

**FISCAL NOTE**  
**LEGISLATIVE FISCAL ANALYST ESTIMATE**

<b>ESTIMATE OF FISCAL IMPACT – STATE AGENCIES</b> (See narrative for political subdivision estimates)				
	<b>FY 2018-19</b>		<b>FY 2019-20</b>	
	EXPENDITURES	REVENUE	EXPENDITURES	REVENUE
GENERAL FUNDS				
CASH FUNDS	2,000		2,000	
FEDERAL FUNDS				
OTHER FUNDS				
TOTAL FUNDS	2,000		2,000	

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

This bill adopts the Physical Therapy Licensure Compact.

Ten states have joined the Physical Therapy Licensure Compact which is the minimum required. The travel costs for a representative from the state to attend the annual compact meeting is \$2,000 from the Professional and Occupational Licensing Cash Fund. Revising regulations to be compatible with the compact can be handled within existing resources. The membership dues are unknown. The membership fees would be paid from the licensing fees of the physical therapists. Since the cost is unknown it is not known if a fee increase would be needed.

<b>ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY &amp; POLT. SUB. RESPONSE</b>		
LB: 681	AM:	AGENCY/POLT. SUB: Dept. of Health and Human Services
REVIEWED BY: Elton Larson	DATE: 1/22/18	PHONE: <a href="tel:4024714173">(402) 471-4173</a>
COMMENTS: Department estimate of fiscal impact appears reasonable.		

<b>ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY &amp; POLT. SUB. RESPONSE</b>		
LB: 681	AM:	AGENCY/POLT. SUB: Nebraska State Patrol (NSP)
REVIEWED BY: Elton Larson	DATE: 1/24/18	PHONE: <a href="tel:4024714173">(402) 471-4173</a>
COMMENTS: NSP estimates that about 250 additional individuals would be fingerprinted with the passage of LB 681. At the current rate of \$45.25 per fingerprinting, there would be additional annual cash fund revenue of about \$11,300 to NSP.		

<b>ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY &amp; POLT. SUB. RESPONSE</b>		
LB: 681	AM:	AGENCY/POLT. SUB: University of Nebraska
REVIEWED BY: Elton Larson	DATE: 1/29/2018	PHONE: <a href="tel:4024714173">(402) 471-4173</a>
COMMENTS: University estimate of no fiscal impact to the agency appears reasonable.		

**ESTIMATE PROVIDED BY STATE AGENCY OR POLITICAL SUBDIVISION**

State Agency or Political Subdivision Name:(2) Department of Health and Human Services

Prepared by: (3) Mike Michalski

Date Prepared: 1-17-18

Phone: (5) 471-6719

	<u>FY 2018-2019</u>		<u>FY 2019-2020</u>	
	<u>EXPENDITURES</u>	<u>REVENUE</u>	<u>EXPENDITURES</u>	<u>REVENUE</u>
<b>GENERAL FUNDS</b>				
<b>CASH FUNDS</b>	\$2,000		\$2,000	
<b>FEDERAL FUNDS</b>				
<b>OTHER FUNDS</b>				
<b>TOTAL FUNDS</b>	\$2,000		\$2,000	

Return by date specified or 72 hours prior to public hearing, whichever is earlier.

**Explanation of Estimate:**

LB 681 would adopt the Physical Therapy Licensure Compact. It would require the Department to revise regulations governing the practice of physical therapy, which would be completed with existing resources. Costs for staff travel to attend the mandatory annual Compact meeting are estimated at \$2000 (Program 178).

The Physical Therapy Licensure Compact has already exceeded the minimum member state threshold of 10 and is active. The State of Nebraska would be required to pay a membership fee to the Compact Commission. The amount of this assessment is unknown at this time. The Compact includes language that allows Nebraska to charge applicants seeking compact privileges in the state, though the impact to total credential holders in Nebraska is unknown. As of June 30, 2017, there were 2,994 active physical therapy credentials in Nebraska.

These costs would be financed by the Professional and Occupational Licensing Cash Fund.

**MAJOR OBJECTS OF EXPENDITURE**

PERSONAL SERVICES:	NUMBER OF POSITIONS		2018-2019 EXPENDITURES	2019-2020 EXPENDITURES
	18-19	19-20		
Benefits.....				
Operating.....				
Travel.....			\$2,000	\$2,000
Capital Outlay.....				
Aid.....				
Capital Improvements.....				
<b>TOTAL.....</b>			\$2,000	\$2,000

Please complete ALL (5) blanks in the first three lines.

**2018**

**LB<sup>(1)</sup> 681**

**FISCAL NOTE**

State Agency OR Political Subdivision Name: <sup>(2)</sup> Nebraska State Patrol

Prepared by: <sup>(3)</sup> Carol Aversman Date Prepared: <sup>(4)</sup> 1-15-2018 Phone: <sup>(5)</sup> \_\_\_\_\_

**ESTIMATE PROVIDED BY STATE AGENCY OR POLITICAL SUBDIVISION**

	<u>FY 2018-19</u>		<u>FY 2019-20</u>	
	<u>EXPENDITURES</u>	<u>REVENUE</u>	<u>EXPENDITURES</u>	<u>REVENUE</u>
GENERAL FUNDS	_____	_____	_____	_____
CASH FUNDS	_____	_____	_____	_____
FEDERAL FUNDS	_____	_____	_____	_____
OTHER FUNDS	_____	_____	_____	_____
TOTAL FUNDS	=====	=====	=====	=====

Explanation of Estimate:

**The Agency estimates that the bill will result in the required fingerprinting of approximately 250 physical therapists and physical therapist assistants. Based on this estimate, it has determined that it can absorb this additional volume.**

**No Fiscal Impact**

**BREAKDOWN BY MAJOR OBJECTS OF EXPENDITURE**

**Personal Services:**

<u>POSITION TITLE</u>	<u>NUMBER OF POSITIONS</u>		<u>2018-19</u>	<u>2019-20</u>
	<u>18-19</u>	<u>19-20</u>	<u>EXPENDITURES</u>	<u>EXPENDITURES</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Benefits.....	_____	_____	_____	_____
Operating.....	_____	_____	_____	_____
Travel.....	_____	_____	_____	_____
Capital outlay.....	_____	_____	_____	_____
Aid.....	_____	_____	_____	_____
Capital improvements.....	_____	_____	_____	_____
TOTAL.....	_____	_____	_____	_____

Please complete ALL (5) blanks in the first three lines.

**2018**

**LB<sup>(1)</sup> 681**

**FISCAL NOTE**

State Agency OR Political Subdivision Name: <sup>(2)</sup> University of Nebraska

Prepared by: <sup>(3)</sup> Michael Justus Date Prepared: <sup>(4)</sup> January 26, 2018 Phone: <sup>(5)</sup> 402-472-2191

**ESTIMATE PROVIDED BY STATE AGENCY OR POLITICAL SUBDIVISION**

	<u>FY 2018-19</u>		<u>FY 2019-20</u>	
	<u>EXPENDITURES</u>	<u>REVENUE</u>	<u>EXPENDITURES</u>	<u>REVENUE</u>
GENERAL FUNDS	_____	_____	_____	_____
CASH FUNDS	_____	_____	_____	_____
FEDERAL FUNDS	_____	_____	_____	_____
OTHER FUNDS	_____	_____	_____	_____
<b>TOTAL FUNDS</b>	<b>=====</b>	<b>=====</b>	<b>=====</b>	<b>=====</b>

Explanation of Estimate:

The bill adopts the Physical Therapy Licensure Compact and would have no fiscal impact on the University.

**BREAKDOWN BY MAJOR OBJECTS OF EXPENDITURE**

Personal Services:

<u>POSITION TITLE</u>	<u>NUMBER OF POSITIONS</u>		<u>2018-19</u>	<u>2019-20</u>
	<u>18-19</u>	<u>19-20</u>	<u>EXPENDITURES</u>	<u>EXPENDITURES</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Benefits.....	_____	_____	_____	_____
Operating.....	_____	_____	_____	_____
Travel.....	_____	_____	_____	_____
Capital outlay.....	_____	_____	_____	_____
Aid.....	_____	_____	_____	_____
Capital improvements.....	_____	_____	_____	_____
<b>TOTAL.....</b>	<b>_____</b>	<b>_____</b>	<b>_____</b>	<b>_____</b>