PREPARED BY: DATE PREPARED: PHONE: Mikayla Findlay January 04, 2024 402-471-0062

LB 902

Revision: 00

FISCAL NOTE

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 prohibits assisted-living facilities from requiring a third-party guarantee of payment. The Department of Health and Human Services would be required to update forms and other procedures in accordance with this change. Additional work would be absorbed with the agency's current appropriation.

| | ADMINISTE | RATIVE SERVICES S | TATE BUDGET DIVISION | N: REVIEW OF A | AGENCY & POLT. SUB. RESPONSE | |
|--|-----------|-------------------|----------------------|-----------------|-------------------------------------|--|
| LB: | 902 | AM: | AGENCY/POLT. SUF | 3: Nebraska Dep | partment of Health & Human Services | |
| REV | IEWED BY: | Ann Linneman | DATE: | 1-26-2024 | PHONE: (402) 471-4180 | |
| COMMENTS: Concur with the Nebraska Department of Health & Human Services' assessment of fiscal impact. | | | | | | |

| | ESTIMATE PROVI | DED BY STATE AGENCY | OR I | POLITICAL SUBDIVISION | | |
|----------------------------------|---|-------------------------|--------------|-----------------------|-------------------|-----|
| State Agency or Political Su | ubdivision Name:(2) Depart | artment of Health and H | luma | n Services | | |
| Prepared by: (3) John Meals | y: (3) John Meals Date Prepared 1-26-2024 | | | Pho | one: (5) 471-6719 | |
| | FY 2024-2025 | | FY 2025-2026 | | | |
| _ | EXPENDITURES | REVENUE | _ | EXPENDITURES | REVENUE | |
| GENERAL FUNDS | | | | | | |
| CASH FUNDS | | | _ | | | |
| FEDERAL FUNDS | | | | | | |
| OTHER FUNDS | | | _ | | | |
| TOTAL FUNDS | \$0 | \$0 |) | \$0 | | \$0 |
| = | | | _ | | | |
| Return by date specified or 72 h | ours prior to public hearing, | whichever is earlier. | | | | |

Explanation of Estimate:

LB 902 prohibits an Assisted Living Facility from requiring a third-party financial guarantee to be executed as a condition of admission, expedited admission, or continued stay in the facility. LB 902 also requires that if a person chooses to execute a financial guarantee on behalf of the patient, they have a rescission period of forty-eight hours in which to cancel.

The Department of Health and Human Services (DHHS) would revise the Assisted Living Facility survey forms and revise instructions for the surveyors regarding compliance with this statute. Additional inspection time would be required at each of the 140 facilities inspected each year. Also, educational materials would be created by DHHS and provided to all Nursing Services Surveyor Consultants, the Health Facility Surveyor Consultants, RN Intake Workers, and the Assisted Living Facility providers.

This work would be performed by existing staff. The cost impact will be absorbed within current appropriation and is estimated as follows:

| POSITION(S) | | | FY 2024-2025 | | | | | | | |
|-------------|--------------------------------------|--------------|--------------|------|----|-------|----------------|-------------------------|----|--------|
| Job Code | Job Title | Hourly Rate | No. of Hours | FTE | | Pay | Benefits (35%) | Operating costs (26.7%) | | Total |
| X62580 | Nursing Services Surveyor Consultant | 31.67 | 200.00 | 1.00 | \$ | 6,334 | \$ 2,217 | \$ 2,283 | \$ | 10,835 |
| | | FY 2025-2026 | | | | | | | | |
| | | 5% increase | No. of Hours | FTE | | Pay | Benefits (35%) | Operating costs (26.7%) | | Total |
| | | \$ 33.256 | 70.00 | 1.00 | Φ | 2,328 | \$ 815 | \$ 839 | • | 3,982 |

The estimated hours for this work would be performed by multiple FTEs under the same position title. The table reflects the total number of hours needed.

| MAJOR OBJECTS OF EXPENDITURE | | | | | | | |
|------------------------------|-----------|-----------|--------------|--------------|--|--|--|
| PERSONAL SERVICES: | | | | | | | |
| | NUMBER OF | POSITIONS | 2024-2025 | 2025-2026 | | | |
| POSITION TITLE | 24-25 | 25-26 | EXPENDITURES | EXPENDITURES | | | |
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| Benefits | | | | | | | |
| | | | | | | | |
| Operating | | | | | | | |
| Travel | | | | | | | |
| Capital Outlay | | | | | | | |
| Capital Outlay | | | | | | | |
| Aid | | | · | | | | |
| | | | | | | | |

| Capital Improvements | | |
|----------------------|-----|-----|
| TOTAL | \$0 | \$0 |