Office of Legal Counsel EXS-282 (03/07)

## ADMINISTRATIVE RULES - FISCAL ESTIMATE

1. Fiscal Estimate Ver				
☐ Original ☐ Up	dated   Corrected  Chapter Title and Number			
	pased residential care facilities; HFS 88 Adult	Family Hamas HES 80 Decidential care		
	HFS 132 Nursing homes; and HFS 134 Facil			
•				
3. Subject				
	ties to provide information necessary for the I relating to involuntary administration of psych			
4. State Fiscal Effect:				
☐ No Fiscal Effect	☐ Increase Existing Revenues			
	☐ Decrease Existing Revenues			
		☐ Decrease Costs		
5. Fund Sources Affected:		6. Affected Ch. 20, Stats. Appropriations:		
☐ GPR ☐ FED	☐ PRO ☐ PRS ☐ SEG ☐ SEG-S	20.435 (6) (jm)		
7. Local Government	Fiscal Effect:			
☐ No Fiscal Effect	☐ Increase Revenues	☐ Increase Costs		
	☐ Decrease Revenues	☐ Decrease Costs		
8. Local Government U	Inits Affected:			
☐ Towns ☐ Villages	☐ Cities ☐ Counties ☐ School Districts	☐ WTCS Districts ☐ Others:		
9. Private Sector Fisc	al Effect (small businesses only):			
☐ No Fiscal Effect	☐ Increase Revenues			
<b>~</b>	☐ Decrease Revenues	☐ Yes ☒ No May have significant		
	☐ Yes ☐ No May have significant	economic impact on a substantial number of		
	economic impact on a substantial number of small businesses	small businesses  Decrease Costs		
10.Types of Small Busir	nesses Affected:			
		sidential core enertment complexes		
Community based residential care facilities, adult family homes, residential care apartment complexes, nursing homes, and facilities for the developmentally disabled				
11. Fiscal Analysis Su				

State and county government operated, and privately owned nursing homes; facilities for the developmentally disabled; community-based residential facilities; adult family homes; and residential care apartment complexes are required to comply with s. 55.14, Stats., relating to involuntary administration of psychotropic medication to clients. Section 50.02 (2) (ad), Stats., requires the Department to promulgate rules that require these facilities to provide, to the Department, information necessary to determine the facilities' compliance with s. 55.14, Stats.

The proposed rules would require facilities to report the required information on forms provided by the Department at intervals determined by the Department. This would require the Department to review the information submitted by the facilities and may require the Department to conduct follow-up investigations to

determine compliance. Any costs associated with these increased responsibilities would be minimal and can be absorbed within the existing budget.

The Department estimates that it will take facilities an additional 15 minutes per client who receives involuntary administration of psychotropic medications, to provide the additional information; less if the facility does not administer psychotropic medications. Based on a 15 minute assessment per client, the direct salary and fringe cost of compliance should be about \$8 annually per client who involuntarily receives the medication. The time required to complete the reports will increase incrementally with the number of individuals who are administered psychotropic medications involuntarily. The number of clients who may be subject to involuntary administration of psychotropic medication under s. 55.14, Stats., is unknown. All facilities are assumed to have adequate administrative or nursing personnel to comply with the proposed rule; there would not be a need to hire additional staff. The costs of compliance with the proposed rules for any facility should not increase operating expenditures, or decrease revenues by more than the 2006 consumer price index of 3.2 percent.

The costs identified above result from the creation of s. 50.02 (2) (ad) in 2005 Act 264, rather than this proposed rule.

12. Long-Range Fiscal Implications				
None known.				
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Signature – DHFS Secretary or Designee	Telephone Number	Date		