GOVERNMENT OF THE DISTRICT OF COLUMBIA Office of the Chief Financial Officer

Natwar M. Gandhi Chief Financial Officer



MEMORANDUM

TO: The Honorable Linda W. Cropp

Chairman, Council of the District of Columbia

FROM: Natwar M. Gandhi

Chief Financial Officer

DATE: March 4, 2002

SUBJECT: Fiscal Impact Statement: "Injury Reporting Act of 2002"

REFERENCE: Draft Legislation - Bill Number Not Available

Conclusion

Funds are not sufficient in the FY 2002 through FY 2005 budget and financial plan to implement the proposed legislation because the Department of Health (DOH) would require additional staff and administrative resources to implement the bill's requirements. The proposed legislation would result in approximately \$175,000 in FY 2002 and a total of over \$1 million in additional expenditures for the District in FY 2002 through FY 2005. The District of Columbia Metropolitan Police Department (DCMPD), District of Columbia Fire and Emergency Medical Services Department (DCFEMS), and the Office of the Medical Examiner would be able to comply with the bill's reporting requirements without additional resources.

Anti-deficiency laws, 31-USCA § 1341 (2000), prohibit District officers and employees from exceeding agency appropriations in any fiscal year. Should the Department of Health determine that funding is available to absorb the additional costs in FY 2002, then the net impact would be zero for that year. For subsequent years, the additional expenditure need to be included as budgeted expenditures.

Background

The proposed legislation would require all health care facilities as well as DCMPD, DCFEMS, and the Office of the Medical Examiner to provide specified injury data to the District of Columbia Department of Health (DOH) bi-annually. According to the purpose paragraph of the bill, it would establish an injury registry to aggregate injury data for use in analysis and grant applications.

The Director of DOH would be authorized to monitor the completeness and accuracy of the reports provided by visiting the health facilities providing the data. Facilities would be required to provide specified records upon request. The proposed legislation would also require unique identifiers to be removed from the data and would prohibit the data to be used for any purpose other than statistical and public health purposes. Health facilities providing data under this bill would be immune from civil and criminal liability that may arise from reporting the data.

Healthcare facilities that violate the data reporting requirements would be subject to a \$5,000 fine. Any person who misuses personal patient information would be subject to prosecution for a misdemeanor subject to a \$5,000 fine and/or 90 days imprisonment.

Financial Plan Impact

The proposed legislation would result in an unbudgeted expenditure of approximately \$175,000 in FY 2002 and a total of over \$1 million over the FY 2002 through FY 2005 period. The FY 2002 estimate reflects expenditures that would be made in the remaining six months of the fiscal year. The Department of Health (DOH) would require additional, unbudgeted personal services and non-personal service costs to implement the proposed legislation. MPD, DFEMS and the Medical Examiner would be able to provide the required injury information to DOH with existing resources. DOH does not expect to collect significant fine revenue or prosecute a significant number of violators for non-compliance with the data reporting requirements of the proposed legislation. Any offsetting fine revenue or incarceration costs cannot be estimated at this time and are expected to be minimal.

The proposed legislation would require DOH to hire a program manager, epidemiologist, staff assistant, and two data entry clerks in order to establish and manage the injury database that would be established by the bill. The personal service (PS) costs are detailed in the table below and assume fringe benefits equal to 17.94 percent of base salary and 3.3 percent increase for inflation in each year beginning in FY 2003. Personal services costs for FY 2002 are based on the salaries that would be paid in the remaining six months of the fiscal year.

Estimated Personal Services (PS) Costs								
	Base	Benefits					4-Year	
Staff Member	Salary	(17.94%)	(1/2 year)	FY 2003	FY 2004	FY 2005	Total	
Program Manager	\$60,749	\$10,898	\$35,824	\$74,011	\$76,453	\$78,956	\$265,244	
Epidemiologist	\$60,749	\$10,898	\$29,943	\$61,861	\$63,902	\$66,011	\$221,717	
Staff Assistant	\$26,187	\$4,698	\$15,443	\$31,904	\$32,957	\$33,045	\$128,791	
Data Entry (x2)	46,830	\$8,402	\$27,616	\$57,055	\$58,938	\$60,883	\$232,108	
	\$108,825	\$224,831	\$232,250	\$238,895	\$804,801			

The proposed legislation would also require DOH to incur non-personal service (NPS) costs. These costs include supplies, equipment, computers, and technology to manage and maintain the injury database. These costs are detailed in the table below and assume inflationary increases of 2.6 percent beginning in FY 2003. Non-personal services costs for FY 2002 are based on supplies and operations expenditures that would be paid in the remaining months of the fiscal year. The initial computer and technology costs are not adjusted in FY 2002 because they reflect, in part, one-time start-up and equipment costs.

Estimated Non-Personal Services (NPS) Costs							
	FY 2002						
Item	(1/2 year)	FY 2003	FY 2004	FY 2005	4-Year Total		
Supplies and Operations	\$13,180	\$27,045	\$27,748	\$28,470	\$96,443		
Computer/Technology	40,000	19,494	20,001	20,521	\$100,016		
Net Annual Impact	\$66,360	\$46,539	\$47,749	\$48,990	\$196,459		

The proposed legislation would result in an unbudgeted expenditure of approximately \$175,000 in FY 2002, and a total of over \$1 million over the FY 2002 through FY 2005 period.

Estimated Impact to the Financial Plan							
	FY 2002						
Item	(1/2 year)	FY 2003	FY 2004	FY 2005	4-Year Total		
NPS Costs	\$66,360	\$46,539	\$47,749	\$48,990	\$196,459		
PS Costs	\$108,825	\$224,831	\$232,250	\$238,895	\$804,801		
Net Annual Impact	\$175,185	\$271,370	\$279,999	\$287,885	\$1,001,259		