

# OFFICE OF FISCAL ANALYSIS

Legislative Office Building, Room 5200  
Hartford, CT 06106 ◊ (860) 240-0200  
<http://www.cga.ct.gov/ofa>

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HB-7193

AN ACT IMPLEMENTING THE GOVERNOR'S BUDGET  
RECOMMENDATIONS REGARDING PUBLIC HEALTH.

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## **OFA Fiscal Note**

### **State Impact:**

Agency Affected	Fund-Effect	FY 20 \$	FY 21 \$
Public Health, Dept.	GF - Cost	98,000	100,646
Resources of the General Fund	GF - Revenue Gain	98,000	100,646

Note: GF=General Fund

**Municipal Impact:** None

### **Explanation**

The bill is not anticipated to result in a net fiscal impact to the State or municipalities. The fiscal impact of each section of the bill is projected below.

**Section 1**, which is effective 10/1/19, requires that newborns be screened for any disorder included in the federal Recommended Uniform Screening Panel (RUSP). The cost to the Department of Public Health (DPH) to screen for three nationally recommended disorders not currently being screened for (Pompe Disease, Mucopolysaccharidosis Type I, and Spinal Muscular Atrophy) is approximately \$98,000 in FY 20 (partial year) and \$100,646 in FY 21 (full year). Testing costs are anticipated to be recovered by additional General Fund revenue generated by increasing the fee per newborn screened by three dollars, from \$110 to \$113.<sup>1</sup>

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<sup>1</sup>Section 346 of PA 15-5 JSS increased the fee per newborn screened, starting in FY 16, from \$56 to \$98. In 2017, the fee was increased from \$98 to \$110 in the Governor's Executive Order Budget.

**Sections 2 and 3** require that per capita funding granted by DPH to full-time and district municipal health departments be reduced proportionally in the event that the total amount appropriated to the Local and District Departments of Health account is less than the per capita funding required under CGS Sec. 19a-202 and CGS Sec. 19a-245. These sections implement the Governor's FY 20 and FY 21 Budget, which reduces statutory funding for full-time and district municipal health departments by 20%, or \$935,666, in each fiscal year of the biennium. The amount that would be provided to for full-time and district municipal health departments under existing statutes is approximately \$4,678,322 in both FY 20 and FY 21.

**Section 4** finalizes the Drinking Water Primacy Assessment structure by setting a fee per service connection of \$2.57 and clarifying that the requirement for water companies to pay the assessment terminates if DPH no longer maintains primacy under the federal Safe Drinking Water Act.<sup>2</sup>

### ***The Out Years***

The fiscal impact identified above would continue into the future subject to: (1) new disorders being included in the RUSP, (2) the General Fund appropriations for the Local and District Departments of Health account, and (3) the number of public water systems and their number of service connections.

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<sup>2</sup>Approximately \$2,025,000 is currently anticipated to be generated annually from the Drinking Water Primacy Assessment, beginning in FY 19. The Drinking Water Primacy Assessment was established in Sections 676 and 677 of PA 17-2 JSS. Starting in FY 19, annual General Fund revenue of \$2.5 million was included in the FY 18 and FY 19 Biennial Budget's revenue schedule.