COMMITTEE ON LEGISLATIVE RESEARCH OVERSIGHT DIVISION

FISCAL NOTE

L.R. No.:1418-02Bill No.:SCS for SB 259Subject:Health Department; Health, Public; HospitalsType:OriginalDate:April 23, 2013

| Bill Summary: | This proposal modifies provisions related to infectious diseases reported to |
|---------------|--|
| | the Department of Health and Senior Services. |

FISCAL SUMMARY

| ESTIMATED NET EFFECT ON GENERAL REVENUE FUND | | | | |
|---|-------------------|------------------|------------------|--|
| FUND AFFECTED | FY 2014 | FY 2015 | FY 2016 | |
| General Revenue | (Up to \$132,715) | (Up to \$30,067) | (Up to \$30,100) | |
| | | | | |
| Total Estimated Net Effect on General Revenue Fund | (Up to \$132,715) | (Up to \$30,067) | (Up to \$30,100) | |

| ESTIMATED NET EFFECT ON OTHER STATE FUNDS | | | | |
|--|---------|---------|---------|--|
| FUND AFFECTED | FY 2014 | FY 2015 | FY 2016 | |
| | | | | |
| | | | | |
| Total Estimated Net Effect on <u>Other</u> State Funds | \$0 | \$0 | \$0 | |

Numbers within parentheses: () indicate costs or losses.

This fiscal note contains 5 pages.

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| ESTIMATED NET EFFECT ON FEDERAL FUNDS | | | | |
|---------------------------------------|---------|---------|---------|--|
| FUND AFFECTED | FY 2014 | FY 2015 | FY 2016 | |
| | | | | |
| | | | | |
| Total Estimated | | | | |
| Net Effect on <u>All</u> | | | | |
| Federal Funds | \$0 | \$0 | \$0 | |

| ESTIMATED NET EFFECT ON FULL TIME EQUIVALENT (FTE) | | | | |
|--|---------|---------|---------|--|
| FUND AFFECTED | FY 2014 | FY 2015 | FY 2016 | |
| | | | | |
| | | | | |
| Total Estimated Net Effect on FTE | 0 | 0 | 0 | |

□ Estimated Total Net Effect on All funds expected to exceed \$100,000 savings or (cost).

⊠ Estimated Net Effect on General Revenue Fund expected to exceed \$100,000 (cost).

| ESTIMATED NET EFFECT ON LOCAL FUNDS | | | | |
|-------------------------------------|---------|---------|---------|--|
| FUND AFFECTED | FY 2014 | FY 2015 | FY 2016 | |
| Local Government \$0 \$0 | | | | |

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FISCAL ANALYSIS

ASSUMPTION

Officials from the **Department of Health and Senior Services (DHSS)** state the DHSS will need the Office of Administration (OA), Information Technology Services Division (ITSD) to make modifications to the existing Missouri Healthcare Infection Reporting System (MHIRS) system which resides in the State Data Center.

The following Personnel costs will apply:

| OST CATEGORY | FIRST YEAR | ONGOING | |
|--|------------|----------|--|
| CCIT staff (IT Spec I) for support of environment setup, implementation management, and development team support. \$30/hr x 78 hrs = \$2,340 | \$2,340 | \$936 | |
| Server staff (IT Spec II) for support of environment setup, migration and implementation support, and application support. $32/hr \times 78 hrs = 2,496$ | \$2,496 | \$998 | |
| DBA staff (IT Spec II) for support of data storage environments, migration and implementation support, and application support. \$32/hr x 208 hrs = \$6,656 | \$6,656 | \$998 | |
| IT Specialist II, Application Development Project Manager to provide IT project management, development support and on-going administration of the application. \$32/hr x 182 hrs = \$5,824 | \$5,824 | \$1,248 | |
| Developer staff services for the application design, development and implementation, as well as ongoing support. \$30/hr x 2,080 hrs = \$62,400 | \$62,400 | \$7,800 | |
| State Data Center service charges for hardware and software required to host the application. | \$8,700 | \$8,700 | |
| DTALS | \$88,416 | \$20,680 | |

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ASSUMPTION (continued)

DHSS assumes the ITSD would need to hire 1 FTE Information Technologist for FY 14 plus related equipment and expense. Total costs to the General Revenue Fund for FY 14 are estimated to be \$144,904; FY 15 costs are estimated to be \$39,198; and FY 16 costs are estimated to be \$39,323.

Oversight assumes OA-ITSD/DHSS is provided with core funding to handle a certain amount of activity each year. Oversight assumes OA-ITSD/DHSS could absorb some of the costs related to this proposal and will not hire 1 FTE, although it may be necessary to contract out some of the computer programming duties. Oversight will assume administrative cost to provide for the changes in this proposal to the OA-ITSD/DHSS could be as much as \$132,715 for FY 14; up to \$30,067 for FY 15 and up to \$30,100 for FY 16. If multiple bills pass which require additional staffing and duties at substantial costs, OA-ITSD/DHSS could request funding through the appropriation process.

No additional hospitals responded to **Oversight's** request for a statement of fiscal impact.

| FISCAL IMPACT - State Government GENERAL REVENUE FUND | FY 2014 (10 Mo.) | FY 2015 | FY 2016 |
|--|------------------------------------|-------------------------|-------------------------|
| <u>Costs</u> - OA-ITSD/DHSS Computer programming and other administrative expenditures | <u>(Up to</u> <u>\$132,715)</u> | (Up to \$30,067) | (Up to \$30,100) |
| ESTIMATED NET EFFECT ON THE GENERAL REVENUE FUND | <u>(Up to</u> <u>\$132,715)</u> | <u>(Up to \$30,067)</u> | <u>(Up to \$30,100)</u> |
| FISCAL IMPACT - Local Government | FY 2014 (10 Mo.) | FY 2015 | FY 2016 |
| | <u>\$0</u> | <u>\$0</u> | <u>\$0</u> |

FISCAL IMPACT - Small Business

No direct fiscal impact to small businesses would be expected as a result of this proposal.

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FISCAL DESCRIPTION

This proposal adds carbapenem-resistant Klebsiella (CRK) as an infectious disease that shall be reported to the Department of Health and Senior Services by hospitals, ambulatory surgical centers and other certain health care facilities.

This proposal also repeals provisions regarding whether hospitals, ambulatory surgical centers and other facilities can substitute reporting to the federal Centers for Disease Control as an alternative means of complying with the reporting requirements required by state law.

This proposal requires reporting of Class I surgical site infections, at no less than five such surgical sites. This act provides that the current reporting requirements shall be published on the Department of Health and Senior Services website to be updated on the website on a quarterly basis.

Also, hospitals shall report to the department on a weekly basis the number of persons put in isolation due to infection so that such information may be published on the department's website. All of the data to be reported on the department's internet website shall consist of data submitted directly to the department and not data submitted to the federal government or other outside resources.

This legislation is not federally mandated, would not duplicate any other program and would not require additional capital improvements or rental space.

SOURCES OF INFORMATION

Department of Health and Senior Services

Cino Aday.

Ross Strope Acting Director April 23, 2013

HWC:LR:OD