



**Colorado
Legislative
Council
Staff**

HB16-1034

**FINAL
FISCAL NOTE**

FISCAL IMPACT: State Local Statutory Public Entity Conditional No Fiscal Impact

Drafting Number: LLS 16-0781
Prime Sponsor(s): Rep. Sias
Sen. Garcia

Date: August 25, 2016
Bill Status: Signed into Law
Fiscal Analyst: Clare Pramuk (303-866-2677)

BILL TOPIC: EMERGENCY MEDICAL RESPONDER REGISTRATION PROGRAM

Fiscal Impact Summary	FY 2016-2017	FY 2017-2018
State Revenue		<u>\$16,100</u>
Cash Funds		16,100
State Expenditures	<u>\$36,335</u>	<u>\$87,597</u>
Cash Funds	24,985	57,919
Centrally Appropriated Costs	11,349	29,678
TABOR Impact		\$16,100
FTE Position Change	0.3 FTE	0.9 FTE
Appropriation Required: \$24,985 - Department of Public Health and Environment (FY 2016-17)		
Future Year Impacts: Ongoing state revenue and expenditure increase.		

Summary of Legislation

Under current law, first responders are overseen by the Department of Public Safety (DPS). The bill renames "first responders" as "emergency medical responders" and requires the Colorado Department of Public Health and Environment (CDPHE) to begin a voluntary registration program on July 1, 2017. The CDPHE will create and administer the registration program, including promulgating rules for training programs and continued competency requirements, and will be responsible for investigating complaints and taking disciplinary action if necessary. This registration program replaces the DPS certification program. The bill adds the registration program to the programs that can be funded from the Emergency Medical Services Account in the Highway Users Tax Fund (HUTF).

Emergency medical responders must be registered in order to provide care unless acting as a Good Samaritan. To be registered as an emergency medical responder, at a minimum, a person must be certified through a nationally recognized emergency responder certification organization, and submit to a fingerprint-based criminal history record check. The bill provides for the provisional registration of applicants whose fingerprint-based criminal history record check has not been completed. The CDPHE will develop additional registration requirements and may set fees as part of its rulemaking process.

Background

The Division of Fire Prevention and Control (DFPC) in the DPS administers the First Responder Certification program and processes approximately 110 new certifications and between 200 and 300 renewals annually. Certifications are valid for three years. A first responder is an emergency medical care provider trained to deal with an emergency incident upon first arrival at the scene.

The CDPHE certifies emergency medical services providers, including emergency medical technicians and paramedics, who provide medical treatment and transport to patients within a defined scope of practice. These programs are funded from the Emergency Medical Services Account, which is funded by a \$2 fee assessed when a motor vehicle is registered and from professional certification fees.

Assumptions

The revenue and expenditure estimates in this fiscal note are based on the following assumptions.

- 800 first responders who are currently certified through DPS will register as emergency medical responders beginning on July 1, 2017;
- half of the applicants will be required to submit to the CBI fingerprint-based criminal history record check and half of the applicants will be required to submit to both the CBI and FBI checks; and
- the balance of the Emergency Medical Services Account is sufficient to cover the costs of the program without requiring a fee from applicants or diverting the "off the top" funding of the HUTF.

State Revenue

This bill will result in a net cash fund revenue increase of \$16,100 per year beginning in FY 2017-18. The bill reduces revenue by \$8,600 per year to the Firefighter, First Responder, Hazardous Materials Responder, and Prescribed Fire Training and Certification Fund in the DPS. Revenue will be increased by \$24,700 in FY 2017-18 to the Emergency Medical Services Account from fingerprint-based criminal history record checks. Depending on how often fingerprint-based criminal history record checks are required, this number will be lower in subsequent years.

Fee Impact on Emergency Medical Responders. State law requires legislative service agency review of measures which create or increase any fee collected by a state agency. Table 1 identifies the fee impact of this bill which is explained below.

Table 1. Fee Impact on Emergency Medical Responders						
Type of Fee	Current Fee	Proposed Fee	Number Affected		Total Fee Impact	
			FY 2016-17	FY 2017-18	FY 2016-17	FY 2017-18
Certification Fee - New	\$30	0	0	110	\$0	(\$3,300)
Certification Fee - Renewal	20	0	0	265	0	(5,300)
Background Check - CBI Only	N/A	22.25	N/A	400	0	8,900
Background Check - CBI and FBI	N/A	39.50	N/A	400	0	15,800
TOTAL					\$0	\$16,100

Department of Public Safety. This bill eliminates the certification and renewal fees charged by DPS of approximately \$8,600 per year. It increases state cash fund revenue by \$24,700 in FY 2017-18 collected by the Colorado Bureau of Investigation (CBI) for fingerprint-based criminal history record checks. Of this \$6,900 will be forwarded to the FBI.

TABOR Impact

This bill increases state revenue from fees, which will increase the amount of money required to be refunded under TABOR in FY 2017-18. TABOR refunds are paid out of the General Fund.

State Expenditures

This bill will increase expenditures for the CDPHE by \$36,335 and 0.3 FTE in FY 2016-17 and \$87,597 and 0.9 FTE in FY 2017-18 paid from the Emergency Medical Services Account.

Table 2. Expenditures Under HB16-1034		
Cost Components	FY 2016-17	FY 2017-18
Personal Services	\$18,330	\$48,537
FTE	0.3 FTE	0.9 FTE
Operating Expenses and Capital Outlay Costs	1,655	5,582
Legal Services	3,800	3,800
Stakeholder Process Costs	1,200	0
Centrally Appropriated Costs*	11,350	29,678
TOTAL	\$37,535	\$87,597

* Centrally appropriated costs are not included in the bill's appropriation.

Department of Public Health and Environment. The CDPHE will need to create the registration program contemplated by the bill. This will require conducting a stakeholder process, rulemaking, and hiring of staff. Once the program is up and running, staff will process applications, verify background checks, and investigate complaints. The CDPHE will also need to update its computer system to track emergency medical responder data which can be addressed with agency staff rather than an outside vendor.

Department of Public Safety. The DFPC will have a reduction in workload for administering the certification program for first responders, but an increase in workload to conduct the fingerprint-based criminal history record checks that will be required under the bill for emergency medical responders. This increase in fingerprint-based criminal history record checks can be accomplished within existing appropriations.

Centrally appropriated costs. Pursuant to a Joint Budget Committee policy, certain costs associated with this bill are addressed through the annual budget process and centrally appropriated in the Long Bill or supplemental appropriations bills, rather than in this bill. The centrally appropriated costs subject to this policy are estimated in the fiscal note for informational purposes and summarized in Table 3.

Table 3. Centrally Appropriated Costs Under HB16-1034		
Cost Components	FY 2016-17	FY 2017-18
Employee Insurance (Health, Life, Dental, and Short-term Disability)	\$2,352	\$7,419
Supplemental Employee Retirement Payments	1,569	4,349
Indirect Costs	7,429	17,910
TOTAL	\$11,350	\$29,678

Local Government Impact

Local governments that cover the costs of registration for their Emergency Medical Responders will have increased expenditures due to the costs of testing and background checks required under the bill.

Effective Date

The bill was signed into law by the Governor on June 10, 2016, and it became effective on August 10, 2016.

State Appropriations

Consistent with this fiscal note, for FY 2016-17 the bill appropriates \$24,985 from the Emergency Medical Services Account to the Department of Public Health and Environment and allocates 0.3 FTE.

State and Local Government Contacts

Public Health & Environment

Public Safety