Fiscal Estimate - 2021 Session

☑ Original ☐ Updated	Corrected	Supplem	ental			
LRB Number 21-1821/1	Introduction Number	AB-031	7			
Description modifying administrative rules relating to driver sa	afety plans and medication-assisted	treatments				
Fiscal Effect						
Appropriations Rever	ease Existing absorb with					
No Local Government Costs Indeterminate 1. Increase Costs Permissive Mandatory Perm 2. Decrease Costs 4. Decre	5.Types of Loc Units Affecte Units Affecte Towns Countier School Districts	Village S Others WTCS	Cities			
Fund Sources Affected Affected Ch. 20 Appropriations GPR FED PRO PRS SEG SEGS						
Agency/Prepared By	Authorized Signature		Date			
DOT/ John Gilchrist (608) 266-7135	Joan Meier (608) 267-6978		5/14/2021			

Fiscal Estimate Narratives DOT 5/14/2021

LRB Number 21-1821/1	Introduction Number	AB-0317	Estimate Type	Original			
Description							
modifying administrative rules relating to driver safety plans and medication-assisted treatments							

Assumptions Used in Arriving at Fiscal Estimate

The evaluations of these driver safety plans would need to be updated, the training for which can be rolled into regular trainings.

Long-Range Fiscal Implications

None.

Fiscal Estimate Worksheet - 2021 Session

Detailed Estimate of Annual Fiscal Effect

☐ Updated		Corrected	Supplementa	[
LRB Number 21-1821/1		Introduction Numb	oer AB-0317		
Description modifying administrative rules relating to drive	er safe	ety plans and medication-a	ssisted treatments	·	
I. One-time Costs or Revenue Impacts for annualized fiscal effect):	State	and/or Local Governmer	it (do not include in		
There are no one-time costs associated with	this bi	II.			
II. Annualized Costs:		Annualized Fiscal Impact on funds from:			
		Increased Costs	Decreased	Costs	
A. State Costs by Category			•	***************************************	
State Operations - Salaries and Fringes		\$0	\$0		
(FTE Position Changes)		(0.0 FTE)	(-0.0 FTE)		
State Operations - Other Costs		0		0	
Local Assistance		0		0	
Aids to Individuals or Organizations		О	amanatarahaanaanaanaanaanaanaanahanaanahanaana	0	
TOTAL State Costs by Category		\$0		\$0	
B. State Costs by Source of Funds					
GPR		0		0	
FED		0	0		
PRO/PRS		0		0	
SEG/SEG-S		0		0	
III. State Revenues - Complete this only wi (e.g., tax increase, decrease in license fee			decrease state rever	nues	
		Increased Rev	Decrease	ed Rev	
GPR Taxes		\$0	\$0		
GPR Earned	ma, ma anibamin		ANN PERIOD AND AND AND AND AND AND AND AND AND AN	0	
FED		0		0	
PRO/PRS	LL B. M. D. CT. CT. CT. CT. CT. CT. CT. CT. CT. CT	0		0	
SEG/SEG-S		0	C		
TOTAL State Revenues		\$0	\$0		
NET ANNU	IALIZI	ED FISCAL IMPACT		TO CONTRACT OF THE PARTY OF THE	
		<u>State</u>		<u>Local</u>	
NET CHANGE IN COSTS	CHANGE IN COSTS		\$(
NET CHANGE IN REVENUE		\$0		\$0	
Agency/Prepared By	Aut	horized Signature	Date	<u> </u>	
DOT/ John Gilchrist (608) 266-7135		Joan Meier (608) 267-6978 5/14/2021			