Wisconsin Department of Administration Division of Executive Budget and Finance DOA-2048 (R07/2000)

Fiscal Estimate - 2001 Session

	Original		Updated		Correcte	d		Supple	mental
LRB	Number	01-2335/2		Intro	duction	Number	ΑI	B-457	
Subjec Mandat		e for health care	workers						
Fiscal I	Effect								
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Fiscal Estimate Narratives DHFS 9/11/01

LRB Number 01-	2335/2	Introduction Number	AB-457	Estimate Type	Original
Subject					
Mandatory overtim	e for health care v	vorkers			

Assumptions Used in Arriving at Fiscal Estimate

This bill prohibits a health care facility from requiring a direct care employe to work more than 40 hours per week without the employe's consent. Currently direct care staff, such as nurses and residential care treatment staff, can be required to work overtime when other staff is not available.

The Department operates five health care facilities: Mendota Mental Health Institute, Winnebago Mental Health Institute, Southern Wisconsin Center, Northern Wisconsin Center and Central Wisconsin Center. The Mental Health Institutes (MHIs) are funded by GPR and PR, with Medical Assistance contributing approximately 50% of the revenue for program revenue expenses. The remaining 50% is funded by charges to counties and other third-party payers. The Centers for the Developmentally Disabled are funded by program revenue. The Medical Assistance program is the primary source of revenue for the Centers.

Currently the state mandates that state facilities must budget a 3% vacancy rate annually. Facilities' salary budgets are reduced by 3% to reflect this requirement. In order to ensure that no mandatory overtime is required, it is assumed that this turnover savings would be eliminated, because positions that provide direct care to patients would have to be filled at all times. The cost of ending turnover reductions at the MHIs and Centers is estimated at \$1,493,000 GPR, \$2,215,000 PR and \$1,160,100 FED annually.

Even if the vacancy rate is reduced to 0%, additional staff would be required to provide coverage for workers who are sick, on vacation, maternity leave, etc. Although each facility has an overtime budget, current overtime costs generally exceed this budget. It is assumed that additional staff would have to be hired to make sure that no overtime is forced. The amount that facilities currently expend on overtime would be converted to salary to fund new positions. Funding for the fringe costs of these positions would also have to be added.

It is estimated that it would require \$1,363,700 GPR and 17.35 GPR FTE, \$2,531,400 PR and 118.26 PR FTE and \$1,421,300 FED annually to provide sufficient staff to ensure that no mandatory overtime is required at the MHIs or Centers, including the Medical Assistance costs of supporting the positions at the Centers and MHIs. The total cost of this provision to the state would be \$2,856,700 GPR and 17.35 GPR FTE, \$4,746,400 PR and 118.26 PR FTE and \$2,581,400 FED.

At health care facilities, the number of direct care positions is inflated by .65, referred to as the post-shift factor, to provide extra positions to cover care that must be provided on each shift, even when employes are on vacation or using sick leave. However, since these absences do not occur evenly throughout the year, it is likely that facilities would still incur overtime costs, even when overtime is no longer mandatory, but it is not possible to estimate what these costs would be.

It is estimated that the increased cost to the counties will be \$127,500. This increase would result from the increased cost of care to those patients at the Mental Health Institutes for which the counties are responsible.

Long-Range Fiscal Implications

Fiscal Estimate Worksheet - 2001 Session

Detailed Estimate of Annual Fiscal Effect

Original Updated	d Corrected	Supplemental		
LRB Number 01-2335/2	Introduction Number	AB-457		
Subject				
Mandatory overtime for health care worker	S			
I. One-time Costs or Revenue Impacts for annualized fiscal effect):	or State and/or Local Government (d	o not include in		
II. Annualized Costs:	Annualized Fiscal	Impact on funds from:		
	Increased Costs	Decreased Costs		
A. State Costs by Category				
State Operations - Salaries and Fringes	\$5,821,300			
(FTE Position Changes)	(135.6 FTE)			
State Operations - Other Costs		-		
I ocal Assistance				
Aids to Individuals or Organizations	4,363,200			
TOTAL State Costs by Category	\$10,184,500	\$		
B. State Costs by Source of Funds				
GPR	2,856,700			
FED	2,581,400			
PRO/PRS	4,746,400			
SEG/SEG-S				
III. State Revenues - Complete this only (e.g., tax increase, decrease in license for	when proposal will increase or decr ee, ets.)	ease state revenues		
	Increased Rev	Decreased Rev		
GPR Taxes	\$	\$		
GPR Earned				
ΓΕD				
PRO/PRS				
SEG/SEG-S				
TOTAL State Revenues	\$	\$		
NET ANI	NUALIZED FISCAL IMPACT			
	<u>State</u>	<u>Local</u>		
NET CHANGE IN COSTS	\$10,184,500	\$		
NET CHANGE IN REVENUE	\$	\$		
Agency/Prepared By	Authorized Signature	Date		
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