LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 89TH LEGISLATIVE REGULAR SESSION

April 2, 2025

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

FROM: Jerry McGinty, Director, Legislative Budget Board

IN RE: **HB3269** by Guillen (Relating to the Rita Littlefield Chronic Kidney Disease Centralized Resource Center established within the Health and Human Services Commission.), **As Introduced**

Estimated Two-year Net Impact to General Revenue Related Funds for HB3269, As Introduced: a negative impact of ($3,660,850) 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:

Fiscal Year	Probable Net Positive/(Negative) Impact to *General Revenue Related Funds*
2026	($2,955,826)
2027	($705,024)
2028	($705,544)
2029	($705,910)
2030	($706,284)

All Funds, Five-Year Impact:

Fiscal Year	Probable Savings/(Cost) from *General Revenue Fund* 1	*Change in Number of State Employees from FY 2025*
2026	($2,955,826)	2.0
2027	($705,024)	2.0
2028	($705,544)	2.0
2029	($705,910)	2.0
2030	($706,284)	2.0

Fiscal Analysis

The bill would amend the Health and Safety Code to require the Health and Human Services Commission (HHSC) to establish the Rita Littlefield Chronic Kidney Disease Centralized Resource Center (the center). HHSC would be required to structure and operate the center and establish and maintain a kidney health clinical trials registry.

The bill would also require HHSC to collaborate with the Chronic Kidney Disease Task Force to establish and maintain a website for the center through which individuals can directly communicate and exchange information on chronic kidney disease and related illnesses and register in a kidney health clinical trials registry.

HHSC would be able to solicit and accept gifts, grants, and donations from any source to implement the provisions of the bill. The bill would take effect September 1, 2025.

Methodology

The analysis assumes the Health and Human Services Commission (HHSC) would require 2.0 full-time equivalents (FTEs) to establish and maintain the center and the related kidney health clinical trials registry beginning in fiscal year 2026. This analysis assumes HHSC would require $2,955,826 from the General Revenue Fund ($2,955,826 from All Funds) in fiscal year 2026 and $705,024 from the General Revenue Fund ($705,024 from All Funds) in fiscal year 2027 to implement the provisions of the bill.

Included in the amounts above are assumed FTE costs totaling $255,479 from the General Revenue Fund ($255,479 from All Funds) and 2.0 FTEs in fiscal year 2026 and $234,645 from the General Revenue Fund ($234,645 from All Funds) and 2.0 FTEs in fiscal year 2027. This includes $19,388 from the General Revenue Fund ($19,388 from All Funds) in fiscal year 2026 for one-time costs related to the implementation of provisions of this bill.

This analysis also assumes HHSC would require $550,000 from the General Revenue Fund ($550,000 from All Funds) in fiscal year 2026 and $300,000 from the General Revenue Fund ($300,000 from All Funds) in fiscal year 2027 to contract with an institute of higher education (IHE) for content creation and review, and to ensure quality content for complex medical information and conduct an outreach campaign as required by this bill. This includes $250,000 from the General Revenue Fund ($250,000 from All Funds) in fiscal year 2026 for one-time costs related to the contract with an IHE and the outreach campaign.

Additionally, this analysis assumes HHSC would require $2,150,347 in fiscal year 2026 and $170,379 in fiscal year 2027 related to technology solution services for system development. In addition, it is assumed HHSC would require $170,459 beginning fiscal year 2028 to maintain technology infrastructure for the center. This includes $2,150,268 from the General Revenue Fund ($2,150,268 from All Funds) in fiscal year 2026 for one-time costs related to developing a centralized resource center on the agency's external website related to information on chronic kidney disease and related illnesses.

Technology

As mentioned above, this analysis assumes HHSC would require $2,150,347 in fiscal year 2026 and $170,379 in fiscal year 2027 related to technology solution services for system development. In addition, it is assumed HHSC would require $170,459 each fiscal year to maintain technology infrastructure for the center.

Local Government Impact

No 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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