

FISCAL NOTE
LEGISLATIVE FISCAL ANALYST ESTIMATE

| ESTIMATE OF FISCAL IMPACT – STATE AGENCIES (See narrative for political subdivision estimates) | | | | |
|-------------------------------------------------------------------------------------------------------|----------------------------|----------------|----------------------------|----------------|
| | FY 2020-21 | | FY 2021-22 | |
| | EXPENDITURES | REVENUE | EXPENDITURES | REVENUE |
| GENERAL FUNDS | 442,500 - 1,770,000 | | 442,500 - 1,770,000 | |
| CASH FUNDS | | | | |
| FEDERAL FUNDS | | | | |
| OTHER FUNDS | | | | |
| TOTAL FUNDS | 442,500 - 1,770,000 | | 442,500 - 1,770,000 | |

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

This bill would change provisions relating to workers' compensation for injuries to first responders and frontline state employees. It would provide a means of demonstrating a prima facie case of personal injury. The bill would provide duties for the Critical Incident Stress Management Program (CISM) and the Department of Health and Human Services (HHS). Finally, it would require HHS to reimburse for the cost of resilience training at a rate set by the CISM.

HHS estimates there are about 17,700 first responders subject to resilience training reimbursement. The agency notes that it is not clear if frontline state employees are intended to be included in resilience training reimbursement. The bill requires the CISM team to establish a reimbursement rate. Because no rate has been established, HHS assumes a range of \$25-\$100 for resilience training reimbursement. HHS estimates a range of \$442,500 - \$1,770,000.

HHS also will have additional costs in developing resilience training guidelines. The agency estimates the cost at \$3,680 and they plan to absorb this cost. See the agency response attached for additional details not included in this fiscal note.

DAS Risk Management (DAS) notes that this bill provides another method to establish a mental injury or illness caused by employment conditions, and it also expands who can determine a mental injury or illness. DAS notes that because of this, it is foreseeable that there may be additional claims and payments, but this amount is not known. See the agency response attached for additional details not included in this fiscal note.

The Workers' Compensation Court and the Nebraska State Patrol estimate no fiscal impact from this bill.

The City of Imperial estimates costs of \$25,000 in FY21 and \$6,000 in FY22. These costs would be for an initial mental health evaluation, plus developing resilience training guidelines and providing such training to first responders.

The City of Lincoln estimates a minimal fiscal impact.

The Lancaster County Sheriff's Office estimates a cost of \$2,800 for all of their deputies to attend a one day training session. They note that this cost does not include the cost of an instructor, which they estimate could double the \$2,800 amount.

Sarpy County estimates no fiscal impact from this bill.

| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|------------------------------------------------------------------------|
| ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY & POLT. SUB. RESPONSE | | |
| LB: 963 | AM: | AGENCY/POLT. SUB: Department of Health and Human Services (025) |
| REVIEWED BY: Joe Wilcox | DATE: 1/23/2020 | PHONE: (402) 471-4178 |
| COMMENTS: Though the agency fiscal note presents a broad range of potential costs, there is no basis to dispute the Department of Health and human Services (DHHS) estimate of potential Fiscal impact to the Agency from LB 963. | | |

| ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY & POLT. SUB. RESPONSE | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------------------------------------------------------------------|
| LB: 963 | AM: | AGENCY/POLT. SUB: Department of Administrative Services (065) |
| REVIEWED BY: Joe Wilcox | DATE: 1/22/2020 | PHONE: (402) 471-4178 |
| COMMENTS: No basis to dispute the Department of Administrative Services (DAS) estimate of potential, but Indeterminate Fiscal impact to the Agency from LB 963. | | |

| ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY & POLT. SUB. RESPONSE | | |
|-------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------------------------------------------------------|
| LB: 963 | AM: | AGENCY/POLT. SUB: Nebraska Workers Compensation Court (037) |
| REVIEWED BY: Joe Wilcox | DATE: 1/16/2020 | PHONE: (402) 471-4178 |
| COMMENTS: No basis to dispute the Nebraska Workers Compensation Court estimate of No Fiscal impact to the Agency from LB 963. | | |

| ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY & POLT. SUB. RESPONSE | | |
|-----------------------------------------------------------------------------------------------------------------|-----------------|------------------------------------------------------|
| LB: 963 | AM: | AGENCY/POLT. SUB: Nebraska State Patrol (064) |
| REVIEWED BY: Joe Wilcox | DATE: 1/23/2020 | PHONE: (402) 471-4178 |
| COMMENTS: No basis to dispute the Nebraska State Patrol estimate of No Fiscal impact to the Agency from LB 963. | | |

| ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY & POLT. SUB. RESPONSE | | |
|-----------------------------------------------------------------------------------------------------------------|-----------------|-------------------------------------------|
| LB: 963 | AM: | AGENCY/POLT. SUB: City of Imperial |
| REVIEWED BY: Joe Wilcox | DATE: 1/16/2020 | PHONE: (402) 471-4178 |
| COMMENTS: No basis to dispute the City of Imperial estimate of potential Fiscal Impact to the City from LB 963. | | |

| ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY & POLT. SUB. RESPONSE | | |
|---------------------------------------------------------------------------------------------------------|------------------|------------------------------------------|
| LB: 963 | AM: | AGENCY/POLT. SUB: City of Lincoln |
| REVIEWED BY: Joe Wilcox | DATE: 01/23/2020 | PHONE: (402) 471-4178 |
| COMMENTS: No basis to dispute the City of Lincoln estimate of No Fiscal Impact to the City from LB 963. | | |

| ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY & POLT. SUB. RESPONSE | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|------------------------------------------------------------|
| LB: 963 | AM: | AGENCY/POLT. SUB: Lancaster County Sheriff's Office |
| REVIEWED BY: Joe Wilcox | DATE: 1/16/2020 | PHONE: (402) 471-4178 |
| COMMENTS: No basis to dispute the Lancaster County Sheriff's Office estimate of potential Fiscal Impact to the Lancaster County Sheriff from LB 963. | | |

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 1-15-2020

Phone: (5) 471-6719

| | <u>FY 2020-2021</u> | | <u>FY 2021-2022</u> | |
|----------------------|---------------------|----------------|---------------------|----------------|
| | <u>EXPENDITURES</u> | <u>REVENUE</u> | <u>EXPENDITURES</u> | <u>REVENUE</u> |
| GENERAL FUNDS | \$442,500 - | | \$442,500 - | |
| | \$1,770,000 | | \$1,770,000 | |
| CASH FUNDS | | | | |
| FEDERAL FUNDS | | | | |
| OTHER FUNDS | | | | |
| TOTAL FUNDS | \$442,500 - | | \$442,500 - | |
| | \$1,770,000 | | \$1,770,000 | |

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

Explanation of Estimate:

LB 963 establishes qualifications for first responders and frontline state employees in order to be eligible for worker’s compensation due to mental injury and/or illness incurred as a result of trauma experienced on the job. One of these requirements is that the employee must have participated in resilience training annually prior to the incident in order to qualify for worker’s compensation. Should the employer not provide or reimburse the employee with resilience training, then the Department of Health and Human Services is to reimburse the cost at a rate set by the Critical Incident Stress Management Program (CISM).

The definition given by statute for a first responder is a sheriff, deputy sheriff, police officer, Nebraska State Patrol officer, a volunteer or paid firefighter, or a volunteer or paid emergency medical care worker licensed in Nebraska. There are currently 6,700 emergency medical care workers licensed in Nebraska. The estimated number of law enforcement officers is around 8,000. According to FEMA’s 2019 National Fire Department Registry Summary, there are 391 registered fire departments in Nebraska with 96.2% of personnel being volunteer or mostly volunteer. Also, according to statistics, there are approximately 1.5 firefighters per 1,000 persons in Nebraska. Based on a population of 2,000,000 the estimate would be 3,000 firefighters in Nebraska. Therefore, the potential number of first responders subject to resilience training reimbursement are approximately 17,700. It is unclear if LB 963 is intended to include frontline state employees in the reimbursement of training.

LB 963 requires the CISM team to establish the reimbursement rate. Since the reimbursement rate is unknown, this estimate assumes a range of \$25 to \$100 reimbursement for annual resilience training. The range of total impact due to reimbursement is estimated to cost between \$442,500 to \$1,770,000 per year. The source of funding is not indicated by LB 963, therefore the estimated cost is being listed under General Funds. It is anticipated the funding would be included as part of Program 514 – Health Aid.

DHHS will incur additional cost to develop guidelines for resilience training and set an annual limit on the hours or quantity of resilience training required for reimbursement. The CISM program is managed by the CISM Council as well as the Interagency Management Committee. The council and committee are composed of DHHS, State Fire Marshal’s office, the Superintendent of Law Enforcement and Public Safety and the Adjutant General as members. LB 963 would require the council and committee to meet several times in order to develop regulations and standards. DHHS would absorb the costs of members representing DHHS.

The estimated cost to develop guidelines, set annual limits on required training and set the reimbursement rate for applicable employees is estimated as the following:

| Title | Hours | Hourly Cost | Absorbed Cost |
|-----------------------------------------|-------|-------------|-----------------|
| Director | 4 | 74.28 | \$ 297 |
| Deputy Director | 4 | 53.48 | \$ 214 |
| Administrator I | 4 | 30.82 | \$ 123 |
| Program Specialist | 8 | 22.52 | \$ 180 |
| Program Analyst | 16 | 21.91 | \$ 351 |
| Attorney III | 30 | 33.82 | \$ 1,015 |
| Subtotal Staff Cost | | | |
| | 66 | | \$ 2,180 |
| Council and Committee Meeting cost each | | | \$ 1,500 |
| Total Absorbed Costs | | | \$ 3,680 |

MAJOR OBJECTS OF EXPENDITURE

| PERSONAL SERVICES: | NUMBER OF POSITIONS | | 2020-2021 | 2021-2022 |
|---------------------------|---------------------|-------|--------------|--------------|
| | 20-21 | 21-22 | EXPENDITURES | EXPENDITURES |
| Benefits..... | | | | |
| Operating..... | | | | |
| Travel..... | | | | |
| Capital Outlay..... | | | | |
| Aid..... | | | \$442,500 - | \$442,500 - |
| | | | \$1,770,000 | \$1,770,000 |
| Capital Improvements..... | | | | |
| TOTAL..... | | | | |

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

2020

LB⁽¹⁾ 963

FISCAL NOTE

State Agency OR Political Subdivision Name: ⁽²⁾ Dept. of Administrative Services (DAS) – Risk Management Division

Prepared by: ⁽³⁾ Allen D. Simpson Date Prepared: ⁽⁴⁾ 1/14/2020 Phone: ⁽⁵⁾ (402)471-4436

ESTIMATE PROVIDED BY STATE AGENCY OR POLITICAL SUBDIVISION

| | FY 2020-21 | | FY 2021-22 | |
|-----------------|------------------|--------------|------------------|--------------|
| | EXPENDITURES | REVENUE | EXPENDITURES | REVENUE |
| GENERAL FUNDS | _____ | _____ | _____ | _____ |
| CASH FUNDS | _____ | _____ | _____ | _____ |
| FEDERAL FUNDS | _____ | _____ | _____ | _____ |
| REVOLVING FUNDS | _____ | _____ | _____ | _____ |
| TOTAL FUNDS | <u>See Below</u> | <u>_____</u> | <u>See Below</u> | <u>_____</u> |

Explanation of Estimate:

LB 963 explains how the first responder provides evidence of personal injury that is a mental injury or mental illness. The Department of Health and Human Services (DHHS) shall reimburse the first responder for the cost of annual resilience training not reimbursed by the first responder’s employer. DHHS shall maintain records of those first responders who have completed the annual resilience training. The bill would include the following mental health professional: practicing physician, physician assistant, advance registered nurse, mental health practitioner, or a clergy member who could determine mental injury and mental illness.

The State’s first responders currently have the ability to file a workers’ compensation claim for mental injury or mental illness. Current law requires the first responder to establish that a) the employment conditions that caused the mental injury or illness were extraordinary and unusual, and b) there is medical causation between the mental injury or illness and the employment conditions by medical evidence. The workers’ compensation court currently only considers opinions from physicians, psychologists and physical therapists as to mental injury or illness. This bill expands those who could determine mental injury and mental illness.

Additionally, this bill also creates another way of establishing a mental injury or illness that is caused by employment conditions. By providing for another method to establish mental injury or mental illness and by expanding the scope of who may determine if there is a mental injury or illness, it is foreseeable that there may be additional claims and payments. The amount of additional claims and payments is not foreseeable, however.

BREAKDOWN BY MAJOR OBJECTS OF EXPENDITURE

Personal Services:

| POSITION TITLE | NUMBER OF POSITIONS | | 2020-21 | 2021-22 |
|---------------------------|---------------------|-------|--------------|--------------|
| | 20-21 | 21-22 | EXPENDITURES | EXPENDITURES |
| Benefits..... | _____ | _____ | _____ | _____ |
| Operating..... | _____ | _____ | _____ | _____ |
| Travel..... | _____ | _____ | _____ | _____ |
| Capital outlay..... | _____ | _____ | _____ | _____ |
| Aid..... | _____ | _____ | _____ | _____ |
| Capital improvements..... | _____ | _____ | _____ | _____ |
| TOTAL..... | _____ | _____ | _____ | _____ |

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

2020

LB⁽¹⁾ 963

FISCAL NOTE

State Agency OR Political Subdivision Name: ⁽²⁾ Nebraska Workers' Compensation Court

Prepared by: ⁽³⁾ Jill Gradwohl Schroeder Date Prepared: ⁽⁴⁾ January 16, 2020 Phone: ⁽⁵⁾ 402.471.3602

ESTIMATE PROVIDED BY STATE AGENCY OR POLITICAL SUBDIVISION

| | <u>FY 2020-21</u> | | <u>FY 2021-22</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:

LB 963 is not expected to have a direct fiscal impact upon the operations of the Nebraska Workers' Compensation Court.

BREAKDOWN BY MAJOR OBJECTS OF EXPENDITURE

Personal Services:

| <u>POSITION TITLE</u> | <u>NUMBER OF POSITIONS</u> | | <u>2020-21 EXPENDITURES</u> | <u>2021-22 EXPENDITURES</u> |
|---------------------------|----------------------------|--------------|---------------------------------|---------------------------------|
| | <u>20-21</u> | <u>21-22</u> | | |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| Benefits..... | _____ | _____ | _____ | _____ |
| Operating..... | _____ | _____ | _____ | _____ |
| Travel..... | _____ | _____ | _____ | _____ |
| Capital outlay..... | _____ | _____ | _____ | _____ |
| Aid..... | _____ | _____ | _____ | _____ |
| Capital improvements..... | _____ | _____ | _____ | _____ |
| TOTAL..... | _____ | _____ | _____ | _____ |

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

2020

LB⁽¹⁾ 963

FISCAL NOTE

State Agency OR Political Subdivision Name: ⁽²⁾ Nebraska State Patrol

Prepared by: ⁽³⁾ Carol Aversman Date Prepared: ⁽⁴⁾ 1/21/2020 Phone: ⁽⁵⁾ _____

ESTIMATE PROVIDED BY STATE AGENCY OR POLITICAL SUBDIVISION

| | <u>FY 2020-21</u> | | <u>FY 2021-22</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>2020-21</u> | <u>2021-22</u> |
|---------------------------|----------------------------|--------------|---------------------|---------------------|
| | <u>20-21</u> | <u>21-22</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.

2020

LB⁽¹⁾ 963

FISCAL NOTE

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

Prepared by: ⁽³⁾ Jo Leyland Date Prepared: ⁽⁴⁾ 01/15/2020 Phone: ⁽⁵⁾ 308-882-4368

ESTIMATE PROVIDED BY STATE AGENCY OR POLITICAL SUBDIVISION

| | <u>FY 2020-21</u> | | <u>FY 2021-22</u> | |
|--------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| | <u>EXPENDITURES</u> | <u>REVENUE</u> | <u>EXPENDITURES</u> | <u>REVENUE</u> |
| GENERAL FUNDS | <u>25000.00</u> | <u>00</u> | <u>6000.00</u> | <u>00</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>25000.00</u> | <u>00</u> | <u>6000.00</u> | <u>00</u> |

Explanation of Estimate:

Estimating that all first responders would be required to have an initial mental health evaluation, plus any additional members that are added through the year. In addition, there would be costs to develop resilience training guidelines and provide such training to first responders. Additional years would require training, with only the new responders needing evaluations.

BREAKDOWN BY MAJOR OBJECTS OF EXPENDITURE

Personal Services:

| <u>POSITION TITLE</u> | <u>NUMBER OF POSITIONS</u> | | <u>2020-21 EXPENDITURES</u> | <u>2021-22 EXPENDITURES</u> |
|---------------------------|-----------------------------|-----------------------------|---------------------------------|---------------------------------|
| | <u>20-21</u> | <u>21-22</u> | | |
| Benefits..... | <u> </u> | <u> </u> | <u> </u> | <u> </u> |
| Operating..... | <u> </u> | <u> </u> | <u> </u> | <u> </u> |
| Travel..... | <u> </u> | <u> </u> | <u>5000.00</u> | <u>2000.00</u> |
| Capital outlay..... | <u> </u> | <u> </u> | <u> </u> | <u> </u> |
| Aid..... | <u> </u> | <u> </u> | <u>20000.00</u> | <u>4000.00</u> |
| Capital improvements..... | <u> </u> | <u> </u> | <u> </u> | <u> </u> |
| TOTAL..... | <u> </u> | <u> </u> | <u>25000.00</u> | <u>6000.00</u> |

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

2020

LB⁽¹⁾ 963

FISCAL NOTE

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

Prepared by: ⁽³⁾ James Van Bruggen Date Prepared: ⁽⁴⁾ 1/21/20 Phone: ⁽⁵⁾ 402-441-8301

ESTIMATE PROVIDED BY STATE AGENCY OR POLITICAL SUBDIVISION

| | <u>FY 2020-21</u> | | <u>FY 2021-22</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:

Overall fiscal impact is minimal.

BREAKDOWN BY MAJOR OBJECTS OF EXPENDITURE

Personal Services:

| <u>POSITION TITLE</u> | <u>NUMBER OF POSITIONS</u> | | <u>2020-21</u> | <u>2021-22</u> |
|---------------------------|----------------------------|--------------|---------------------|---------------------|
| | <u>20-21</u> | <u>21-22</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.

2020

LB⁽¹⁾ 963

FISCAL NOTE

State Agency OR Political Subdivision Name: ⁽²⁾ Lancaster County Sheriff's Office

Prepared by: ⁽³⁾ Terry Wagner Date Prepared: ⁽⁴⁾ 01/15/2020 Phone: ⁽⁵⁾ 402 441-6500

ESTIMATE PROVIDED BY STATE AGENCY OR POLITICAL SUBDIVISION

| | <u>FY 2020-21</u> | | <u>FY 2021-22</u> | |
|--------------------|---------------------|----------------|---------------------|----------------|
| | <u>EXPENDITURES</u> | <u>REVENUE</u> | <u>EXPENDITURES</u> | <u>REVENUE</u> |
| GENERAL FUNDS | \$2,800 | | \$2,800 | |
| CASH FUNDS | | | | |
| FEDERAL FUNDS | | | | |
| OTHER FUNDS | | | | |
| TOTAL FUNDS | <u>\$2,800</u> | | <u>\$2,800</u> | |

Explanation of Estimate:

This is the cost for all of our deputies to attend a one day training session. This does not include the cost of the instructor which could double the amount.

BREAKDOWN BY MAJOR OBJECTS OF EXPENDITURE

Personal Services:

| <u>POSITION TITLE</u> | <u>NUMBER OF POSITIONS</u> | | <u>2020-21</u> | <u>2021-22</u> |
|---------------------------|----------------------------|--------------|---------------------|---------------------|
| | <u>20-21</u> | <u>21-22</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.

2020

LB⁽¹⁾ 963

FISCAL NOTE

State Agency OR Political Subdivision Name: ⁽²⁾ Sarpy County

Prepared by: ⁽³⁾ William E. Conley Date Prepared: ⁽⁴⁾ 1/23/2020 Phone: ⁽⁵⁾ 402-593-5958

ESTIMATE PROVIDED BY STATE AGENCY OR POLITICAL SUBDIVISION

| | <u>FY 2020-21</u> | | <u>FY 2021-22</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>2020-21</u> | <u>2021-22</u> |
|---------------------------|----------------------------|--------------|---------------------|---------------------|
| | <u>20-21</u> | <u>21-22</u> | <u>EXPENDITURES</u> | <u>EXPENDITURES</u> |
| _____ | _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ | _____ |
| Benefits..... | _____ | _____ | _____ | _____ |
| Operating..... | _____ | _____ | _____ | _____ |
| Travel..... | _____ | _____ | _____ | _____ |
| Capital outlay..... | _____ | _____ | _____ | _____ |
| Aid..... | _____ | _____ | _____ | _____ |
| Capital improvements..... | _____ | _____ | _____ | _____ |
| TOTAL..... | _____ | _____ | _____ | _____ |