OFFICE OF FISCAL ANALYSIS

Legislative Office Building, Room 5200 Hartford, CT 06106 ◊ (860) 240-0200 http://www.cga.ct.gov/ofa

sHB-6987 AN ACT CONCERNING CLOSURES AI

AN ACT CONCERNING CLOSURES AND EVACUATIONS OF RESIDENTIAL CARE HOMES AND NURSING HOMES.

OFA Fiscal Note

State Impact:

| Agency Affected | Fund-Effect | FY 26 \$ | FY 27 \$ |
|----------------------------|-------------|----------|----------|
| Public Health, Dept. | GF - Cost | 171,900 | 105,800 |
| State Comptroller - Fringe | GF - Cost | 34,800 | 43,100 |
| Benefits ¹ | | | |

Note: GF=General Fund

Municipal Impact: None

Explanation

The bill, which addresses various issues related to nursing homes and residential care homes (RCH), results in a cost to the Department of Public Health (DPH) of \$171,900 in FY 26 and \$105,800 in FY 27 (and annually thereafter), and an estimated cost to the Office of State Comptroller for associated fringe benefits of \$34,800 in FY 26 and \$43,100 in FY 27 (and annually thereafter).

Sections 1 and 2, which require nursing homes and residential care homes (RCH) to consider a resident's proximity to family members and other known support networks when assisting with a transfer or discharge, does not result in a state fiscal impact.

Section 3, which establishes a working group to examine RCH evacuation procedures and participation in a mutual aid digital

¹The fringe benefit costs for most state employees are budgeted centrally in accounts administered by the Comptroller. The estimated active employee fringe benefit cost associated with most personnel changes is 40.71% of payroll in FY 26.

platform, does not result in a fiscal impact to the state. Workload adjustments can be managed within the current staffing levels of the specified state agencies.

Section 4 requires nursing homes and RCHs to maintain insurance coverage for the loss or damage of a resident's personal property in the result of an evacuation or closure. This results in no fiscal impact to the state.

Section 5 requires DPH to develop and maintain a database that tracks real-time bed availability in nursing homes and RCHs to facilitate resident placements. An existing DPH data submission platform can be adapted to support this requirement through one-time contracted IT consultant services, resulting in an \$86,400 cost in FY 26.² It is anticipated that DPH will begin its systems development work in September 2025³ to meet the bill's operation deadline of January 1, 2026.

Further costs to DPH reflect the need for two new part-time (0.5 FTE) positions, at an annualized salary cost of \$105,800: (1) an IT Analyst 3 to maintain the system, at a part-time annual salary of \$64,800; and (2) a Health Program Associate in the Facility Licensing and Investigations Section to monitor facility reporting, at a part-time annual salary of \$41,000. Annualized fringe benefits costs for these positions are \$26,400, and \$16,700 respectively.⁴

Section 6 modifies criteria mandating nursing homes to disregard their waiting lists to admit an applicant, which has no state fiscal impact.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to inflation.

² IT consultant services estimate assumes a necessary 40 hours a week at \$90 per hour for 24 weeks.

³ FY 26 salary costs reflect 21 pay periods rather than a full fiscal year.

⁴ Expected FY 26 total salary costs are projected to be approximately \$85,500 with \$34,800 in associated fringe benefits.