

## Calculating Anticipated Costs for SB 596

### Background

Senate Bill (SB) 596 would require hospitals to maintain an on-call list of nurses who are scheduled to be on call for the unit and shift where an alleged violation of the nurse-to-patient ratio occurred. The bill also allows a hospital to use nurses “who are assigned to a regularly scheduled float pool shift” to cover any shortages.

It is important that Gov. Gavin Newsom understand the financial impact SB 596 will have on hospitals, which are already facing significant cuts and financial hardships. CHA’s template letter includes a place where you may state your hospital’s anticipated annual staffing costs if SB 596 is signed into law.

### Formula

One formula that you may consider when calculating the anticipated additional costs is below.

*Note: If you already schedule on-call nurses or regularly schedule nurses in a float pool for any of the specified units, do not include them in your calculation.*

1. Identify which of the 13 units specified in the bill apply to your hospital.

*As used in H&S Code section 1276.4(a), “hospital unit” means a:*

- *Burn unit*
- *Critical care unit*
- *Emergency department*
- *General medical care unit*
- *Labor and delivery room*
- *Operating room*
- *Pediatric unit*
- *Post-anesthesia service area*
- *Specialty care unit*
- *Step-down/intermediate care unit*
- *Subacute care unit*
- *Telemetry unit*
- *Transitional inpatient care unit.*

2. For each specified unit available at your hospital, account for two nurses per day (this is based on two 12-hour shifts in a 24-hour period).
3. Calculate the total impact by multiplying the number of nurses from Step 2 by either the minimum wage rate that applies to your facility or the average regular rate your hospitals pay its nurses.
4. Multiply this number by 365 days to calculate the annual cost increase.