

**Department of Planning and Budget
2005 Fiscal Impact Statement**

1. Bill Number HB2036

House of Origin	<input checked="" type="checkbox"/> Introduced	<input type="checkbox"/> Substitute	<input type="checkbox"/> Engrossed
Second House	<input type="checkbox"/> In Committee	<input type="checkbox"/> Substitute	<input type="checkbox"/> Enrolled

2. Patron: Hamilton

3. Committee: Health, Welfare and Institutions

4. Title: Long-term care services for older adults

5. Summary/Purpose: The bill sets out state policy with regard to long-term care services for older adults. The policy sets out that the Commonwealth shall ensure: 1) a balanced range of various programs to deliver services; 2) a uniform system of determining need based on a set criteria; 3) service delivery is consistent with the needs and preferences of those served; 4) a unified long-term care budget among state agencies that provide such services; and 5) a focus on maximizing self-care and independent living.

6. No Fiscal Impact: SEE ITEM 8.

7. Budget amendment necessary: No.

8. Fiscal implications: The bill has no direct fiscal impact on state agencies as it only provides broad policy guidance for the Commonwealth with regard to the provision of long-term care services. It does not provide any specific requirements on state agencies that would have a direct fiscal impact. However, the bill does provide for a policy of the Commonwealth of having a unified, long-term care budget developed collaboratively among state agencies. However, with no requirements about how it is to be developed or implemented it is not possible to determine if there would be any fiscal impact on the state. Staff resources would have to be provided to complete such a task, but it is not known to what extent without knowing much more about developing a unified long-term care budget.

9. Specific agency or political subdivisions affected: Department for the Aging, Department of Medical Assistance Services, Department of Social Services, Department of Health, Department of Rehabilitative Services, and the Department of Veterans Affairs.

10. Technical amendment necessary: No.

11. Other comments: None.

Date: 1/18/05 / mst

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cc: Secretary of Health and Human Resources