

FISCAL NOTE
 LEGISLATIVE FISCAL ANALYST ESTIMATE

ESTIMATE OF FISCAL IMPACT – STATE AGENCIES *				
	FY 2008-09		FY 2009-10	
	EXPENDITURES	REVENUE	EXPENDITURES	REVENUE
GENERAL FUNDS	255,123		630,234	
CASH FUNDS				
FEDERAL FUNDS	324,445		847,955	
OTHER FUNDS				
TOTAL FUNDS	579,568		1,478,189	

*Does not include any impact on political subdivisions. See narrative for political subdivision estimates.

This bill establishes the Medicaid Insurance for Workers with Disabilities Act. This bill would expand Medicaid coverage to included individuals with disabilities whose income is below 450% of poverty (\$46,800 for one; \$63,000 for two and \$79,200 for a family of three) and who would otherwise no longer qualify for Medicaid because they have been determined to have a medically improved condition. The person must continue to have a severe medically determined impairment. Allowable assets limits are \$20,000 for an individual, \$30,000 for a two-person household and \$40,000 for a family of three or more. Recipients with family incomes at 100% or more of poverty may be required to pay a premium based on a sliding fee scale which cannot exceed 7% of the family's unearned income and 3% of the family's earned income. The department is required to provide training to staff on the program, conduct outreach and submit an annual report to the legislature. The Medicaid Insurance for Workers with Disabilities Program Advisory Committee is established.

Nebraska currently provides Medicaid coverage to individuals with incomes up to 250% of poverty and are disabled and working or have a medically improved condition and are working. The individuals who would qualify under this bill would otherwise be ineligible for Medicaid when their income exceeds 250% of poverty or they have a medically improved condition. Approximately 200 additional people would be covered. The average cost per month, net an estimated 7.5% of premiums, is \$521,568 (\$221,123 GF and \$300,445 FF) for a partial year in FY 09. The cost would be \$1,420,189 (\$596,234 GF and \$823,955 FF) in FY 10. Additional disability reviews would cost \$48,000 (\$24,000 GF and FF) annually.

The Medicaid Insurance for Workers with Disabilities Program Advisory Committee would cost approximately \$10,000. Half of the membership is composed of state agency employees. It is assumed these employees costs would be reimbursed from their respective agency budgets and would have a minimal impact on those budgets. Eight other members would be individuals with disabilities who are employed and employed individuals with medically improved conditions. Their travel expenses would be reimbursed and other accommodations may be required.