PREPARED BY: DATE PREPARED: PHONE: Mikayla Findlay December 26, 2023 402-471-0062

LB 430

Revision: 02

FISCAL NOTE

Updated for the 2024 Legislative Session

LEGISLATIVE FISCAL ANALYST ESTIMATE

ESTIMATE OF FISCAL IMPACT – STATE AGENCIES (See narrative for political subdivision estimates)						
	FY 2024-25		FY 2025-26			
	EXPENDITURES	REVENUE	EXPENDITURES	REVENUE		
GENERAL FUNDS						
CASH FUNDS						
FEDERAL FUNDS						
OTHER FUNDS						
TOTAL FUNDS						

Any Fiscal Notes received from state agencies and political subdivisions are attached following the Legislative Fiscal Analyst Estimate.

This bill excludes physical therapy, occupational therapy, and speech-language pathology services from the multiple procedure payment reduction policy under Medicaid or by a private insurer. No fiscal impact to the Department of Health and Human Services.

The Department of Administrative Services (DAS) indicates that State of Nebraska Medical Plans follow the industry standard of paying the first claim at 100% and subsequent claims for the same visit at 50%. This bill would require the subsequent claims to be paid at 100% thus increasing service costs. There is an indeterminable fiscal impact to DAS.

ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY & POLT. SUB. RESPONSE						
LB:	LB: 430 AM: AGENCY/POLT. SUB: Nebraska Department of Administrative Services					
REVI	EWED BY:	Ann Linneman	DATE:	12-13-2023	PHONE: (402) 471-4180	
COMMENTS: The Department of Administrative Services' analysis and estimate of fiscal impact to the department appears reasonable.						

LB ⁽¹⁾ 430					FISCAL NOTE	
State Agency OR Political	Subdivision Name: ⁽²⁾	Department of Administrative Services (DAS) – Employee Wellness & Benefits				
Prepared by: (3) Jenni	fer Norris	Date Prepared: (4)	12-06-2023	Phone: (5)	402-480-9728	
	ESTIMATE PROVI	DED BY STATE AGEN	ICY OR POLITIC	AL SUBDIVIS	ION	
	FY S	<u> 2024–25</u>		FY 2025-26		
	EXPENDITURES	REVENUE	EXPENDI	<u>rures</u>	<u>REVENUE</u>	
GENERAL FUNDS			<u> </u>			
CASH FUNDS			<u> </u>			
FEDERAL FUNDS REVOLVING FUNDS						
TOTAL FUNDS			· <u> </u>			
Explanation of Estimate	:					

LB 430 proposes to prohibit a private insurer from applying a multiple procedure payment reduction policy to physical therapy, occupational therapy, or speech-language pathology services.

The State of Nebraska Medical plans currently follow the industry standard of paying the first claim at 100 percent and subsequent claims at 50 percent if multiple visits occur during the same visit for the patient. LB 430 requires all visits to be paid at 100 percent.

For the past benefit year, the total cost to the State of Nebraska medical plans for physical therapy, occupational therapy or speech therapy was approximately \$3.77M. If LB 430 had been enacted for the past plan year, there would have been an estimated increase in claims of \$200,000. Any increase in service costs would impact the cost of claims paid by the State's Health Plans, requiring increases in premiums.

LB 430 has fiscal impact on the State of Nebraska medical plans, but that the Department of Administrative Services is unable to determine that impact.

The medical plans for the State of Nebraska are self-insured. The medical plan premiums are paid by the State of Nebraska (79%) and employees (21%).

The State's health plans utilize trust funds; thus, no additional appropriation is being requested.

The State's contribution would increase the costs of each agency by an unknown amount that would need to be reconciled in a subsequent A bill.

The table below summarizes the estimated impact by fund type of any premium increase. The allocation by fund type is based on a four (4) year [2020-2023] average of health insurance premium expenditures.

Fund Type	Percentage by Fund Type
General Fund	51%
Cash Fund	25%
Federal Fund	19 %
Revolving Fund	5%
Total	100%

<u>BREAKD</u>	OWN BY MA.	JOR OBJECTS O	F EXPENDITURE	
Personal Services:				
	NUMBER OF POSITIONS		2024-25	2025-26
POSITION TITLE	<u>24-25</u>	<u>25-26</u>	EXPENDITURES	EXPENDITURES
	-			
Benefits				
Operating				
Travel	••			
Capital autlay				
Capital outlay				
Aid				
Capital improvements				
TOTAL				

LB₍₁₎ 430 FISCAL NOTE 2024

	ESTIMATE PROVIDI	ED BY STATE AGENCY OF	R POLITICAL S	SUBDIVISION			
State Agency or Political S	Subdivision Name:(2) Depar	tment of Health and Hum	an Services				
Prepared by: (3) John Meals	Date Prepared 12-20-2023			Phone: (5) 471-6719			
	FY 2024-2	FY 2025-2026					
	EXPENDITURES REVENUE		EXPE	NDITURES	REVENUE		
GENERAL FUNDS							
CASH FUNDS							
FEDERAL FUNDS							
OTHER FUNDS							
TOTAL FUNDS	\$0	\$0		\$0	\$0		
=							
	hours prior to public hearing, w	hichever is earlier.					
Explanation of Estima	ate:						
	MΔ	JOR OBJECTS OF EXPENDI	TURF				
PERSONAL SERVICES:	mi v						
	POSITION TITLE	NUMBER OF 24-25	POSITIONS 25-26	2024-2025 EXPENDITURES	2025-2026 EXPENDITURES		
Benefits							
Operating							
Travel							
Capital Outlay							
Aid							
Capital Improvements							
TOTAL				\$0	\$0		