

HF261 - 0 - "Community Medical Response"

Chief Author: **Tara Mack**
 Committee: **Health & Human Services Finance**
 Date Completed: **02/06/2015**
 Agency: **Human Services Dept**

State Fiscal Impact	Yes	No
Expenditures	X	
Fee/Departmental Earnings		X
Tax Revenue		X
Information Technology		X
Local Fiscal Impact		
		X

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions shown in the parentheses.

State Cost (Savings)	Biennium			Biennium		
	Dollars in Thousands	FY2015	FY2016	FY2017	FY2018	FY2019
General Fund	-	16	-	-	-	-
Total	-	16	-	-	-	-
Biennial Total			16			-

Full Time Equivalent Positions (FTE)	Biennium			Biennium	
	FY2015	FY2016	FY2017	FY2018	FY2019
General Fund	-	-	-	-	-
Total	-	-	-	-	-

Executive Budget Officer's Comment

I have reviewed this fiscal note for reasonableness of content and consistency with MMB's Fiscal Note policies.

EBO Signature: Ahna Minge Date: 2/6/2015 2:38:26 PM
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State Cost (Savings) Calculation Details

This table shows direct impact to state government only. Local government impact, if any, is discussed in the narrative. Reductions are shown in parentheses.

*Transfers In/Out and Absorbed Costs are only displayed when reported.

State Cost (Savings) = 1-2		Biennium			Biennium	
Dollars in Thousands		FY2015	FY2016	FY2017	FY2018	FY2019
General Fund	-	16	-	-	-	-
Total	-	16	-	-	-	-
Biennial Total			16			-
1 - Expenditures, Absorbed Costs*, Transfers Out*						
General Fund	-	25	-	-	-	-
Total	-	25	-	-	-	-
Biennial Total			25			-
2 - Revenues, Transfers In*						
General Fund	-	9	-	-	-	-
Total	-	9	-	-	-	-
Biennial Total			9			-

Bill Description

This legislation creates a definition in Minnesota Statutes 144E.001 for community medical response emergency technicians (CEMT), specifies their scope of practice, and defines training, education, and certification standards.

The legislation also requires DHS to convene a group a stakeholders to determine potential coverage requirements and payment rates for CEMT services in Minnesota Health Care Programs and report back to the legislature with a list of potential covered services by January 15, 2016.

Should the legislature authorize coverage of CEMT services, this legislation also requires DHS to evaluate the effect of covering these services on the cost of and quality of care in MHCP.

Assumptions

Based on prior experience, managing a stakeholder process to develop coverage requirements and rates for CEMT services within the parameters of this legislation will require contracting with an outside facilitator. The cost of these additional resources is reflected in this estimate.

The evaluation requirements take effect only if the legislature acts to establish CEMT services as a Medical Assistance benefit. This estimate does not reflect the cost of evaluating the cost impacts and quality of CEMT services.

Expenditure and/or Revenue Formula

Short term Professional Technical contract 200 hours @ \$125/hr = \$25,000

Fiscal Tracking Summary (\$000s)						
Fund	BACT	Description	FY2016	FY2017	FY2018	FY2019
GF	13	Health Care Administration	25	0	0	0
GF	REV1	FFP @ 35%	(9)	0	0	0
		Total Net	16	0	0	0

Fiscal Tracking Summary (\$000s)						
		Fiscal Impact				
		Full Time Equivalents	0	0	0	0

Long-Term Fiscal Considerations

None

Local Fiscal Impact

None

References/Sources

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Date: 2/5/2015 5:04:33 PM

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