## Fiscal Estimate - 2007 Session

| $\boxtimes$  | Original   |                                    | Updated  |   | Correc        | ted                     |      | Supple  | emental                          |
|--|--|------------------------------------|--|---|---------------|-------------------------|------|---|----------------------------------|
| LRB  | Number   | 07-3614/1                          |  | Intro                                   | ductio        | n Numb                  | er / | AB-095  | 51                               |
| Descr<br>emplo                                       |  | of health insura                   | nce premiums for s   | state en                                | nployees      |                         |      |   |                                  |
| Fiscal   | Effect   |                                    | i dingan mandan sakang atau di interkati banda saka salah saka sa masa sakat kana sakara sakara sa | an emilional street decide for district |               |                         |      | The second se |                                  |
|  | No State Fisco Indeterminate Increase E Appropria Decrease Appropria Create Ne | e<br>Existing<br>tions<br>Existing | ☐ Increase E<br>Revenues<br>☐ Decrease<br>Revenues   |   |               | to abso                 |      | in agenc  | ne possible<br>y's budget<br>⊠No |
|  | No Local Gov<br>Indeterminate<br>1. Increase<br>Permiss<br>2. Decrease         | e Costs<br>sive ☐ Mandato          | 3. Increase Fory Permissive 4. Decrease  | e∏Mar<br>Revenu                         | ndatory<br>ie | ☐ Tov<br>☐ Cou<br>☐ Sch |      | nits Affec<br>Villago<br>Other<br>WTCS<br>Distric   | e Cities<br>s<br>S               |
| Fund Sources Affected Affected Ch. 20 Appropriations |  |                                    |  |   |               |                         |      |   |                                  |
| □ GI   | PR 🔲 FED   | PRO                                | PRS SEG  |   | EGS 20.       | 515(1)(w)               |      |   |                                  |
| Agend  | cy/Prepared  | Ву                                 | Auth   | orized                                  | Signatu       | re                      |      |   | Date                             |
| ETF/ Jon Kranz (608) 267-0908 Bob Co                 |  |                                    |  | Conlin (608) 261-7940 4/7/2008          |               |                         |      |   | 4/7/2008                         |

## Fiscal Estimate Narratives ETF 4/7/2008

| LRB Number  | 07-3614/1         | Introduction N     | umber <b>AB-0951</b> | Estimate Type  | Original |  |
|-------------|-------------------|--------------------|----------------------|--|----------|--|
| Description |                   |                    |                      |  |          |  |
|             | ment of health in | surance premiums f | or state employees   | and the second s |          |  |

## **Assumptions Used in Arriving at Fiscal Estimate**

This bill would provide the employer contribution towards health insurance for state employees on the day the employee becomes insured (typically the first day of the first month after hire). Current law requires that the employer contribution begins of the first day of the seventh month after the employee begins state employment (this will change to the first day of the third month effective on July 1, 2008).

Implementation costs associated with this bill include costs associated with publication revisions and employee/employer inquiries that will be directed to the Department of Employee Trust Funds. There are no significant on-going costs

Costs associated with possible increased premiums payments due to earlier eligibility for the employer contribution are dependent upon the number of new state hires. As such, no estimate related to these costs are is included in this estimate.

**Long-Range Fiscal Implications** 

## Fiscal Estimate Worksheet - 2007 Session

Detailed Estimate of Annual Fiscal Effect

| $\boxtimes$             | Original                      |                               | Updated  |                              | Corrected  |  | Supplemental                         |  |  |
|-------------------------|-------------------------------|-------------------------------|--|------------------------------|--|--|--------------------------------------|--|--|
| LRB                     | Number                        | 07-3614                       | 1  | Intro                        | duction Nu   | mber   | AB-0951                              |  |  |
|                         | iption<br>yer payment         | of health insu                | rance premit   | ums for state                | employees  |  |                                      |  |  |
| <b>annua</b><br>\$11,00 | alized fiscal o               | effect):<br>d with publicat   |  |                              |  |  | o not include in parding the changes |  |  |
| II. Anı                 | nualized Cos                  | sts:                          |  |                              | Annualized F   | iscal Imp  | act on funds from:                   |  |  |
|                         |                               |                               |  | a Agua acag                  | Increased Cos  | sts  | Decreased Costs                      |  |  |
| A. Sta                  | ite Costs by                  | Category                      |  |                              |  |  |                                      |  |  |
| Sta                     | te Operations                 | s - Salaries an               | d Fringes  |                              |  | \$0  | \$                                   |  |  |
| (FT                     | E Position Ch                 | nanges)                       |  |                              |  |  |                                      |  |  |
| Sta                     | te Operations                 | s - Other Cost                | S  |                              |  |  |                                      |  |  |
| Loc                     | al Assistance                 | )                             |  | . :                          |  |  |                                      |  |  |
| Aid                     | s to Individua                | ls or Organiza                | ations   |                              |  |  |                                      |  |  |
| T                       | OTAL State                    | Costs by Ca                   | tegory   |                              |  | \$0  | \$                                   |  |  |
| B. Sta                  | ate Costs by                  | Source of Fu                  | ınds   |                              |  |  |                                      |  |  |
| GP                      | B.                            |                               |  |                              |  |  |                                      |  |  |
| FEI                     |                               |                               |  |                              | enamentalista (h. 1905)<br>Senamentalista (h. 1905)<br>Senamentalista (h. 1905)  |  | engen et engel                       |  |  |
| PR                      | O/PRS                         |                               |  |                              |  | Para (managanan atau )<br>An arawa (managanan atau ) |                                      |  |  |
| SE                      | G/SEG-S                       |                               | The second of th |                              |  | 0  |                                      |  |  |
| III. St                 | ate Revenue<br>lues (e.g., ta | s - Complete<br>x increase, d | this only w  | hen proposa<br>icense fee, e | nl will increas<br>ets.)   | e or decre   | ease state                           |  |  |
|                         |                               |                               | egari  |                              | Increased R  | ev   | Decreased Rev                        |  |  |
| GP                      | R Taxes                       |                               |  |                              |  | \$   | \$                                   |  |  |
| GP                      | R Earned                      |                               | 1.   |                              | en en de la companya de la companya<br>La companya de la co |  |                                      |  |  |
| FE                      | <b>D</b>                      |                               |  | <u> </u>                     |  |  |                                      |  |  |
| PR                      | O/PRS                         |                               |  |                              |  | eat.   |                                      |  |  |
| SE                      | G/SEG-S                       |                               |  |                              |  | 0  |                                      |  |  |
|                         | ΓΟΤΑL State                   | Revenues                      |  |                              |  | \$0  | \$                                   |  |  |
|                         |                               |                               | NET ANNUA  | ALIZED FISC                  | AL IMPACT  |  |                                      |  |  |
|                         | Å.                            |                               |  |                              | Sta  | ate  | Local                                |  |  |
| NET CHANGE IN COSTS     |                               |                               |  |                              |  | \$0  | \$                                   |  |  |
| NET                     | CHANGE IN                     | REVENUE                       |  | <u>.</u>                     |  | \$0  | \$                                   |  |  |
| Agen                    | cv/Prepared                   | Bv                            |  | Authorized                   | Signature  |  | Date                                 |  |  |
|                         |                               |                               |  |                              | (608) 261-794  | 4/7/2008   |                                      |  |  |