

**HOUSE OF REPRESENTATIVES
LOCAL BILL ECONOMIC IMPACT STATEMENT FORM**

Read all instructions carefully.

House local bill policy prohibits a local bill from being considered by a committee or subcommittee without an Economic Impact Statement. This form must be prepared by an individual who is qualified to establish fiscal data and impacts and has personal knowledge of the information given (for example, a chief financial officer of a particular local government) and include information for the first two full fiscal years after the effective date of the local bill. Please file this completed form with the Clerk of the House as soon as possible after a bill is filed. Additional pages may be attached as necessary.

BILL #: 739
SPONSOR(S): Fine
RELATING TO: North Brevard Hospital District
(Indicate Area Affected (City, County or Special District) and Subject)

Check if this is a revised Economic Impact Statement

I. REVENUES:

These figures are new revenues that would not exist but for the passage of the bill. The term "revenue" contemplates, but is not limited to, taxes, fees, and special assessments. For example, license plate fees may be a revenue source. If the bill will add or remove property or individuals from the tax base, include this information as well.

	<u>First FY</u>	<u>Second FY</u>
Revenue decrease due to bill:	\$ <u>0.00</u>	\$ <u>0.00</u>
Revenue increase due to bill:	\$ <u>0.00</u>	\$ <u>0.00</u>

II. COST:

Include all costs, both direct and indirect, including start-up costs. If the bill repeals the existence of a certain entity, state the related costs, such as satisfying liabilities and distributing assets.

Expenditures for Implementation, Administration, and Enforcement:

	<u>First FY</u>	<u>Second FY</u>
	\$ <u>0.00</u>	\$ <u>0.00</u>

Please include explanations and calculations regarding how each dollar figure was determined in reaching total cost.

If the hospital is not sold to new private sector company, the hospital district will continue to operate under current conditions.

If the hospital is sold to a private sector company, that company would assume the operation of

the hospital.

III. FUNDING SOURCE(S):

State the specific sources from which funding will be received, for example, license plate fees, state funds, borrowed funds, or special assessments.

If certain funding changes are anticipated to occur beyond the following two fiscal years, explain the change and at what rate taxes, fees, or assessments will be collected in those years.

	<u>First FY</u>	<u>Second FY</u>
Local:	\$ <u>0.00</u>	\$ <u>0.00</u>
State:	\$ <u>0.00</u>	\$ <u>0.00</u>
Federal:	\$ <u>0.00</u>	\$ <u>0.00</u>

IV. ECONOMIC IMPACT:

Potential Advantages:

Include all possible outcomes linked to the bill, such as increased efficiencies, and positive or negative changes to tax revenue. If an act is being repealed or an entity dissolved, include the increased or decreased efficiencies caused thereby. Include specific figures for anticipated job growth.

1. Advantages to Individuals: The taxpayer will no long be responsible for p
potential taxation.
2. Advantages to Businesses: If a private sector company purchases the
hospital, it will have done so believing it would
turn a profit and operate it well.
3. Advantages to Government: One less entity to operate and reduces risk to
taxpayers.

Potential Disadvantages:

Include all possible outcomes linked to the bill, such as inefficiencies, shortages, or market changes anticipated. Include reduced business opportunities, such as reduced access to capital or training. State any decreases in tax revenue as a result of the bill.

1. Disadvantages to Individuals: None.
2. Disadvantages to Businesses: None.

3. Disadvantages to Government:

None.

V. DESCRIBE THE POTENTIAL IMPACT OF THE BILL ON PRESENT GOVERNMENTAL SERVICES:

The impact should be minimal. If no sale is made, current services would continue. If sold to a private sector company, that company would only purchase the hospital if they believe they could make a profit and provide quality care that would bring in more patients and provide quality that would attract better doctors and medical staff.

VI. SPECIFIC DATA USED IN REACHING ESTIMATES:

Include the type(s) and source(s) of data used, percentages, dollar figures, all assumptions made, history of the industry/issue affected by the bill, and any audits. The independent entity that would review the existing hospital will be the group that will determine the financial feasibility of such a sale.

VII. CERTIFICATION BY PREPARER

I hereby certify I am qualified to establish fiscal data and impacts and have personal knowledge of the information given. I have reviewed all available financial information applicable to the substance of the above-stated local bill and confirm the foregoing

Economic Impact Statement is a true and accurate estimate of the economic impact of the bill.

PREPARED BY:


[Must be signed by Preparer]

Print preparer's name:

Lynn Mallak

January 5, 2024

Date

TITLE (such as Executive Director, Actuary, Chief Accountant, or Budget Director):

CPA

REPRESENTING:

PHONE:

321-536-5943

E-MAIL ADDRESS:

MallakL@cfl.vr.com