

PREPARED BY: Doug Nichols
 DATE PREPARED: March 5, 2019
 PHONE: 402-471-0052

LB 595

Revision: 00

FISCAL NOTE
LEGISLATIVE FISCAL ANALYST ESTIMATE

| ESTIMATE OF FISCAL IMPACT – STATE AGENCIES (See narrative for political subdivision estimates) | | | | |
|---|---------------------|----------------|---------------------|----------------|
| | FY 2019-20 | | FY 2020-21 | |
| | EXPENDITURES | REVENUE | EXPENDITURES | REVENUE |
| GENERAL FUNDS | 103,482 | | 100,043 | |
| CASH FUNDS | | | | |
| FEDERAL FUNDS | | | | |
| OTHER FUNDS | | | | |
| TOTAL FUNDS | 103,482 | | 100,043 | |

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

This bill would change the Office of Dispute Resolution to the Office of Restorative Justice and Dispute Resolution and change powers and duties of the office. The Dispute Resolution Cash Fund is renamed the Restorative Justice and Dispute Resolution Cash Fund.

The bill creates the position of Deputy Director for Restorative Justice. The Supreme Court estimates the General Fund cost for this position at \$103,482 in FY19-20, and \$100,043 in FY20-21. These amounts are for the Deputy Director’s salary and benefits, operating and travel costs, and a one-time cost for Capital Outlay.

The Supreme Court also lists amounts for various restorative justice activities as follows:

- One Program Analyst (for 6 months): \$44,772
- Restorative Justice Grants to ODR-approved Mediation Centers: \$150,000
- Restorative Justice Education and Training: \$15,000

The Court notes that these items are primarily grant-funded. To continue the activities once the grant ends would require another fund source, such as General Funds. However, these activities are not required by the bill and are shown only for illustration purposes. Therefore, the amounts are not shown in the boxes at the top of this fiscal note or on the Court’s response.

The Department of Health and Human Services (HHS) estimates no fiscal impact from this bill.

The Cities of Imperial and Lincoln estimate no fiscal impact from this bill.

| ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY & POLT. SUB. RESPONSE | | | |
|--|------------------|---|--|
| LB: 595 | AM: | AGENCY/POLT. SUB: Nebraska Supreme Court (005) | |
| REVIEWED BY: Joe Wilcox | DATE: 03/04/2019 | PHONE: (402) 471-4178 | |
| COMMENTS: No basis to dispute the Nebraska Supreme Court estimate of potential Fiscal Impact to the Agency from LB595. | | | |

| ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY & POLT. SUB. RESPONSE | | | |
|--|------------------|---|--|
| LB: 595 (025) | AM: | AGENCY/POLT. SUB: Nebraska Department of Health and Human Services | |
| REVIEWED BY: Joe Wilcox | DATE: 02/28/2019 | PHONE: (402) 471-4178 | |
| COMMENTS: No basis to dispute the Nebraska Department of Health and Human Services estimate of No Fiscal Impact to the Agency from LB 595. | | | |

| ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY & POLT. SUB. RESPONSE | | |
|--|------------------|---|
| LB: 595 | AM: | AGENCY/POLT. SUB: City of Imperial |
| REVIEWED BY: Joe Wilcox | DATE: 01/24/2019 | PHONE: (402) 471-4178 |
| COMMENTS: No basis to dispute the City of Imperial estimate of No Fiscal Impact to the City from LB 595. | | |

| ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY & POLT. SUB. RESPONSE | | |
|---|------------------|--|
| LB: 595 | AM: | AGENCY/POLT. SUB: City of Lincoln |
| REVIEWED BY: Joe Wilcox | DATE: 01/31/2019 | PHONE: (402) 471-4178 |
| COMMENTS: No basis to dispute the City of Lincoln estimate of No Fiscal Impact to the City from LB 595. | | |

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

2019

LB⁽¹⁾ 595

FISCAL NOTE

State Agency OR Political Subdivision Name: ⁽²⁾ 05 Supreme Court

Prepared by: ⁽³⁾ Eric Asboe Date Prepared: ⁽⁴⁾ 3/4/19 Phone: ⁽⁵⁾ 1-4138

ESTIMATE PROVIDED BY STATE AGENCY OR POLITICAL SUBDIVISION

| | <u>FY 2019-20</u> | | <u>FY 2020-21</u> | |
|--------------------|-----------------------|----------------|-----------------------|----------------|
| | <u>EXPENDITURES</u> | <u>REVENUE</u> | <u>EXPENDITURES</u> | <u>REVENUE</u> |
| GENERAL FUNDS | <u>103,482</u> | <u></u> | <u>100,044</u> | <u></u> |
| CASH FUNDS | <u></u> | <u></u> | <u></u> | <u></u> |
| FEDERAL FUNDS | <u></u> | <u></u> | <u></u> | <u></u> |
| OTHER FUNDS | <u></u> | <u></u> | <u></u> | <u></u> |
| TOTAL FUNDS | <u>103,482</u> | <u></u> | <u>100,044</u> | <u></u> |

Explanation of Estimate:

LB595 creates the position of Deputy Director and duties related to restorative justice. Estimate: \$103,482 FY19-20, \$100,043 FY20-21 General Funds.

Restorative justice activities, within the Office of Dispute Resolution, are primarily grant-funded. Although not required under LB595, to continue these activities at the end of the grant period would have the following General Fund impact in the last half of FY20-21.

Program Analyst, 1 FTE (for 6 months): \$44,772
 Restorative Justice grants to ODR-approved mediation centers: \$150,000
 Restorative Justice education and training: \$15,000

BREAKDOWN BY MAJOR OBJECTS OF EXPENDITURE

Personal Services:

| <u>POSITION TITLE</u> | <u>NUMBER OF POSITIONS</u> | | <u>2019-20</u> | <u>2020-21</u> |
|---------------------------|----------------------------|--------------|-----------------------|-----------------------|
| | <u>19-20</u> | <u>20-21</u> | <u>EXPENDITURES</u> | <u>EXPENDITURES</u> |
| Deputy Director | <u>1.0</u> | <u>1.0</u> | <u>55,231</u> | <u>56,336</u> |
| Benefits..... | | | <u>34,178</u> | <u>35,635</u> |
| Operating..... | | | <u>10,573</u> | <u>6,073</u> |
| Travel..... | | | <u>2,000</u> | <u>2,000</u> |
| Capital outlay..... | | | <u>1,500</u> | <u></u> |
| Aid..... | | | <u></u> | <u></u> |
| Capital improvements..... | | | <u></u> | <u></u> |
| TOTAL..... | | | <u>103,482</u> | <u>100,044</u> |

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 1-24-19

Phone: (5) 471-6719

| | <u>FY 2019-2020</u> | | <u>FY 2020-2021</u> | |
|----------------------|---------------------|----------------|---------------------|----------------|
| | <u>EXPENDITURES</u> | <u>REVENUE</u> | <u>EXPENDITURES</u> | <u>REVENUE</u> |
| GENERAL FUNDS | | | | |
| CASH FUNDS | | | | |
| FEDERAL FUNDS | | | | |
| OTHER FUNDS | | | | |
| TOTAL FUNDS | | | | |
| | | \$0 | | \$0 |

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

Explanation of Estimate:

There is no fiscal impact to the Department of Health and Human Services.

MAJOR OBJECTS OF EXPENDITURE

PERSONAL SERVICES:

| POSITION TITLE | NUMBER OF POSITIONS | | 2019-2020 EXPENDITURES | 2020-2021 EXPENDITURES |
|---------------------------|---------------------|-------|---------------------------|---------------------------|
| | 19-20 | 20-21 | | |
| Benefits..... | | | | |
| Operating..... | | | | |
| Travel..... | | | | |
| Capital Outlay..... | | | | |
| Aid..... | | | | |
| Capital Improvements..... | | | | |
| TOTAL..... | | | | |

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2019

LB⁽¹⁾ 595

FISCAL NOTE

State Agency OR Political Subdivision Name: ⁽²⁾ City of Imperial

Prepared by: ⁽³⁾ Jo Leyland

Date Prepared: ⁽⁴⁾ 01/24/2019

Phone: ⁽⁵⁾ 308-882-4368

ESTIMATE PROVIDED BY STATE AGENCY OR POLITICAL SUBDIVISION

| | <u>FY 2019-20</u> | | <u>FY 2020-21</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:

No fiscal impact

BREAKDOWN BY MAJOR OBJECTS OF EXPENDITURE

Personal Services:

| <u>POSITION TITLE</u> | <u>NUMBER OF POSITIONS</u> | | <u>2019-20</u> | <u>2020-21</u> |
|---------------------------|----------------------------|--------------|---------------------|---------------------|
| | <u>19-20</u> | <u>20-21</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.

2019

LB⁽¹⁾ 595

FISCAL NOTE

State Agency OR Political Subdivision Name: ⁽²⁾ City of Lincoln

Prepared by: ⁽³⁾ James Van Bruggen Date Prepared: ⁽⁴⁾ 1/31/19 Phone: ⁽⁵⁾ 441-8301

ESTIMATE PROVIDED BY STATE AGENCY OR POLITICAL SUBDIVISION

| | <u>FY 2019-20</u> | | <u>FY 2020-21</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:

No fiscal impact.

BREAKDOWN BY MAJOR OBJECTS OF EXPENDITURE

Personal Services:

| <u>POSITION TITLE</u> | <u>NUMBER OF POSITIONS</u> | | <u>2019-20</u> | <u>2020-21</u> |
|---------------------------|----------------------------|--------------|---------------------|---------------------|
| | <u>19-20</u> | <u>20-21</u> | <u>EXPENDITURES</u> | <u>EXPENDITURES</u> |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| Benefits..... | _____ | _____ | _____ | _____ |
| Operating..... | _____ | _____ | _____ | _____ |
| Travel..... | _____ | _____ | _____ | _____ |
| Capital outlay..... | _____ | _____ | _____ | _____ |
| Aid..... | _____ | _____ | _____ | _____ |
| Capital improvements..... | _____ | _____ | _____ | _____ |
| TOTAL..... | _____ | _____ | _____ | _____ |