

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 89TH LEGISLATIVE REGULAR SESSION

April 29, 2025

TO: Honorable Lois W. Kolkhorst, Chair, Senate Committee on Health & Human Services

FROM: Jerry McGinty, Director, Legislative Budget Board

IN RE: SB2826 by Parker (Relating to the establishment of an education-based program to prevent medical child abuse through standardized training for medical students, healthcare professionals, and child protective services caseworkers.), **As Introduced**

Estimated Two-year Net Impact to General Revenue Related Funds for SB2826, As Introduced: a negative impact of (\$2,005,603) 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	(\$1,021,486)
2027	(\$984,117)
2028	(\$900,547)
2029	(\$900,913)
2030	(\$819,906)

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	(\$1,017,792)	(\$3,694)	(\$3,779)	2.0
2027	(\$837,446)	(\$146,671)	(\$150,044)	2.0
2028	(\$758,644)	(\$141,903)	(\$145,165)	2.0
2029	(\$759,010)	(\$141,903)	(\$145,165)	2.0
2030	(\$721,227)	(\$98,679)	(\$100,948)	2.0

Fiscal Analysis

This bill amends the Government Code to establish an education program to prevent medical child abuse for healthcare professionals, child protective services caseworkers, and medical school curriculum at Texas Institutions of Higher Education Institutions (IHE). This bill directs Texas medical schools to integrate the medical child abuse education program into their curricula as part of students' professional training and stipulates that the Texas Medical Board (TMB) and Department of Family and Protective Services (DFPS) establish continuing medical education requirements for healthcare professionals and caseworkers related to the medical child abuse education program. This bill would take effect September 1, 2025.

Methodology

The Health and Human Services Commission (HHSC) assumes it would coordinate with DFPS, TMB, and accredited medical schools at IHEs in developing and administering an education program to prevent medical child abuse, standardized training modules, and continuing education credits. The agency also assumes collaboration between Child Protective Services (CPS) and medical professionals to collect, analyze, and report on data, best practices, and improved accuracy in identifying medical child abuse. Additionally, HHSC would require contracting with subject matter experts for the development of trainings and creating a system to track the required training for licensed healthcare professionals, medical students, and CPS caseworkers.

This analysis assumes HHSC would require \$1,021,486 from the General Revenue Fund (\$1,021,486 from All Funds) and 2.0 “full-time-equivalents (FTEs)” in fiscal year 2026 and \$984,117 from the General Revenue Fund (\$984,117 from All Funds) and 2.0 FTEs in fiscal year 2027 to implement the provisions of the bill, which include the development of the medical child abuse curriculum, trainings, and necessary information technological infrastructure.

Included in the amounts above are assumed FTE costs totaling \$188,994 from the General Revenue Fund (\$188,994 from All Funds) and 1.0 Contract Administration Manager I and 1.0 Program Specialist VI FTEs in fiscal year 2026 and \$170,160 from the General Revenue Fund (\$70,160 from All Funds) and 1.0 Contract Administration Manager I and 1.0 Program Specialist VI FTEs in fiscal year 2027. This includes \$19,388 from the General Revenue Fund in fiscal year 2026 for one-time costs related to the implementation of provisions of this bill.

HHSC assumes, and included above, that the agency would require \$832,492 from the General Revenue Fund (\$836,271 from All Funds) in fiscal year 2026 and \$813,957 from the General Revenue Fund (\$964,001 from All Funds) in fiscal year 2027 to development and implement a new learning management system for hosting and tracking the medical child abuse training modules needed for the continuing education licensing standard established by the provisions of this bill. This also includes the contracting necessary to develop and implement the medical child abuse training services.

This analysis assumes the Texas Medical Board, Department of Family and Protective Services, Texas A&M University System, University of Texas System, Texas Technology University System, University of North Texas System, and University of Houston System can implement the provisions of this bill within existing agency resources.

Technology

As mentioned above, HHSC assumes the agency would require \$832,492 from the General Revenue Fund (\$836,271 from All Funds) in fiscal year 2026 and \$813,957 from the General Revenue Fund (\$964,001 from All Funds) in fiscal year 2027 to develop and implement a new learning management system and develop the medical child abuse training services.

Local Government Impact

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

Source Agencies: 503 Texas Medical Board, 529 Health and Human Services Commission, 530 Family and Protective Services, Department of, 710 Texas A&M University System Administrative and General Offices, 720 The University of Texas System Administration, 768 Texas Tech University System Administration, 769 University of North Texas System Administration, 783 University of Houston System Administration

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