

OFFICE OF FISCAL ANALYSIS

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

SB-1067

AN ACT CONCERNING ADEQUATE AND SAFE HEALTH CARE STAFFING.

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 24 \$	FY 25 \$
UConn Health Ctr.; Mental Health & Addiction Serv., Dept.; Children & Families, Dept.	GF - Cost	See Below	Potential Significant

Note: GF=General Fund

Municipal Impact: None

Explanation

The bill, which establishes requirements regarding nurse staffing and mandatory overtime in hospitals, results in a potentially significant fiscal impact to UConn Health Center (UCHC) and the Departments of Mental Health and Addiction Services (DMHAS) and Children and Families (DCF), as described below.

Mandatory overtime as regular practice/prohibition. The bill prohibits hospitals from using mandatory overtime as a regular practice. These provisions will have a significant impact to the state as mandatory overtime is used with some frequency to staff John Dempsey Hospital, Whiting Forensic Hospital and Albert J. Solnit Children's Center, when voluntary overtime is insufficient to meet staffing needs. The hospitals currently have numerous nurse vacancies they are attempting to fill.

As the bill does allow for the continuation of mandatory overtime

until existing collective bargaining agreements expire, the cost is anticipated to be incurred closer to that time in preparation for meeting the bill's requirements. The expiration date for the relevant state contracts is June 30, 2025. The current cost to hire 75 new nurses to meet the bill's provisions regarding overtime at John Dempsey Hospital is estimated at approximately \$10.4 million annually.

Hospital Staffing Ratios. The bill requires specific hospital patient to staff ratios as of January 1, 2028. Based on current data, UCHC would incur annual costs totaling approximately \$11.5 million to meet the staffing ratios for registered nurses (RNs) and aides. The actual costs to the state, including those associated with DMHAS and DCF, will depend on the staffing levels at the time the bill's provisions go into effect.

RN Refusal to Participate. The bill allows an RN to object or refuse to participate in any activity, policy, practice, or task the hospital assigns, in certain circumstances. These provisions are effective October 1, 2023. This could result in increased costs to the extent this leads to additional overtime requirements or hospital liability costs.

To the extent that the bill's provisions cannot be met due to staffing shortages, the state could experience offsetting savings as well as decreased patient revenues associated with serving fewer patients in order to accommodate the overtime and staffing ratio requirements.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to hospital staffing level requirements and associated salaries.