

FISCAL NOTE

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Bill/Resolution No.: SB 2308 Amendment to: _____

Requested by Legislative Council Date of Request: 2-12-97

- Please estimate the fiscal impact (in dollar amounts) of the above measure for state general or special funds, counties, cities, and school districts.

Narrative:

Our review of this bill indicates that it relates solely to those who sell or distribute prescription drugs. We do participate in a prescription drug formulary program with BCBS. However, since the formulary program is not involved with the sales or distribution of drugs, this bill would not apply to its operations. Therefore, since this bill does not affect that program, there is no fiscal impact to PERS.

- State fiscal effect in dollar amounts:

| | 1995-97 <u>Biennium</u> | | 1997-99 <u>Biennium</u> | | 1999-2001 <u>Biennium</u> | |
|---------------|----------------------------|----------------------|----------------------------|----------------------|------------------------------|----------------------|
| | <u>General Fund</u> | <u>Special Funds</u> | <u>General Fund</u> | <u>Special Funds</u> | <u>General Fund</u> | <u>Special Funds</u> |
| Revenues: | -0- | -0- | -0- | -0- | -0- | -0- |
| Expenditures: | -0- | -0- | -0- | -0- | -0- | -0- |

- What, if any, is the effect of this measure on the appropriation for your agency or department:

- For rest of 1995-97 biennium: None
- For the 1997-99 biennium: None
- For the 1999-2001 biennium: None

- County, City, and School District fiscal effect in dollar amounts:

| 1995-97 <u>Biennium</u> | | | 1997-99 <u>Biennium</u> | | | 1999-2001 <u>Biennium</u> | | |
|----------------------------|---------------|-------------------------|----------------------------|---------------|-------------------------|------------------------------|---------------|-------------------------|
| <u>Counties</u> | <u>Cities</u> | <u>School Districts</u> | <u>Counties</u> | <u>Cities</u> | <u>School Districts</u> | <u>Counties</u> | <u>Cities</u> | <u>School Districts</u> |

If additional space is needed, attach a supplemental sheet.

Signed Sparb Collins

Typed Name Sparb Collins

Date Prepared: 2-13-97

Department Public Employees Retirement System

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