

Revised based on amendments adopted through 3-30-2017

FISCAL NOTE
LEGISLATIVE FISCAL ANALYST ESTIMATE

ESTIMATE OF FISCAL IMPACT – STATE AGENCIES (See narrative for political subdivision estimates)				
	FY 2017-18		FY 2018-19	
	EXPENDITURES	REVENUE	EXPENDITURES	REVENUE
GENERAL FUNDS				
CASH FUNDS	\$53,955	\$54,000	\$65,941	\$67,500
FEDERAL FUNDS				
OTHER FUNDS				
TOTAL FUNDS	\$53,955	\$54,000	\$65,941	\$67,500

Any Fiscal Notes received from state agencies and political subdivisions are attached following the Legislative Fiscal Analyst Estimate.

This bill provides an improved definition of the diseases for which all infants are screened. The Department of Health and Human Services is currently authorized to charge a fee of up to \$10 for these screenings; the bill authorizes the fee to be up to \$20. The fee is used to pay the costs for the central data registry; tracking; monitoring; referral; quality assurance; program operation, development, and evaluation and treatment. The bill as amended adds three conditions to mandatory screening of infants.

The Department of Health and Human Services would need a community health educator to develop reporting and follow-up protocols, lab results reporting, reporting letter, parental and health care professional educational materials. The cost would be \$53,955 GF in FY 2018 and \$65,941 GF in FY 2019. If the department increases the fee to the maximum of \$20, an additional \$270,000 would be generated. To cover only the costs associated with adding three additional mandatory screenings, the fee would need to be increased by \$2.00 to \$2.50.