PREPARED BY: DATE PREPARED: PHONE: Mikayla Findlay March 13, 2025 402-471-0062 **LB 336** 

Revision: 00

## **FISCAL NOTE**

**LEGISLATIVE FISCAL ANALYST ESTIMATE** 

ESTIMATE OF FISCAL IMPACT – STATE AGENCIES (See narrative for political subdivision estimates)					
	FY 2025-26		FY 2026-27		
_	EXPENDITURES	REVENUE	EXPENDITURES	REVENUE	
GENERAL FUNDS					
CASH FUNDS					
FEDERAL FUNDS					
OTHER FUNDS					
TOTAL FUNDS					

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

No fiscal impact.

ADMIN	NISTRATIVE SERVIC	ES STATE BUDGET DIVISION: RE	VIEW OF AGENCY & POLT. SUB. RESPONSE	
LB: 336	AM:	AGENCY/POLT. SUB: Departr	ment of Health and Human Services	
REVIEWED	BY: Ryan Yang	DATE: 2/1/2025	PHONE: (402) 471-4178	
COMMENTS: No basis to disagree with the Department of Health and Human Services assessment of no fiscal impact from LB 336.				

## LB<sub>(1)</sub> 336 FISCAL NOTE 2025

		ED DI SIAIE AGENCY UR	POLITICAL SUBDIVISION		
State Agency or Political Subdiv	rision Name:(2) Departr	ment of Health and Human	Services		
Prepared by: (3) John Meals	Date Prepared 1-30-25  FY 2025-2026		Phone: (5) 471-6719 FY 2026-2027		
<u>E</u>	EXPENDITURES	REVENUE	EXPENDITURES	REVENUE	
GENERAL FUNDS					
CASH FUNDS					
FEDERAL FUNDS					
OTHER FUNDS					
TOTAL FUNDS	\$0	\$0	\$0	\$0	

## Explanation of Estimate:

LB336 establishes a task force to study supported employment and provide recommendations to the Legislature, the Governor and state agencies. LB336 requires that an employee from both the behavioral health division and the developmental disabilities division of the Department of Health and Human Services be nonvoting members of this task force.

PERSONAL SERVICES:   NUMBER OF POSITIONS   2025-2026   2026-2027   26-26   26-27   EXPENDITURES   EXPENDITURES	MAJOR OBJECTS OF EXPENDITURE					
POSITION TITLE  26-26  26-27  EXPENDITURES  EXPENDITURES  EXPENDITURES  EXPENDITURES   Capital Improvements.		IO OI EXI EIVE	TORL			
Operating	POSITION TITLE					
Operating						
Operating						
Operating						
Operating						
Operating						
Travel	Benefits					
Capital Outlay	Operating					
Aid						
Capital Improvements	Capital Outlay					
	Aid					
**************************************	Capital Improvements					
	TOTAL		_	\$0	\$0	