## COMMITTEE ON LEGISLATIVE RESEARCH OVERSIGHT DIVISION

## FISCAL NOTE

L.R. No.:2619-01Bill No.:HB 1084Subject:Health, Public; Health Department; Health Care ProfessionalsType:OriginalDate:March 29, 2007

Bill Summary: This proposal creates the Chronic Kidney Disease Task Force.

# FISCAL SUMMARY

ESTIMATED NET EFFECT ON GENERAL REVENUE FUND				
FUND AFFECTED	FY 2008	FY 2009	FY 2010	
General Revenue	(\$13,600)	(\$2,720)	\$0	
Total Estimated Net Effect on General Revenue Fund	(\$13,600)	(\$2,720)	\$0	

ESTIMATED NET EFFECT ON OTHER STATE FUNDS				
FUND AFFECTED	FY 2008	FY 2009	FY 2010	
Total Estimated Net Effect on <u>Other</u> State Funds	\$0	\$0	\$0	

Numbers within parentheses: ( ) indicate costs or losses.

This fiscal note contains 4 pages.

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ESTIMATED NET EFFECT ON FEDERAL FUNDS				
FUND AFFECTED	FY 2008	FY 2009	FY 2010	
Total Estimated Net Effect on <u>All</u>				
Federal Funds	\$0	\$0	\$0	

ESTIMATED NET EFFECT ON FULL TIME EQUIVALENT (FTE)				
FUND AFFECTED	FY 2008	FY 2009	FY 2010	
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 2008	FY 2009	FY 2010
Local Government	\$0	\$0	\$0

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#### FISCAL ANALYSIS

#### ASSUMPTION

Officials from the **Department of Social Services (DSS)** assume there is no fiscal impact to the DSS, since the Department of Health and Senior Services has the responsibility to provide staff support to the Task Force.

Officials from the **Department of Health and Senior Services (DHSS)** assume the task force will be in existence for only one year, since the proposal requires the task force to prepare its final recommendations in the form of a report to the General Assembly within 365 days of its first meeting. Although the proposal does not specify how often the task force is to meet, it is assumed that the task force will meet up to six times annually. The DHSS assume the task force will be appointed in September, start meeting in October and meet every other month through August.

The proposal lists 17 required members and allows for other members. As several required members are specialty physicians, it is assumed that most members will come from the Kansas City and St. Louis areas. It is also assumed that a member of the Missouri Organ Donor Program will serve on the task force. Since other members may also be chosen to serve on the task force, costs are calculated for a total of 25 task force members. DHSS assumes a standard cost of \$160 per member per meeting for lodging, meals, and mileage for a total cost of \$24,000 (\$160 X 25 members X 6 meetings).

**Oversight** assumes the minimum members required (17) would make up the Task Force for a total cost of \$16,320 (\$160 X 17 members X 6 meetings), with 5 meetings being held in FY08 and one being held in FY09.

FISCAL IMPACT - State Government	FY 2008 (10 Mo.)	FY 2009	FY 2010
GENERAL REVENUE FUND			
<u>Costs</u> - Department of Health and Senior Services Task Force Meeting Costs	(\$13,600)	(\$2,720)	\$0
ESTIMATED NET EFFECT ON GENERAL REVENUE FUND	<u>(\$13,600)</u>	<u>(\$2,720)</u>	<u>\$0</u>

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FISCAL IMPACT - Local Government	FY 2008 (10 Mo.)	FY 2009	FY 2010
	<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.

### FISCAL DESCRIPTION

This legislation creates the "Chronic Kidney Disease Task Force." The list of 17 members are specified in the legislation. The duties of the task force include developing a plan to educate the public and health care professionals about the advantages and methods of early screening, diagnosis, and treatment of chronic kidney disease. Also, the task force shall submit a report of its findings and recommendations to the General Assembly within a year of its first meeting.

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 Department of Social Services

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