DepartmentofPlanningandBudget 2002FiscalImpactStatement

1.	BillNumber	HB77			
	HouseofOrigin	Introduced Substitute Engrossed			
	SecondHouse	☐ InComm ittee ☐ Substitute ☐ Enrolled			
2.	Patron	Hamilton			
3.Committee		Appropriations			
1.	Title	VirginiaHealthCareTrustFund.			

5. Summary/Purpose:

ThisbillestablishestheVirginiaHealthCareT rustFundandrequiresthat:

- InterestearnedonanymoneyintheFundwillremaininthefundandbecreditedtoit.
- The Fundbenongeneral, nonreverting, and reappropriated for expenditure in the succeeding year.
- Allofthefederalmatchingfundsreceived fromone -timeMedicaidintergovernmental transfersbedepositedintotheFundtobeusedforhealthcarepurposes.

6. FiscalImpactEstimatesare:

- 6a. ExpenditureImpact:None
- 6b. RevenueImpact:

FiscalYear	Dollars	Positions	Fund
2001-02	\$0	0.0	GF
2002-03	\$0	0.0	GF
2003-04	\$(0.0	GF

- 7. Budgetamendmentnecessary: Seebelow.
- 8. Fiscalimplications: Thisbillappearstoattempttoaddressconcernsexpressed by the Centers for Medicaid Services that the federal funds resulting from the Medicaid intergovernmental transfers should be used by states for health -related issues. Some states using similar transferse armarked their funds for health concerns, but were not mandated to do so. The approach proposed in Governor Gilmore's 2002 budget bill permits the funds to be transferred into the general fund to be used at the discretion of the General Assembly in the appropriations process.

Theloopholepermitting Virginiaandtheotherstatestodrawdownfederal Medicaid matching funds is essent ially eliminated after the current year. Accordingly, unless an emergency clause is added to the proposed bill, it will probably have no effect since it is unlikely that Virginia will again benefit from similar one - time intergovernment altransfers in the future. Another way to place limits on the use of the funds would be to adopt language in the FY 2002 "Caboose" Budget Bill to effect the change.

Ifbudgetpolicyisestablishedtoremovetheintergovernmentaltransfersamountof\$259 millionfromthege neralfundandsettingitasideasaspecialfundtobeusedonlyforhealth

relatedneeds, apotential hole could be created in the general fund budget in FY2002 of up to \$259 million plus any interest that may accrue. This action would force the reduct ion of appropriations in other areas of the budget to make up for the resulting shortfall in FY2002.

Aspreviouslystated,the\$259millionthatisbeingaddressedbythisbillisbynatureone -time funding.MostoftheneedswithintheHealthandHuman ResourcesSecretariatareongoing. ItwouldbeshortsightedtoapplythisfundingtoprogramsinFY2002thatwouldrequire continuedorincreasedfundinginthe2002 -2004biennium.Depositingthe\$259millioninto thestate'sgeneralfundallowsmoref lexibilityinaddressingthoseone -timeneedsinFY 2002.

9. Specificagencyorpoliticalsubdivisionsaffected: Stategovernmentingeneral

10. Technicalamendmentnecessary: No

11. Othercomments: None

Date: 01/14/02/sas

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cc:SecretaryofFinance

Secretary of Health and Human Resources