

Multiple Agency Fiscal Note Summary

Bill Number: 5502 2S SB AMH APP H1889.1	Title: Sub. use disorder treatment
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Estimated Cash Receipts

Agency Name	2023-25			2025-27			2027-29		
	GF-State	NGF-Outlook	Total	GF-State	NGF-Outlook	Total	GF-State	NGF-Outlook	Total
Washington State Health Care Authority	0	0	133,000	0	0	94,000	0	0	94,000
Washington State Health Care Authority	In addition to the estimate above, there are additional indeterminate costs and/or savings. Please see individual fiscal note.								
Total \$	0	0	133,000	0	0	94,000	0	0	94,000

Estimated Operating Expenditures

Agency Name	2023-25				2025-27				2027-29			
	FTEs	GF-State	NGF-Outlook	Total	FTEs	GF-State	NGF-Outlook	Total	FTEs	GF-State	NGF-Outlook	Total
Washington State Health Care Authority	.7	131,000	131,000	264,000	.7	92,000	92,000	186,000	.7	92,000	92,000	186,000
Washington State Health Care Authority	In addition to the estimate above, there are additional indeterminate costs and/or savings. Please see individual fiscal note.											
Department of Corrections	12.0	3,408,000	3,408,000	3,408,000	12.0	3,348,000	3,348,000	3,348,000	12.0	3,348,000	3,348,000	3,348,000
Department of Corrections	In addition to the estimate above, there are additional indeterminate costs and/or savings. Please see individual fiscal note.											
Total \$	12.7	3,539,000	3,539,000	3,672,000	12.7	3,440,000	3,440,000	3,534,000	12.7	3,440,000	3,440,000	3,534,000

Estimated Capital Budget Expenditures

Agency Name	2023-25			2025-27			2027-29		
	FTEs	Bonds	Total	FTEs	Bonds	Total	FTEs	Bonds	Total
Washington State Health Care Authority	.0	0	0	.0	0	0	.0	0	0
Department of Corrections	.0	0	0	.0	0	0	.0	0	0
Total \$	0.0	0	0	0.0	0	0	0.0	0	0

Estimated Capital Budget Breakout

Prepared by: Cynthia Hollimon, OFM	Phone: (360) 810-1979	Date Published: Final 4/21/2023
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Individual State Agency Fiscal Note

Bill Number: 5502 2S SB AMH APP H1889.1	Title: Sub. use disorder treatment	Agency: 107-Washington State Health Care Authority
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Part I: Estimates

No Fiscal Impact

Estimated Cash Receipts to:

ACCOUNT	FY 2024	FY 2025	2023-25	2025-27	2027-29
General Fund-Federal 001-2	86,000	47,000	133,000	94,000	94,000
Total \$	86,000	47,000	133,000	94,000	94,000

In addition to the estimates above, there are additional indeterminate costs and/or savings. Please see discussion.

Estimated Operating Expenditures from:

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	0.7	0.7	0.7	0.7	0.7
Account					
General Fund-State 001-1	85,000	46,000	131,000	92,000	92,000
General Fund-Federal 001-2	86,000	47,000	133,000	94,000	94,000
Total \$	171,000	93,000	264,000	186,000	186,000

In addition to the estimates above, there are additional indeterminate costs and/or savings. Please see discussion.

Estimated Capital Budget Impact:

NONE

The cash receipts and expenditure estimates on this page represent the most likely fiscal impact. Factors impacting the precision of these estimates, and alternate ranges (if appropriate), are explained in Part II.

Check applicable boxes and follow corresponding instructions:

- If fiscal impact is greater than \$50,000 per fiscal year in the current biennium or in subsequent biennia, complete entire fiscal note form Parts I-V.
- If fiscal impact is less than \$50,000 per fiscal year in the current biennium or in subsequent biennia, complete this page only (Part I).
- Capital budget impact, complete Part IV.
- Requires new rule making, complete Part V.

Legislative Contact: Yvonne Walker	Phone: 360-786-7841	Date: 04/12/2023
Agency Preparation: Cari Tikka	Phone: 360-725-1181	Date: 04/18/2023
Agency Approval: Cliff Hicks	Phone: 360-725-0875	Date: 04/18/2023
OFM Review: Arnel Blancas	Phone: (360) 000-0000	Date: 04/18/2023

Part II: Narrative Explanation

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

Significant provisions of the bill and any related workload or policy assumptions that have revenue or expenditure impact on the responding agency by section number.

See attached narrative.

II. B - Cash receipts Impact

Cash receipts impact of the legislation on the responding agency with the cash receipts provisions identified by section number and when appropriate, the detail of the revenue sources. Description of the factual basis of the assumptions and the method by which the cash receipts impact is derived. Explanation of how workload assumptions translate into estimates. Distinguished between one time and ongoing functions.

See attached narrative.

II. C - Expenditures

Agency expenditures necessary to implement this legislation (or savings resulting from this legislation), with the provisions of the legislation that result in the expenditures (or savings) identified by section number. Description of the factual basis of the assumptions and the method by which the expenditure impact is derived. Explanation of how workload assumptions translate into cost estimates. Distinguished between one time and ongoing functions.

See attached narrative.

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

Account	Account Title	Type	FY 2024	FY 2025	2023-25	2025-27	2027-29
001-1	General Fund	State	85,000	46,000	131,000	92,000	92,000
001-2	General Fund	Federal	86,000	47,000	133,000	94,000	94,000
Total \$			171,000	93,000	264,000	186,000	186,000

In addition to the estimates above, there are additional indeterminate costs and/or savings. Please see discussion.

III. B - Expenditures by Object Or Purpose

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	0.7	0.7	0.7	0.7	0.7
A-Salaries and Wages	53,000	53,000	106,000	106,000	106,000
B-Employee Benefits	17,000	18,000	35,000	36,000	36,000
C-Professional Service Contracts					
E-Goods and Other Services	81,000	2,000	83,000	4,000	4,000
G-Travel					
J-Capital Outlays					
M-Inter Agency/Fund Transfers					
N-Grants, Benefits & Client Services					
P-Debt Service					
S-Interagency Reimbursements					
T-Intra-Agency Reimbursements	20,000	20,000	40,000	40,000	40,000
9-					
Total \$	171,000	93,000	264,000	186,000	186,000

In addition to the estimates above, there are additional indeterminate costs and/or savings. Please see discussion.

III. C - Operating FTE Detail: List FTEs by classification and corresponding annual compensation. Totals need to agree with total FTEs in Part I and Part IIIA

Job Classification	Salary	FY 2024	FY 2025	2023-25	2025-27	2027-29
Fiscal Analyst 3	65,000	0.2	0.2	0.2	0.2	0.2
IT Data Management - Journey	106,000	0.5	0.5	0.5	0.5	0.5
Total FTEs		0.7	0.7	0.7	0.7	0.7

III. D - Expenditures By Program (optional)

Program	FY 2024	FY 2025	2023-25	2025-27	2027-29
Medical Assistance (200)	171,000	93,000	264,000	186,000	186,000
Total \$	171,000	93,000	264,000	186,000	186,000

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

Acquisition and construction costs not reflected elsewhere on the fiscal note and description of potential financing methods.

NONE

IV. D - Capital FTE Detail: *FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part IVB.*

NONE

None

Part V: New Rule Making Required

Provisions of the bill that require the agency to adopt new administrative rules or repeal/revise existing rules.

HCA Fiscal Note

Bill Number: 5502 2SSB AMH APP H1889.1

HCA Request #: 23-248

Part II: Narrative Explanation

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

AN ACT Relating to ensuring necessary access to Substance Use Disorder (SUD) treatment for individuals entering the Graduated Reentry Program (GRE) at the Department of Corrections (DOC).

This amendment makes the following changes to the second substitute bill:

- Instead of requiring DOC to monitor and update treatment plans, requires DOC to provide GRE participants with access to self-administered fentanyl testing supplies and medications designed to reverse the effects of opioid overdose, when clinically appropriate.
- Extends the reporting period from the prior calendar month to the prior 12 months for data on GRE participants receiving SUD treatment.
- Requires DOC to share data with the Health Care Authority (HCA) on GRE participants.
- Adds a null and void clause.

Section 1(4)(b) requires DOC to conduct a comprehensive assessment for SUD prior to transferring an incarcerated individual into the GRE. If the individual is assessed to have a substance use disorder, DOC is required to assist the offender in enrolling in SUD treatment, if available, as deemed appropriate by department. Offenders transferred to participate in the graduated reentry program must begin receiving SUD treatment services as soon as practicable after transfer to avoid any delays in treatment. SUD treatment services shall include access to medication-assisted treatment (MOUD) and counseling. Upon transfer to GRE, when clinically appropriate, individuals must be provided with access to self-administered fentanyl testing supplies and medications designed to reverse the effects of opioid overdose.

Section 1(10)(b) requires HCA to report monthly to DOC on the number of offenders in the GRE program who received SUD outpatient treatment, while in the community, during the prior 12 months.

II. B - Cash Receipts Impact

Indeterminate.

HCA assumes the fiscal impacts associated with the staff cost will be eligible for a federal match rate of 50 percent.

II. B - Estimated Cash Receipts to:

ACCOUNT	FY-2024	FY-2025	FY-2026	FY-2027	FY-2028	FY-2029	2023-25	2025-27	2027-29
General Fund-Medicaid 001-C	86,000	47,000	47,000	47,000	47,000	47,000	133,000	94,000	94,000
Totals	\$ 86,000	\$ 47,000	\$ 47,000	\$ 47,000	\$ 47,000	\$ 47,000	\$ 133,000	\$ 94,000	\$ 94,000

II. C – Expenditures

The fiscal impact is greater than \$50,000 but indeterminate to actual cost.

This bill amends RCW 9.94A.733 – Home Detention – Graduated Reentry Program – Requirements for Department – to require comprehensive SUD assessments and treatment services for incarcerated individuals entering the GRE. This bill requires HCA to identify graduated re-entry program clients, create a count of substance use disorder services for 12-months prior, and transfer those data to DOC. It also requires HCA to change or update contracts for sharing these data. This report would require monthly ingestion of new data sources, client matching, data analysis, and reporting to DOC. This amount of work is estimated to require 0.5 FTEs at the IT Data Management - Journey level and require contract resources for IT system updates. Since this bill targets a very small population of DOC

HCA Fiscal Note

Bill Number: 5502 2SSB AMH APP H1889.1

HCA Request #: 23-248

clients who receive SUD services, it will increase the risk that a client is identified for SUD services being utilized. HCA assumes this bill will have an indeterminate fiscal impact.

Apple Health:

Greater promotion and support of the referral to SUD behavioral health treatment agencies and MOUD providers in the re-entry population, could drive higher utilization of behavioral health services in Medicaid populations. However, the financial impact would be hard to determine and likely captured in usual agency rate setting.

II. C - Operating Budget Expenditures

Account	Account Title	Type	FY-2024	FY-2025	FY-2026	FY-2027	FY-2028	FY-2029	2023-25	2025-27	2027-29
001-1	General Fund	State	85,000	46,000	46,000	46,000	46,000	46,000	131,000	92,000	92,000
001-C	General Fund	Medicaid	86,000	47,000	47,000	47,000	47,000	47,000	133,000	94,000	94,000
Totals			\$ 171,000	\$ 93,000	\$ 93,000	\$ 93,000	\$ 93,000	\$ 93,000	\$ 264,000	\$ 186,000	\$ 186,000

II. C - Expenditures by Object Or Purpose

	FY-2024	FY-2025	FY-2026	FY-2027	FY-2028	FY-2029	2023-25	2025-27	2027-29
FTE	0.7	0.7	0.7	0.7	0.7	0.7	0.7	0.7	0.7
A	Salaries and Wages	53,000	53,000	53,000	53,000	53,000	106,000	106,000	106,000
B	Employee Benefits	17,000	18,000	18,000	18,000	18,000	35,000	36,000	36,000
E	Goods and Other Services	81,000	2,000	2,000	2,000	2,000	83,000	4,000	4,000
T	Intra-Agency Reimbursements	20,000	20,000	20,000	20,000	20,000	40,000	40,000	40,000
Totals		\$ 171,000	\$ 93,000	\$ 93,000	\$ 93,000	\$ 93,000	\$ 264,000	\$ 186,000	\$ 186,000

II. C - Operating FTE Detail: List FTEs by classification and corresponding annual compensation.

Job title	Salary	FY-2024	FY-2025	FY-2026	FY-2027	FY-2028	FY-2029	2023-25	2025-27	2027-29
FISCAL ANALYST 3	65,000	0.2	0.2	0.2	0.2	0.2	0.2	0.2	0.2	0.2
IT DATA MANAGEMENT - JOURNEY	106,000	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5	0.5
Totals		0.7	0.7	0.7	0.7	0.7	0.7	0.7	0.7	0.7

II. C - Expenditures By Program (optional)

Program	FY-2024	FY-2025	FY-2026	FY-2027	FY-2028	FY-2029	2023-25	2025-27	2027-29
200 200 - HCA - Other	171,000	93,000	93,000	93,000	93,000	93,000	264,000	186,000	186,000
Totals		\$ 171,000	\$ 93,000	\$ 93,000	\$ 93,000	\$ 93,000	\$ 264,000	\$ 186,000	\$ 186,000

HCA Administrative Costs

HCA requests \$264,000 and .7 Full Time Equivalent (FTE) staff in the 2023-25 Biennium.

.5 FTE IT Data Management - Journey (permanent) to identify GRE program clients who received SUD outpatient treatment, create a monthly count of substance use disorder services, and transfer those data to DOC in Section 1(10)(b) of the bill. Annual salary and benefit cost \$73,000.

One-time IT System Updates - HCA does not currently collect the data needed to support the requirements of this bill and will require one-time funding of \$79,000 in state fiscal year 2024 to implement this bill.

Other FTE costs

0.2 FTE Administrative costs are calculated at \$39,000 per 1.0 FTE. This cost is included in Object T based on HCA's federally approved cost allocation plan and are captured and/or included as Fiscal Analyst 3 classification. Total annual cost is \$20,000.

Part IV: Capital Budget Impact

None

Part V: New Rule Making Require

None

Individual State Agency Fiscal Note

Bill Number: 5502 2S SB AMH APP H1889.1	Title: Sub. use disorder treatment	Agency: 310-Department of Corrections
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Part I: Estimates

No Fiscal Impact

Estimated Cash Receipts to:

NONE

Estimated Operating Expenditures from:

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	12.0	12.0	12.0	12.0	12.0
Account					
General Fund-State 001-1	1,734,000	1,674,000	3,408,000	3,348,000	3,348,000
Total \$	1,734,000	1,674,000	3,408,000	3,348,000	3,348,000

In addition to the estimates above, there are additional indeterminate costs and/or savings. Please see discussion.

Estimated Capital Budget Impact:

NONE

The cash receipts and expenditure estimates on this page represent the most likely fiscal impact. Factors impacting the precision of these estimates, and alternate ranges (if appropriate), are explained in Part II.

Check applicable boxes and follow corresponding instructions:

- If fiscal impact is greater than \$50,000 per fiscal year in the current biennium or in subsequent biennia, complete entire fiscal note form Parts I-V.
- If fiscal impact is less than \$50,000 per fiscal year in the current biennium or in subsequent biennia, complete this page only (Part I).
- Capital budget impact, complete Part IV.
- Requires new rule making, complete Part V.

Legislative Contact: Yvonne Walker	Phone: 360-786-7841	Date: 04/12/2023
Agency Preparation: Amanda Pierpoint	Phone: (360) 725-8428	Date: 04/17/2023
Agency Approval: Ronell Witt	Phone: (360) 489-4417	Date: 04/17/2023
OFM Review: Cynthia Hollimon	Phone: (360) 810-1979	Date: 04/21/2023

Part II: Narrative Explanation

II. A - Brief Description Of What The Measure Does That Has Fiscal Impact

Significant provisions of the bill and any related workload or policy assumptions that have revenue or expenditure impact on the responding agency by section number.

The purpose of this bill is to ensure necessary access to substance use disorder (SUD) treatment for individuals entering the Graduated Reentry (GRE) program at the Department of Corrections (DOC), and amends RCW 9.94A.733.

SB 5502 states the following:

Section 1(4)(a) states that all offenders placed on home detention as part of the GRE program must provide an approved residence and living arrangement prior to transfer to home detention.

Section 1(4)(b) states that DOC may not transfer an offender to participate in GRE until DOC has conducted a comprehensive assessment for SUD. If the assessment indicates the offender suffers from a SUD, the offender may not be transferred until enrollment and receiving SUD treatment has occurred and deemed appropriate by DOC. Offenders enrolled in appropriate SUD treatment services and transferred to participate in GRE must begin receiving SUD treatment services as soon as practicable after transfer to avoid any delays in treatment. SUD treatment services include, as deemed necessary by DOC, access to medication-assisted treatment (MAT) and counseling programs.

SSB 5502 amends the following sections:

Section 1(4)(b) removes the requirement that an offender be enrolled in SUD treatment services in order to be transferred to the GRE program; and states that DOC will assist the offender in enrolling in SUD treatment services, if available, for offenders assessed to have a SUD.

Effective date is assumed 90 days after adjournment of session in which this bill is passed.

2SSB 5502 amends the following sections:

Section 1(4)(b) adds new language to the bill that states that while the offender is waiting placement into SUD treatment in the community, DOC must regularly monitor the offender for substance use and make changes to the treatment plan accordingly.

Section 1(10)(a)(i) is a new subsection added to the bill that states beginning July 1, 2023, DOC must collect data and post to DOC's website monthly, the number of offenders who were transferred to the GRE program who were assessed to have a SUD during the prior calendar month.

Section 1(10)(a)(ii) is a new subsection added to the bill that states beginning July 1, 2023, DOC must collect data and post to DOC's website monthly, the number of offenders in the GRE program in the prior calendar month who received: outpatient SUD treatment, inpatient SUD treatment, and both outpatient and inpatient SUD treatment.

Section 1(10)(b) is a new subsection added to the bill that states beginning July 1, 2023, Health Care Authority (HCA) must report monthly to DOC the number of offenders in the GRE program who received SUD outpatient treatment while in the community during the prior calendar month.

Effective date is assumed 90 days after adjournment of session in which this bill is passed.

5502-S2 AMH CSJR WEHL 177 keeps the same language as the 2SSB which states:

This bill states that an individual must be assessed for SUD before transferring to the GRE program. If a disorder is

identified, DOC must assist the individual in enrolling into SUD treatment services. The level of service will vary, depending on the assessment, and shall include access to medication-assisted treatment and counseling.

It also states that individuals participating in the GRE program must begin receiving SUD treatment services as soon as practicable after transfer to the program. DOC must regularly monitor the individual for substance use until treatment begins. DOC must make changes to treatment plans based on this monitoring.

Beginning July 2023, DOC is required to provide monthly reports that include: the number of individuals transferred to GRE program with SUD and the number of individuals in the GRE program who received outpatient SUD treatment, inpatient SUD treatment, and outpatient and inpatient SUD treatment.

Also beginning in July 2023, Health Care Authority must report monthly to DOC the number of individuals in the GRE program who received SUD outpatient treatment in the prior month.

This bill takes effect 90 days after adjournment of the session in which the bill is passed.

5502-2S SB AMH APP H1889.1 is a striker bill that states the following:

This bill states that DOC must provide individuals, when clinically appropriate based off their comprehensive assessment for SUD, with access to self-administered fentanyl testing supplies and medications designed to reverse the effects of opioid overdose.

This bill also includes reporting requirements that states DOC must post information on their website about the number of offenders who received substance use disorder treatment in the GRE program during the prior 12 months.

Another reporting requirement this bill states is that DOC must provide data to HCA about offenders participating in the GRE program.

Section 2 added to state that if specific funding for the purposes of this act, referencing this act by bill or chapter number, is not provided by June 30, 2023, in the omnibus appropriations act, this act is null and void.

II. B - Cash receipts Impact

Cash receipts impact of the legislation on the responding agency with the cash receipts provisions identified by section number and when appropriate, the detail of the revenue sources. Description of the factual basis of the assumptions and the method by which the cash receipts impact is derived. Explanation of how workload assumptions translate into estimates. Distinguished between one time and ongoing functions.

None.

II. C - Expenditures

Agency expenditures necessary to implement this legislation (or savings resulting from this legislation), with the provisions of the legislation that result in the expenditures (or savings) identified by section number. Description of the factual basis of the assumptions and the method by which the expenditure impact is derived. Explanation of how workload assumptions translate into cost estimates. Distinguished between one time and ongoing functions.

We assume this bill will have a determinate fiscal impact of \$1,734,000 in Fiscal Year (FY) 2024 and \$1,674,000 in FY2025 and each FY thereafter for staffing needs. It is indeterminate the fiscal impact this bill will incur for treatment related costs.

In regard to section 1(4)(a) and 1(4)(b), this bill adds a new requirement for offenders to meet before being eligible for GRE transfer. Before being transferred, every offender must have a comprehensive assessment for SUD. As of 12/31/2022, DOC has an average of 335 individuals in their GRE population. With this volume, the current 3.0 Program Specialist 4 FTEs that are assessing for SUD would not be sufficient with this proposed legislation of assessing all offenders before transferring to GRE.

To meet this requirement, DOC would need to hire 8.0 FTEs at the Program Specialist 4 job class. This would add a

Program Specialist 4 at each of the remaining prison facilities where there is not currently a staff member assessing for SUD.

Section 1(4)(a) and 1(4)(b) also proposes that if deemed necessary based on the SUD assessment, DOC will assist the offender in enrolling in SUD treatment, if available, as deemed appropriate by the department. DOC is unable to accurately estimate how many offenders screened would require treatment based on their SUD assessment, therefore, DOC would true up costs associated with treatment in a future decision package.

To meet this requirement, DOC would need to hire 3.0 FTEs at the Corrections Specialist 3 (CS3) job class that would assist with scheduling both internal and external appointments with community resources upon transition into the GRE program, which based on regional availability on where the incarcerated individual is located and the treatment service locations. DOC has 6 Community Justice Centers (CJC’s) where the 3.0 CS3’s would cover the regional needs. These CS3's would also have the specificity of diagnostics that the CCO/Specialists cannot give to the community SUD agencies. These positions would also be able to reassess incarcerated individuals as needed, have access to the clinical information that is protected by CFR 42 and help directly transfer records to the provider in the community. These positions would also ensure that medical benefits are coordinated and navigational pathways into treatment are advocated for the incarcerated individual.

Section 1(10)(a)(i) and 1(10)(a)(ii) state that on a monthly basis, DOC will collect data and post to their website the number of offenders that were transferred to GRE that were deemed to have SUD based off their assessment, and the number of offenders who received inpatient and outpatient treatment for SUD in the prior calendar month.

To accomplish this new reporting requirement, DOC is requesting 1.0 FTE in the Management Analyst 5 job class to take on this data collecting, analysis and reporting.

DOC also requests \$50,000 each fiscal year to supply each individual reentering the community with Narcan and fentanyl test strips. Providing these tools to individuals is a key step to ending overdoses in the community.

Anticipated costs in FY2024: 12 FTEs and \$1,734,000 in funds, inclusive of all FTE costs.

Anticipated costs in FY2025 and each fiscal year thereafter: 12 FTEs and \$1,674,000 in funds, inclusive of all FTE costs.

The DOC also requests funding for the indirect costs of agency administration which includes 1.4 FTEs and \$147,000 in FY2024, and ongoing, for the purpose of implementing this legislation. The approved agency indirect rate and associated cost of administration are calculated based on the salaries and benefits of staff conducting back office administrative functions, divided by all remaining salaries and benefits.

Part III: Expenditure Detail

III. A - Operating Budget Expenditures

Account	Account Title	Type	FY 2024	FY 2025	2023-25	2025-27	2027-29
001-1	General Fund	State	1,734,000	1,674,000	3,408,000	3,348,000	3,348,000
Total \$			1,734,000	1,674,000	3,408,000	3,348,000	3,348,000

In addition to the estimates above, there are additional indeterminate costs and/or savings. Please see discussion.

III. B - Expenditures by Object Or Purpose

	FY 2024	FY 2025	2023-25	2025-27	2027-29
FTE Staff Years	12.0	12.0	12.0	12.0	12.0
A-Salaries and Wages	991,000	991,000	1,982,000	1,982,000	1,982,000
B-Employee Benefits	348,000	348,000	696,000	696,000	696,000
C-Professional Service Contracts					
E-Goods and Other Services	97,000	97,000	194,000	194,000	194,000
G-Travel	86,000	86,000	172,000	172,000	172,000
J-Capital Outlays	65,000	5,000	70,000	10,000	10,000
M-Inter Agency/Fund Transfers					
N-Grants, Benefits & Client Services					
P-Debt Service					
S-Interagency Reimbursements					
T-Intra-Agency Reimbursements	147,000	147,000	294,000	294,000	294,000
9-					
Total \$	1,734,000	1,674,000	3,408,000	3,348,000	3,348,000

In addition to the estimates above, there are additional indeterminate costs and/or savings. Please see discussion.

III. C - Operating FTE Detail: List FTEs by classification and corresponding annual compensation. Totals need to agree with total FTEs in Part I and Part IIIA

Job Classification	Salary	FY 2024	FY 2025	2023-25	2025-27	2027-29
Corrections Specialist 3	87,834	3.0	3.0	3.0	3.0	3.0
Management Analyst 5	91,525	1.0	1.0	1.0	1.0	1.0
Program Specialist 4	83,566	8.0	8.0	8.0	8.0	8.0
Total FTEs		12.0	12.0	12.0	12.0	12.0

III. D - Expenditures By Program (optional)

Program	FY 2024	FY 2025	2023-25	2025-27	2027-29
Administration & Support Services (100)	284,000	279,000	563,000	558,000	558,000
Healthcare Services (500)	50,000	50,000	100,000	100,000	100,000
Interagency Payments (600)	23,000	23,000	46,000	46,000	46,000
Offender Change (700)	1,377,000	1,322,000	2,699,000	2,644,000	2,644,000
Total \$	1,734,000	1,674,000	3,408,000	3,348,000	3,348,000

Part IV: Capital Budget Impact

IV. A - Capital Budget Expenditures

NONE

IV. B - Expenditures by Object Or Purpose

NONE

IV. C - Capital Budget Breakout

Acquisition and construction costs not reflected elsewhere on the fiscal note and description of potential financing methods.

NONE

IV. D - Capital FTE Detail: FTEs listed by classification and corresponding annual compensation. Totals agree with total FTEs in Part IVB.

NONE

None.

Part V: New Rule Making Required

Provisions of the bill that require the agency to adopt new administrative rules or repeal/revise existing rules.