

LEGISLATIVE BUDGET BOARD  
Austin, Texas

FISCAL NOTE, 89TH LEGISLATIVE REGULAR SESSION

March 19, 2025

TO: Honorable Gary VanDeaver, Chair, House Committee on Public Health

FROM: Jerry McGinty, Director, Legislative Budget Board

IN RE: HB38 by Bucy (Relating to improvements to the Texas Information and Referral Network.), As Introduced

**Estimated Two-year Net Impact to General Revenue Related Funds** for HB38, As Introduced: a negative impact of (\$3,895,359) 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	(\$2,367,369)
2027	(\$1,527,990)
2028	(\$1,528,980)
2029	(\$1,529,804)
2030	(\$1,530,645)

All Funds, Five-Year Impact:

<i>Fiscal Year</i>	<i>Probable Savings/(Cost) from General Revenue Fund 1</i>	<i>Probable Savings/(Cost) from GR Match For Medicaid 758</i>	<i>Probable Savings/(Cost) from Federal Funds 555</i>	<i>Change in Number of State Employees from FY 2025</i>
2026	(\$26,012)	(\$2,341,357)	(\$1,910,908)	6.0
2027	(\$13,474)	(\$1,514,516)	(\$1,090,381)	6.0
2028	(\$13,474)	(\$1,515,506)	(\$1,090,711)	6.0
2029	(\$13,474)	(\$1,516,330)	(\$1,090,985)	6.0
2030	(\$13,474)	(\$1,517,171)	(\$1,091,266)	6.0

Fiscal Analysis

The bill would require the Texas Information and Referral Network (TIRN) to implement certain technology and process improvements, publish certain aggregated, deidentified client demographic information, exchange resource data with external partners, and participate in a national repository of information and referral programs and services.

The bill would allow health care systems and managed care organizations to partner and enter into agreements with the Health and Human Services Commission (HHSC) and area information centers to share data using TIRN for certain purposes.

The bill would require HHSC to prepare and submit a report that summarizes TIRN operations, identifies existing needs and gaps in services, and provides recommendations for improvements.

The bill would take effect September 1, 2025.

**Methodology**

According to HHSC, 6.5 additional full-time equivalents (FTEs) would be needed to conduct activities required by the bill, including 2-1-1 consultative services and technical assistance, monitoring, data quality and analysis, and reporting. This analysis only assumes a total of 6.0 FTEs would be needed, including 4.0 Program Specialist positions and 2.0 Data Analyst positions, are needed in fiscal year 2026 through 2030 to implement the provisions of the bill. Personnel-related costs, including salaries, travel, and overhead are estimated to total \$951,907 from All Funds in fiscal year 2026 and \$895,411 from All Funds in fiscal year 2027.

This analysis assumes that additional resources would be needed for TIRN area information centers to monitor and manage closed-loop referrals and partnerships with organizations. The additional need is estimated to total \$1,665,580 from All Funds per fiscal year.

**Technology**

This analysis assumes that HHSC would incur one-time development costs for its Technology Solution Services (TSS) vendor to integrate forms and validate and organize data into the Performance Management and Analytics System (PMAS), as well as one-time development and ongoing costs for TIRN and PMAS system changes, including implementation maintenance of two-way text messaging capabilities, application interfaces, and website redesign. The total non-FTE-related technology cost is estimated to be \$1,660,790 from All Funds in fiscal year 2026 and \$57,380 from All Funds in subsequent fiscal years.

**Local Government Impact**

No significant fiscal implication to units of local government is anticipated.

**Source Agencies:** 529 Health and Human Services Commission

**LBB Staff:** JMc, NPe, ER, ESch, NV