

Fiscal Estimate Narratives

ALTC 11/1/2005

| | | |
|--|-----------------------------------|-------------------------------|
| LRB Number 05-2576/2 | Introduction Number SB-388 | Estimate Type Original |
| Description Establishing a publicly financed health care system for residents of this state, creating the Department of Health Planning and Finance, Health Policy Board, and regional consumer health councils, granting rule-making authority, and making appropriations | | |

Assumptions Used in Arriving at Fiscal Estimate

SB 388 will require regular meetings between the secretary of health planning and finance and the secretary of administration to "formulate decisions on issues concerning the health plan and DHPF and how the scope and functions of DHPF affect the scope and functions of" the Board on Aging and Long Term Care. While there does not appear to be a requirement to involve the executive and administrative staff of BOALTC in these meetings, it is reasonable to assume that the agency's input would be sought.

Aside from the time and research required to provide timely and accurate input into this process, there no significant requirement in SB 388 that would impact the agency's budget.

It is not possible for this agency to determine whether or not there will be any impact on local government costs as a result of passage of this bill.

Long-Range Fiscal Implications

Fiscal Estimate Worksheet - 2005 Session

Detailed Estimate of Annual Fiscal Effect

Original
 Updated
 Corrected
 Supplemental

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|--|---|--|-----------------|
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| Description Establishing a publicly financed health care system for residents of this state, creating the Department of Health Planning and Finance, Health Policy Board, and regional consumer health councils, granting rule-making authority, and making appropriations | | | |
| I. One-time Costs or Revenue Impacts for State and/or Local Government (do not include in annualized fiscal effect): | | | |
| II. Annualized Costs: | | Annualized Fiscal Impact on funds from: | |
| | | Increased Costs | Decreased Costs |
| A. State Costs by Category | | | |
| | State Operations - Salaries and Fringes | \$0 | 0 |
| | (FTE Position Changes) | (0.0 FTE) | (0.0 FTE) |
| | State Operations - Other Costs | 0 | 0 |
| | Local Assistance | 0 | 0 |
| | Aids to Individuals or Organizations | 0 | 0 |
| | TOTAL State Costs by Category | \$0 | \$0 |
| B. State Costs by Source of Funds | | | |
| | GPR | 0 | 0 |
| | FED | 0 | 0 |
| | PRO/PRS | 0 | 0 |
| | SEG/SEG-S | 0 | 0 |
| III. State Revenues - Complete this only when proposal will increase or decrease state revenues (e.g., tax increase, decrease in license fee, etc.) | | | |
| | | Increased Rev | Decreased Rev |
| | GPR Taxes | \$0 | \$0 |
| | GPR Earned | 0 | 0 |
| | FED | 0 | 0 |
| | PRO/PRS | 0 | 0 |
| | SEG/SEG-S | 0 | 0 |
| | TOTAL State Revenues | \$0 | \$0 |
| NET ANNUALIZED FISCAL IMPACT | | | |
| | | State | Local |
| | NET CHANGE IN COSTS | \$0 | \$0 |
| | NET CHANGE IN REVENUE | \$0 | \$0 |
| Agency/Prepared By | | Authorized Signature | Date |

