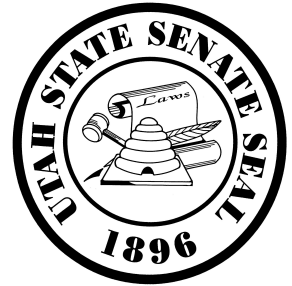




Fiscal Note

S.B. 164

2015 General Session
Access to Health Care Amendments
by Shiozawa, B.



General, Education, and Uniform School Funds

JR4-5-101

	Ongoing	One-time	Total
Net GF/EF/USF (rev.-exp.)	\$(38,882,300)	\$48,214,300	\$9,332,000

State Government

UCA 36-12-13(2)(b)

Enacting this bill could increase federal funds receipts by the following amounts: \$2.9 million in FY 2015, \$350.7 million in FY 2016, \$461.6 million in FY 2017, and \$550 million in FY 2020, the last full fiscal year of the program. Enactment of this legislation could reduce year end transfers to the General Fund from the Insurance Department Restricted Account by \$85,000 ongoing beginning in FY 2016 and by \$5,600 one-time in FY 2015 and FY 2016.

Revenues	<i>FY 2015</i>	<i>FY 2016</i>	<i>FY 2017</i>
General Fund	\$0	\$(85,000)	\$(85,000)
General Fund Restricted	\$5,600	\$90,600	\$85,000
Federal Funds	\$2,887,700	\$350,661,400	\$461,597,200
General Fund, One-Time	\$(5,600)	\$(5,600)	\$0
Total Revenues	\$2,887,700	\$350,661,400	\$461,597,200

Enacting this bill could increase total costs for Medicaid by an estimated \$3.8 million in FY 2015, \$340 million in FY 2016 and \$465 million in FY 2017. By FY 2020, the last full fiscal year of the program, the total cost increase could be around \$590 million. In fiscal year FY 2016, federal funding will cover these cost increases and reduce the State's share of costs. Impacts to the General Fund could be a \$0.9 million one-time cost in FY 2015, a savings of \$10.3 million in FY 2016, and a \$1.4 million cost in FY 2017. By FY 2020 the bill's General Fund cost could be an estimated \$40 million. Enactment of this legislation could cost the Department of Insurance \$85,000 ongoing beginning in FY 2016 from the Insurance Department Restricted Account and \$5,600 one-time in FY 2015 and FY 2016. If enactment of this bill results in more currently eligible, but not enrolled Medicaid clients signing up for Medicaid, then there could be costs of \$10.6 million General Fund and \$24.0 million federal funds in FY 2016 and \$25.2 million General Fund and \$60.9 million federal funds in FY 2020. If everyone eligible enrolled for Medicaid under enactment of this bill, total costs could increase for Medicaid by an estimated \$3.8 million in FY 2015, \$760 million in FY 2016 and \$965 million in FY 2017. By FY 2020 the total cost increase could be around \$1,235 million. In FY 2017 costs to the General Fund could be \$12.1 million. By FY 2020 the bill's General Fund cost could be an estimated \$90 million.

Expenditures	<i>FY 2015</i>	<i>FY 2016</i>	<i>FY 2017</i>
General Fund	\$0	\$38,797,300	\$38,797,300
Federal Funds	\$2,887,700	\$350,661,400	\$461,597,200
General Fund Restricted	\$5,600	\$90,600	\$85,000
General Fund, One-Time	\$934,000	\$(49,159,500)	\$(37,500,000)
Total Expenditures	\$3,827,300	\$340,389,800	\$462,979,500

Net All Funds	\$(939,600)	\$10,271,600	\$(1,382,300)
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Local Government

UCA 36-12-13(2)(c)

Local government mental health and substance abuse services will be replaced with full Medicaid coverage at a higher federal match rate for 10,600 individuals which generates General Fund savings of about \$2,000,000 in FY 2016. These savings then decline annually beginning in FY 2017 to about \$1,600,000 by FY 2020. County governments will also see savings for newly eligible inmates for Medicaid to cover some inpatient hospital medical costs.

Up to 72,500 recipients could begin paying existing Medicaid co-pays and other related costs beginning in FY 2016 in exchange for expanded services.

Performance Note

JR4-2-404

Required of the Health and due by February 06, 2015

Notes on Notes

Fiscal notes estimate the direct costs or revenues of enacting a bill. The Legislature uses them to balance the budget. They do not measure a bill's benefits or non-fiscal impacts like opportunity costs, wait times, or inconvenience. A fiscal note is not an appropriation. The Legislature decides appropriations separately.