

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 89TH LEGISLATIVE REGULAR SESSION

April 20, 2025

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

FROM: Jerry McGinty, Director, Legislative Budget Board

IN RE: HB4014 by Bucy (Relating to a study on the use of psychedelic therapies in the treatment of certain conditions.), **As Introduced**

Estimated Two-year Net Impact to General Revenue Related Funds for HB4014, As Introduced: a negative impact of (\$476,358) 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>	Probable Net Positive/(Negative) Impact to <i>General Revenue Related Funds</i>
2026	(\$370,788)
2027	(\$105,570)
2028	\$0
2029	\$0
2030	\$0

All Funds, Five-Year Impact:

<i>Fiscal Year</i>	Probable Savings/(Cost) from <i>General Revenue Fund</i> 1	<i>Change in Number of State Employees from FY 2025</i>
2026	(\$370,788)	2.0
2027	(\$105,570)	0.0
2028	\$0	0.0
2029	\$0	0.0
2030	\$0	0.0

Fiscal Analysis

The bill would require the Department of State Health Services (DSHS), in consultation with Baylor College of Medicine and the Center for Psychedelic Research and Therapy at Dell Medical School at the University of Texas at Austin, to conduct a study on the use of psychedelic therapies for treatment of post-traumatic stress disorder, depression, and other co-occurring conditions.

The bill would require that DSHS submit a written report to the Governor, Lieutenant Governor, Speaker of the House of Representatives, and chair of standing committees of each house of the legislature with primary jurisdiction of DSHS with the results of study and any recommendations for legislative or other actions

necessary to ensure patient access to psychedelic therapies for treatment of post-traumatic stress disorder, depression, and other co-occurring conditions no later than December 1, 2026.

Methodology

DSHS indicates that the agency would need additional temporary full-time equivalent positions (FTEs) to implement the legislation because it currently does not have a program or staff related to this topic and other staff are working at full capacity. A temporary Program Specialist V (1.0 FTE) would be needed to establish and coordinate a workgroup to prepare the required report and develop recommendations based on the findings; and a temporary Research Specialist IV (1.0 FTE) would be needed to support study development, identify relevant existing research, and write the report including recommendations based on the findings.

This analysis assumes that these temporary FTEs would be funded only through the month of the deadline for publication and submission of the report on December 1, 2026. In fiscal year 2026, 2.0 temporary FTEs would be hired through professional services based on 2,080 hours worked with an hourly rate of \$74 for the Program Specialist V and \$79 for the Research Specialist IV. Costs total \$318,240 from the General Revenue Fund for salaries/wages for these two positions in fiscal year 2026. Additional costs for these positions total \$52,548 from the General Revenue Fund in fiscal year 2026.

This analysis assumes costs in fiscal year 2027 only through December 31, 2026. Additional costs are assumed at a partial year at 690 hours worked with an hourly rate of \$74 for the Program Specialist V and \$79 for the Research Specialist IV. Costs for salaries/wages total \$105,570 from the General Revenue Fund in fiscal year 2027. No additional costs are assumed in fiscal year 2027.

Local Government Impact

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

Source Agencies: 537 State Health Services, Department of, 720 The University of Texas System Administration

LBB Staff: JMc, NPe, ER, APA