to house and share emergency plans but would need additional funding for configuration, testing, deployment, storage, and software licensing costs, as well as for software licenses for the additional FTEs. DSHS estimates technology costs of \$264,963 in fiscal year 2026 and \$11,916 each fiscal year thereafter.

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

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