

FISCAL NOTE
Requested by Legislative Council
01/23/2009

Bill/Resolution No.: SB 2287

1A. **State fiscal effect:** *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

	2007-2009 Biennium		2009-2011 Biennium		2011-2013 Biennium	
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds
Revenues				\$75,000		\$100,000
Expenditures			\$75,000	\$75,000	\$100,000	\$100,000
Appropriations			\$75,000	\$75,000	\$100,000	\$100,000

1B. **County, city, and school district fiscal effect:** *Identify the fiscal effect on the appropriate political subdivision.*

2007-2009 Biennium			2009-2011 Biennium			2011-2013 Biennium		
Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts

2A. **Bill and fiscal impact summary:** *Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).*

This bill would require the North Dakota Medicaid program to apply for a Medicaid Family Planning Waiver. The fiscal estimate is for the cost of securing a vendor to develop the waiver & cost neutrality documents for a 2011-2013 implementation.

B. Fiscal impact sections: *Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.*

Section 1 of this Bill authorizes the Department to contract with an independent third party vendor for the evaluation of the clinical and financial outcomes of this waiver.

3. **State fiscal effect detail:** *For information shown under state fiscal effect in 1A, please:*

A. Revenues: *Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.*

The department will be able to access Medicaid funding for the vendor contract.

B. Expenditures: *Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.*

The expenditures reflect the funds needed in operating, for the cost of an outside vendor contract.

C. Appropriations: *Explain the appropriation amounts. Provide detail, when appropriate, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation is also included in the executive budget or relates to a continuing appropriation.*

The 2009-2011 Executive Budget for the Department of Human Services would need to be increased by \$150,000, with \$75,000 being general funds to implement this bill.

Name:	Debra A. McDermott	Agency:	Human Services
Phone Number:	328-3695	Date Prepared:	01/23/2009