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Final Fiscal Note

Drafting Number:	LLS 22-0094	Date:	June 27, 2022
Prime Sponsors:	Sen. Danielson; Pettersen Rep. Duran; Titone	Bill Status:	Postponed Indefinitely
		Fiscal Analyst:	Annie Scott 303-866-5851 Annie.Scott@state.co.us

Bill Topic:	COLORADO GERIATRIC PROVIDER PIPELINE PROGRAM
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Summary of Fiscal Impact:	<input type="checkbox"/> State Revenue	<input type="checkbox"/> TABOR Refund
	<input checked="" type="checkbox"/> State Expenditure	<input type="checkbox"/> Local Government
	<input type="checkbox"/> State Transfer	<input type="checkbox"/> Statutory Public Entity

The bill would have created the Colorado Multidisciplinary Geriatric Provider Pipeline Program and the Geriatric Training Executive Advisory Committee to coordinate and expand geriatric training opportunities for clinical graduate students at the University of Colorado Anschutz Medical Campus. The bill would have increased state expenditures beginning in FY 2023-24.

Appropriation Summary:	No appropriation would have been required.
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Fiscal Note Status:	The fiscal note reflects the introduced bill. This bill was not enacted into law; therefore, the impacts identified in this analysis do not take effect.
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Table 1
State Fiscal Impacts Under SB 22-189

		Budget Year FY 2022-23	Out Year FY 2023-24
Revenue		-	-
Expenditures	General Fund	-	\$1,176,637
Transfers		-	-
Other Budget Impacts	General Fund Reserve	-	\$176,496

Summary of Legislation

Beginning in FY 2023-24, the bill creates the Colorado Multidisciplinary Geriatric Provider Pipeline Program (program) and the Geriatric Training Executive Advisory Committee (advisory committee).

Colorado Multidisciplinary Geriatric Provider Pipeline Program. The program is created in the University of Colorado Anschutz Medical Campus to coordinate and expand hands-on, geriatric-focused training opportunities for clinical graduate students studying medicine, pharmacy, dentistry, nursing, psychology, and social work at participating institutions of higher education.

The program is required to gather data including:

- the number of clinical graduate students from each participating institution;
- the number of clinical graduate students who graduate from the program; and
- post-graduation job placement information.

Geriatric Training Executive Advisory Committee. The advisory committee is created to ensure that training in the program is consistent and collaborative across the university departments, participating institutions of higher education, and medical fields. It consists of the appointed program chair and representatives from the Schools of Medicine, Pharmacy, and Dental Medicine, a nursing program, the Department of Psychology, and a social work program.

The advisory committee is required to select two clinical graduate students per year from each of six fields of study to participate in the program's geriatric curriculum. The advisory committee, in collaboration with the participating institutions of higher education, will place clinical graduate students in geriatric clinical settings for hands-on experiential training. The committee is also required to:

- appoint a program chair;
- set the program's standards for training;
- collaborate with participating institutions of higher education to select clinical graduate students;
- analyze the required data;
- collaborate to improve program outcomes; and
- coordinate with program graduates around the training of program participants.

By July 1, 2024, and annually thereafter, program data and recommendations must be submitted to the legislature.

State Expenditures

The bill increases state expenditures in the CU School of Medicine by \$1,176,637 in FY 2023-24 from the General Fund. Expenditures are shown in Table 2 and detailed below.

Table 2
Expenditures Under SB 22-189

	FY 2022-23	FY 2023-24
CU School of Medicine		
Personal Services	-	\$505,620
Program Costs	-	\$210,800
Tuition Costs	-	\$350,000
Operating Expenses	-	\$3,300
Indirect Costs	-	\$106,917
Total Cost	-	\$1,176,637
Total FTE	-	2.6 FTE

CU School of Medicine. The CU School of Medicine requires staff and programmatic funding to support the program beginning in FY 2023-24.

- **Staff.** The CU School of Medicine requires funding for an assumed 2.6 FTE to train program participants. This includes 0.3 FTE from each of the schools of dental medicine, pharmacy, medicine, nursing, college of arts, letters and sciences, and public affairs, as well as 0.3 FTE to provide administrative assistance to the advisory committee and 0.3 FTE to evaluate program faculty. Costs also include required benefit costs and operating expenses.
- **Program costs.** Beginning in FY 2023-24, the CU School of Medicine will require funding for curriculum development, specialty staffing, in-service training, program evaluation tools, payments to training sites and website maintenance. These costs are estimated at \$210,800.
- **Tuition.** Beginning in FY 2023-24, an estimated \$350,000 in funding is required to cover a portion of tuition for the clinical graduate students in the program.

Other Budget Impacts

General Fund reserve. Under current law, an amount equal to 15 percent of General Fund appropriations must be set aside in the General Fund statutory reserve beginning in FY 2022-23. Based on this fiscal note, the bill is expected to increase the amount of General Fund held in reserve by the amount shown in Table 1, which will decrease the amount of General Fund available for other purposes.

Effective Date

The bill was deemed postponed indefinitely by the Senate Appropriations Committee on May 10, 2022.

State and Local Government Contacts

Higher Education

Information Technology