

OFFICE OF FISCAL ANALYSIS

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<http://www.cga.ct.gov/ofa>

sSB-1

AN ACT EQUALIZING COMPREHENSIVE ACCESS TO MENTAL, BEHAVIORAL AND PHYSICAL HEALTH CARE IN RESPONSE TO THE PANDEMIC.

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 22 \$	FY 23 \$
State Comptroller - Fringe Benefits ¹	GF - Cost	127,000	132,500
Mental Health & Addiction Serv., Dept.	GF - Cost	6 million	None
Policy & Mgmt., Off.	GF - Cost	500,000	None
Public Health, Dept.	GF - Cost	1,510,000	973,000

Note: GF=General Fund

Municipal Impact:

Municipalities	Effect	FY 22 \$	FY 23 \$
Local and Regional School Districts	STATE MANDATE ² - Potential Cost	See Below	See Below

Explanation

The bill requires the Department of Public Health (DPH) to designate an employee within its Office of Public Health Preparedness

¹The fringe benefit costs for most state employees are budgeted centrally in accounts administered by the Comptroller. The estimated active employee fringe benefit cost associated with most personnel changes is 41.3% of payroll in FY 22 and FY 23.

² State mandate is defined in Sec. 2-32b(2) of the Connecticut General Statutes, "state mandate" means any state initiated constitutional, statutory or executive action that requires a local government to establish, expand or modify its activities in such a way as to necessitate additional expenditures from local revenues.

and Response to serve as the pandemic preparedness officer. Under the bill, the officer is responsible for the state's pandemic preparedness, including (1) conducting an annual inventory of the state's stockpile of medical equipment and medical supplies; (2) reviewing and ensuring the adequacy of infection prevention at health care facilities; and (3) periodically updating legislators during a pandemic-related public health emergency.

DPH would need to hire three positions (two full-time and one part-time) to fulfill these requirements. The Public Health Services Manager position, with a salary of \$106,000 in FY 22 and \$110,000 in FY 23 would be responsible for conducting an annual inventory of the state's medical stockpile of medical equipment and supplies and provide updates to the members of the general assembly during declared public health emergencies, as well as preparing a report annually for the joint standing committee of the General Assembly.

The other two positions would be filled by a full-time Nurse Consultant, with a salary of \$92,000 in FY 22 and \$96,000 in FY 23, and a part-time Nurse Consultant position, with a salary of \$46,000 in FY 22 and \$48,000 in FY 23. These two positions would be responsible for providing infection control technical assistance to support increased infection control prevention efforts in various healthcare facilities and to assist healthcare facilities to build infection control capacity and procedures in the areas of infection control staffing and training, use of PPE, and outbreak response.

Additionally, DPH needs \$400,000 in FY 22 and \$350,000 in FY 23 for the storage, maintenance, and management of medical equipment and supplies. This would cover storage, maintenance, and management of ventilators/aspirators, the state's mobile field hospital, and a 250-bed medical station of supplies. This equipment and supplies require temperature and humidity-controlled storage space and annual maintenance. Also, an inventory management system will be required to track the PPE inventory.

The bill also requires DPH to establish a program, within available

appropriations, to advance breast health and breast cancer awareness and promote a greater understanding of the importance of breast cancer detection, but not limited to, outreach to young women of color. The CT Early Detection and Prevention Program (CEDPP) currently provides breast cancer outreach, screening, and diagnostic service and navigation to women 40 years and over for breast health and breast cancer detection, prevention, and treatment.

To expand the program to include outreach to younger women, DPH would need to hire an additional six Community Health Workers at \$50,000 per position (total cost of \$300,000 annually), based at six CT Early Detection and Prevention program's health systems, to conduct prioritized outreach services to women under 40 years of age, specifically low income and women of color. DPH will also need an Outreach Coordinator at \$66,000 in FY 22 and \$69,000 (plus fringe benefits) in FY 23 to coordinate this program expansion.

Section 1 results in a state mandate and a cost to local and regional boards of education associated with requiring schools to conduct exit interviews on students who do not graduate. The cost to local and regional school districts is associated with additional staff time or substitute teacher coverage and will vary by the size of the district and number of students withdrawing annually. Districts with few students withdrawing will incur minimal costs.

Section 15 requires the Office of Policy and Management to study the impacts of the COVID-19 pandemic on the State of Connecticut. It is anticipated that OPM would need the assistance of a consultant to complete this study, which could cost up to \$500,000.

Section 33 makes an unspecified General Fund appropriation to DPH in FY 22 to expand services of existing school-based health centers and establish new ones.

Section 34 appropriates \$6 million in FY 22 to the Department of Mental Health and Addiction Services to expand mobile crisis services.

Section 35 appropriates \$500,000 in FY 22 to DPH for the purpose of providing three-year grants to community health care providers in primary care settings.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to inflation, except where costs are noted as one-time.