



HOUSE COMMITTEE ON APPROPRIATIONS

FISCAL NOTE

HOUSE BILL NO. 1593

PRINTER'S NO. 2898

PRIME SPONSOR: Otten

COST / (SAVINGS)

FUND	FY 2023/24	FY 2024/25
General Fund	See Fiscal Impact	\$1,900,000 See Fiscal Impact

SUMMARY:

House Bill 1593, Printer's Number 2898 would require the Department of Human Services to track children determined to be at risk of needing services because their parent is at risk of or has been diagnosed with postpartum depression.

ANALYSIS:

This legislation amends Act 212 of 1990, known as the Early Intervention Services System Act, to clarify that eligible infants and toddlers and young children having a disability or developmental delay qualify for early intervention services. Definitions for "Eligible Infants and Toddlers" and "Postpartum Depression" are included in the Act. As defined, "Eligible Infants and Toddlers" includes both infants and toddlers that are experiencing developmental delays or who have a diagnosed physical or mental condition which has a high probability of resulting in developmental delay, and "Postpartum Depression" includes a parent that is experiencing moderate to severe depression up to a year after that parent has given birth.

The Department of Human Services is also required to include in the identification, assessment, and tracking of certain at-risk population groups children born to a parent who are at high risk for or has been diagnosed with postpartum depression if those children are referred by a physician, health care provider, or parent.

The legislation will take effect in 60 days.

FISCAL IMPACT:

Assuming House Bill 1593 is enacted by the end of April 2023, implementation of this legislation by the Department of Human Services would likely occur at the end of June 2023. The number of children that would be identified, assessed, or tracked in June is likely to be nominal, and the department could potentially cover any increased cost within their current appropriation.

For 2024/25, the Department of Human Services expects an annual increase of 925 children identified, assessed, and tracked for early intervention services. The annual estimated cost of these services is \$1,780 per child, resulting in a total increase of \$1.6 million. The department estimates that 527 children, or 57 percent, will qualify for the Early Periodic Screening, Diagnosis, and Treatment (EPSDT) program, and the federal share of the cost for the children that qualify for the EPSDT program is approximately 55 percent or \$500,000.

Out of the 925 children tracked, the department projects 157 children will require early intervention services. The department estimates the cost of early intervention services to be \$614 per child per month, or \$7,368 per child annually, for an increased cost of \$1.2 million. The department estimates that 89 children, or 57 percent, will qualify for the EPSDT program, and the federal share is approximately 55 percent or \$400,000.

Out of the 157 children the Department of Human Services estimates will need early intervention services, a small number of children may require an Individualized Education Plan (IEP). At the time the child's IEP is established, the school entity would provide the IEP services. The estimated number of children that will require an IEP cannot be determined at this time. Therefore, any fiscal impact for the Department of Education as a result of this legislation is indeterminate.

The combined increased cost to early intervention appropriation from adding children born to a parent that is at high risk for or has been diagnosed with postpartum depression to the list of at-risk population groups for early intervention services totals \$2.8 million. Of this amount, the estimated increase to federal funds totals \$900,000, resulting in a total fiscal impact of an estimated \$1.9 million to the General Fund.

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House Appropriations Committee (D)

**DATE:** April 10, 2024

*Estimates are calculated using the best information available. Actual costs and revenue impact incurred may vary from estimates.*