

# Multiple Agency Fiscal Note Summary

<b>Bill Number:</b> 1066 HB	<b>Title:</b> Regulated substance use data
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## Estimated Cash Receipts

NONE

## Estimated Operating Expenditures

Agency Name	2025-27				2027-29				2029-31			
	FTEs	GF-State	NGF-Outlook	Total	FTEs	GF-State	NGF-Outlook	Total	FTEs	GF-State	NGF-Outlook	Total
Washington State Health Care Authority	.0	0	0	0	.0	0	0	0	.0	0	0	0
Liquor and Cannabis Board	.1	0	0	73,289	.0	0	0	1,200	.0	0	0	1,200
Department of Health	.5	170,000	170,000	170,000	.4	150,000	150,000	150,000	.4	150,000	150,000	150,000
<b>Total \$</b>	<b>0.6</b>	<b>170,000</b>	<b>170,000</b>	<b>243,289</b>	<b>0.4</b>	<b>150,000</b>	<b>150,000</b>	<b>151,200</b>	<b>0.4</b>	<b>150,000</b>	<b>150,000</b>	<b>151,200</b>

## Estimated Capital Budget Expenditures

Agency Name	2025-27			2027-29			2029-31		
	FTEs	Bonds	Total	FTEs	Bonds	Total	FTEs	Bonds	Total
Washington State Health Care Authority	.0	0	0	.0	0	0	.0	0	0
Liquor and Cannabis Board	.0	0	0	.0	0	0	.0	0	0
Department of Health	.0	0	0	.0	0	0	.0	0	0
<b>Total \$</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>	<b>0.0</b>	<b>0</b>	<b>0</b>

## Estimated Capital Budget Breakout

<b>Prepared by:</b> Gwen Stamey, OFM	<b>Phone:</b> (360) 790-1166	<b>Date Published:</b> Final 1/20/2025
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# Individual State Agency Fiscal Note

<b>Bill Number:</b> 1066 HB	<b>Title:</b> Regulated substance use data	<b>Agency:</b> 107-Washington State Health Care Authority
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## Part I: Estimates

**No Fiscal Impact**

**Estimated Cash Receipts to:**

NONE

**Estimated Operating Expenditures from:**

NONE

**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: Peter Clodfelter	Phone: 360-786-7127	Date: 01/08/2025
Agency Preparation: Melinda Helberg	Phone: 360-725-0000	Date: 01/13/2025
Agency Approval: Eric Fiedler	Phone: 360-725-0490	Date: 01/13/2025
OFM Review: Arnel Blancas	Phone: (360) 000-0000	Date: 01/14/2025

## 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.*

Section 1(1) requires the board to consult with the Health Care Authority (HCA) and other agencies to publish substance use data annually.

Section 1(2)(g) requires HCA to report available data to the board.

No fiscal impact, the requirements of this bill can be absorbed using existing resources.

### 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.*

Administrative Cost Impact:

No fiscal impact, the requirements of this bill can be absorbed using existing resources.

HCA assumes that Section 1(2)(g) reference to "available data" means the agency is only responsible to providing the information if it is "available" as a complete and final data product, and that no new analytic work is required. HCA assumes that the Board will not need significant consultation or involvement from HCA. Because of these assumptions, no fiscal impact is identified. Only a subset of the identified data metrics are available so HCA's data contributions will be limited.

If the above assumption is incorrect, there will be significant resources (clinical and analytic) required to produce the new and complex metrics.

Public Employees Benefits Board (PEBB) and School Employees Benefits Board (SEBB) Program Service-related Impact:

No fiscal impact.

Apple Health Service-related Impact:

No fiscal impact.

HCA program divisions will provide general consultation which will be absorbed within their existing staff resources.

## Part III: Expenditure Detail

### III. A - Operating Budget Expenditures

NONE

### III. B - Expenditures by Object Or Purpose

NONE

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

NONE

**III. D - Expenditures By Program (optional)**

NONE

**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

**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: 1066 HB

HCA Request #: 25-005

Title: Regulated Substance Use Data

## Part I: Estimates

No Fiscal Impact

### Estimated Cash Receipts to:

NONE

### Estimated Operating Expenditures from:

NONE

### 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.

# HCA Fiscal Note

Bill Number: 1066 HB

HCA Request #: 25-005

Title: Regulated Substance Use Data

## 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.*

Section 1(1) requires the board to consult with the Health Care Authority (HCA) and other agencies to publish substance use data annually.

Section 1(2)(g) requires HCA to report available data to the board.

No fiscal impact, the requirements of this bill can be absorbed using existing resources.

### 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. Distinguish 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. Distinguish between one time and ongoing functions.*

### Administrative Cost Impact

No fiscal impact, the requirements of this bill can be absorbed using existing resources.

HCA assumes that Section 1(2)(g) reference to "available data" means the agency is only responsible to providing the information if it is "available" as a complete and final data product, and that no new analytic work is required. HCA assumes that the Board will not need significant consultation or involvement from HCA. Because of these assumptions, no fiscal impact is identified. Only a subset of the identified data metrics are available so HCA's data contributions will be limited.

If the above assumption is incorrect, there will be significant resources (clinical and analytic) required to produce the new and complex metrics.

### Public Employees Benefits Board (PEBB) and School Employees Benefits Board (SEBB) Program Service-related Impact

No fiscal impact.

### Apple Health Service-related Impact

No fiscal impact.

# HCA Fiscal Note

Bill Number: 1066 HB

HCA Request #: 25-005

Title: Regulated Substance Use Data

HCA program divisions will provide general consultation which will be absorbed within their existing staff resources.

## **Part III: Expenditure Detail**

### **III. A - Operating Budget Expenditure**

NONE

### **III. B - Expenditures by Object Or Purpose**

NONE

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

NONE

### **III. D - Expenditures By Program (optional)**

NONE

## **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

## HCA Fiscal Note

Bill Number: 1066 HB

HCA Request #: 25-005

Title: Regulated Substance Use Data

### **Part V: New Rule Making Required**

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

**NONE**



# Individual State Agency Fiscal Note

<b>Bill Number:</b> 1066 HB	<b>Title:</b> Regulated substance use data	<b>Agency:</b> 195-Liquor and Cannabis Board
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## Part I: Estimates

**No Fiscal Impact**

### Estimated Cash Receipts to:

NONE

### Estimated Operating Expenditures from:

	FY 2026	FY 2027	2025-27	2027-29	2029-31
FTE Staff Years	0.2	0.0	0.1	0.0	0.0
<b>Account</b>					
Liquor Revolving Account-State 501-1	72,689	600	73,289	1,200	1,200
<b>Total \$</b>	72,689	600	73,289	1,200	1,200

### 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:

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- 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: Peter Clodfelter	Phone: 360-786-7127	Date: 01/08/2025
Agency Preparation: Colin O Neill	Phone: (360) 664-4552	Date: 01/13/2025
Agency Approval: Aaron Hanson	Phone: 360-664-1701	Date: 01/13/2025
OFM Review: Gwen Stamey	Phone: (360) 790-1166	Date: 01/14/2025

## 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.*

(1) The board, in consultation with the department of health, the health care authority, and other agencies the board deems appropriate, shall publish in a conspicuous location on the board's website and update, at least annually, the information identified in subsection (2) of this section.

(2) The following information, identified separately for each substance regulated by the Board, must be published under this section:

(a) Compliance rates, with all personally identifiable information redacted, regarding the board's enforcement of laws or rules prohibiting the sale of liquor, cannabis, cigarettes, tobacco products, and vapor products to persons under 21 years of age;

(b) The number of citations, with all personally identifiable information redacted, issued annually for violations of laws or rules prohibiting the sale of liquor, cannabis, cigarettes, tobacco products, or vapor products to persons under 21 years of age;

(c) The number of citations, with all personally identifiable information redacted, issued annually for violations of laws or rules prohibiting the sale, service, or delivery of liquor to an intoxicated person or a person who is apparently under the influence of liquor, and for violations of laws or rules prohibiting the purchase or consumption of liquor by a person who is apparently under the influence of liquor;

(d) Data from the healthy youth survey about youth use, access, and perceptions of liquor, cannabis, cigarettes, tobacco products, and vapor products in Washington;

(e) Information reported to the board from the department of health or the health care authority about the prevalence in Washington state of the use of alcohol, cannabis, cigarettes, tobacco products, and vapor products;

(f) Information reported to the board by the department of health and the health care authority about the amount and source of funding appropriated or available per fiscal year to the department of health and the health care authority for programs for preventing and deterring the use of liquor, cannabis, cigarettes, tobacco products, and vapor products and treating substance use disorders related to these regulated substances;

(g) Available data reported to the board by the department of health or the health care authority about:

(i) Annual health care expenditures in the state caused by liquor, cannabis, cigarettes, tobacco products, and vapor products;

(ii) Annual state medicaid total health expenditures caused by consumption or use of liquor, cannabis, cigarettes, tobacco products, and vapor products;

(iii) Cessation expenditures for cigarettes or tobacco products through the school employees' benefits board and the public employees' benefits board;

(iv) Annual deaths in Washington caused by smoking or consuming cigarettes, tobacco products, alcohol, vapor products, or cannabis;

(v) State spending on tobacco prevention and cessation funding as compared to funding levels recommended by the United States centers for disease control and prevention;

(vi) Health equity metrics including disparities in the rates of diseases or disorders caused by or associated with the consumption or use of alcohol, cannabis, cigarettes, tobacco products, and vapor products; and

(vii) Demographic impact metrics including disparities in the rates of consumption or use of alcohol, cannabis, cigarettes, tobacco products, and vapor products; and

(h) The amount of the following taxes, fees, and penalties collected by the state in the most recent fiscal year:

(i) Taxes collected from the sale of liquor, cannabis, cigarettes, tobacco products, and vapor products;

(ii) License fees collected related to the manufacture, distribution, and sale of liquor, cannabis, cigarettes, tobacco products, and vapor products; and

(iii) Money received from penalties imposed by the board on licensees for violations of laws related to the manufacture,

distribution, or sale of liquor, cannabis, cigarettes, tobacco products, or vapor products.

(i) The number of occurrences of, and economic impact on the regulated market from inversion and diversion of cannabis and cannabis products.

## 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.*

## 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.*

The bill requires that the LCB create a detailed dashboard which analyzes and displays public health data from the LCB, DSHS, HCA, and DOH. This dashboard will be created through the agency's Director's Office, specifically through the Research Team.

The Information Technology Division (ITS) supports the Research team by ensuring they have access to the complete, accurate, digestible data they need in order to carry out their mandates.

In order to provide this support, ITS will need to work with each of these external agencies to:

- Create DSAs which reflect the newly-shared data or amend existing DSAs
- Establish Managed File Transfers to facilitate the consistent and secure sharing of the required data

Because the requested data has not been shared previously between these agencies and the LCB, ITS does not know the level of complexity that performing these tasks will entail. The scope of the data, as well as its current method of storage, is currently unknown to the LCB, and will require additional time and collaboration with these agencies to understand. However, because the data must only be refreshed yearly according to the bill, no interfaces/API connections will be established. This reduces the time and complexity.

The LCB will need to dedicate meaningful Business/System Analyst time to ensuring that quality data is procured and provided to the Research Team. Additionally, the Agency will require PowerBI and Fabric-specific training across the Research, Product Management, and Application teams in order to understand how this dashboard will be incorporated into the agency environment.

Finally, the LCB will need to store data and dashboards in the agency's cloud storage environment, which will incur a monthly cost.

NOTE: Because of the necessary additional training, number of external agencies the LCB needs to collaborate with in order to obtain the data, as well as the amount of time needed for Research personnel to clean up and present the data (7-10 months), it would not be possible to present the dashboard within 3 months post-session, and the timetable is closer to 10 months to implement.

Cost breakdown:

Data replications - \$150/hr x 100 hrs = \$15,000

Microsoft PowerBI and Fabric Training - \$150/hr x 160 hrs = \$24,000

0.2 FTE IT App Development - Senior/Specialist - \$33,089 in FY26 (\$32,783 salary/benefits, \$306 in associated costs).

Additional cloud storage: \$600/year ongoing

### Part III: Expenditure Detail

#### III. A - Operating Budget Expenditures

Account	Account Title	Type	FY 2026	FY 2027	2025-27	2027-29	2029-31
501-1	Liquor Revolving Account	State	72,689	600	73,289	1,200	1,200
<b>Total \$</b>			72,689	600	73,289	1,200	1,200

#### III. B - Expenditures by Object Or Purpose

	FY 2026	FY 2027	2025-27	2027-29	2029-31
FTE Staff Years	0.2		0.1		
A-Salaries and Wages	25,436		25,436		
B-Employee Benefits	7,347		7,347		
C-Professional Service Contracts					
E-Goods and Other Services	39,906	600	40,506	1,200	1,200
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					
9-					
<b>Total \$</b>	72,689	600	73,289	1,200	1,200

#### 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 2026	FY 2027	2025-27	2027-29	2029-31
IT App Development - Senior/Specialist	127,176	0.2		0.1		
<b>Total FTEs</b>		0.2		0.1		0.0

#### III. D - Expenditures By Program (optional)

Program	FY 2026	FY 2027	2025-27	2027-29	2029-31
Information Technology Division (070)	72,689	600	73,289	1,200	1,200
<b>Total \$</b>	72,689	600	73,289	1,200	1,200

### 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

**Part V: New Rule Making Required**

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

# Individual State Agency Fiscal Note

<b>Bill Number:</b> 1066 HB	<b>Title:</b> Regulated substance use data	<b>Agency:</b> 303-Department of Health
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## Part I: Estimates

No Fiscal Impact

### Estimated Cash Receipts to:

NONE

### Estimated Operating Expenditures from:

	FY 2026	FY 2027	2025-27	2027-29	2029-31
FTE Staff Years	0.5	0.4	0.5	0.4	0.4
<b>Account</b>					
General Fund-State      001-1	95,000	75,000	170,000	150,000	150,000
<b>Total \$</b>	95,000	75,000	170,000	150,000	150,000

### 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: Peter Clodfelter	Phone: 360-786-7127	Date: 01/08/2025
Agency Preparation: Katherine Wolf	Phone: 3602363000	Date: 01/17/2025
Agency Approval: Kristin Bettridge	Phone: 3607911657	Date: 01/17/2025
OFM Review: Amy Hatfield	Phone: (360) 280-7584	Date: 01/20/2025

## 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.*

This bill adds a new section to chapter 66.08 RCW requiring the Liquor and Cannabis Board (LCB), in consultation with the Health Care Authority (HCA), Department of Health (DOH), and other agencies, to publish and annually update a public dashboard with specified information and data related to liquor, cannabis, tobacco products and vapor products in Washington. For each of these substances, Section 1 requires the dashboard to include the following information in consultation with DOH and HCA:

- 1.2.d: Data from the healthy youth survey about youth use, access, and perceptions of these products
- 1.2.e: Information reported to LCB about the prevalence of the use of these products
- 1.2.f: Information reported to LCB about the amount and source of funding for prevention programs for these products
- 1.2.g(i): Annual health care expenditures in the state
- 1.2.g(ii): Annual state Medicaid total health expenditures caused
- 1.2.g(iii): Cessation expenditures for cigarettes for tobacco products through the school and the public employees' benefits board
- 1.2.g(iv): Annual deaths in Washington
- 1.2.g(v): State spending on tobacco prevention and cessation funding as compared to funding levels recommended by United States centers for disease control and prevention
- 1.2.g(vi): Health equity metrics including disparities in the rates of diseases or disorders caused by or associated with the consumption
- 1.2.g(vii): Demographic impact metrics including disparities in the rates of consumption

### 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.*

### 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.*

Division of Prevention and Community Health (PCH) Impact:

DOH's Youth Cannabis and Commercial Tobacco Program (YCCTPP) would be impacted and required to provide information associated with program's efforts to prevent and deter use of cannabis, cigarettes, tobacco products. Access to data indicators outlined within the bill will enable multiple programs throughout PCH (e.g., YCCTPP, Comprehensive Cancer, Oral Health, and others) to employ data-driven, evidence-based strategies to reduce the burden of diseases and disparities related to the use of regulated substances.

0.30 FTE Epidemiologist 2 – Dashboard and Data Manager (FY26 and 0.20 FTE FY27 and ongoing)

This position will oversee DOH data collection/repacking efforts and maintain data sharing agreements with relevant parties. Responsible for coordinating the DOH related data reporting that is required by the legislature for the substance use data dashboard, working with team members of YCCTPP to ensure data is collected annually and submitted to the LCB to be posted. Additionally, it will provide input into the dashboard development in partnership with LCB, HCA, School Board of Health (SBOH) and other relevant agencies. This position also provides education to staff on the dashboard, including updates during the development, training on dashboard use once finalized, and relevant updates to the metrics monitored.

Division of Office of Health and Science (OHS) Impact:

Center for Epidemiologist Practice, Equity and Assessment (CEPEA) would be impacted to establish, define, and analyze health equity metrics for inclusion in data visualizations.

0.20 FTE Epidemiologist 2 – Health Equity Analyst (FY26 and ongoing)

This position is to establish, define, and analyze health equity metrics for inclusion in data visualizations. This involves conducting a review of the literature, combining and managing data for statistical and epidemiologic analyses, conducting statistical and epidemiologic analyses, consulting with subject matter experts and partners, creating data visualizations, and updating data visualizations on the required schedule. The position will work with DOH YCCTPP program staff and Epi to coordinate with other partners at LCB, HCA, SBOH and other state agencies on data incorporated on the dashboard

Total Yearly Costs to Implement this Bill:

FY26: 0.5 FTE and \$95,000 (GF-S)  
 FY27 and ongoing: 0.4 FTE and \$75,000 (GF-S)

Total FY costs and FTE can include staff and associated expenses, including goods and services, travel, intra-agency, and indirect/overhead personnel/costs.

**Part III: Expenditure Detail**

**III. A - Operating Budget Expenditures**

Account	Account Title	Type	FY 2026	FY 2027	2025-27	2027-29	2029-31
001-1	General Fund	State	95,000	75,000	170,000	150,000	150,000
<b>Total \$</b>			95,000	75,000	170,000	150,000	150,000

**III. B - Expenditures by Object Or Purpose**

	FY 2026	FY 2027	2025-27	2027-29	2029-31
FTE Staff Years	0.5	0.4	0.5	0.4	0.4
A-Salaries and Wages	53,000	42,000	95,000	84,000	84,000
B-Employee Benefits	18,000	14,000	32,000	28,000	28,000
E-Goods and Other Services	19,000	15,000	34,000	30,000	30,000
T-Intra-Agency Reimbursements	5,000	4,000	9,000	8,000	8,000
9-					
<b>Total \$</b>	95,000	75,000	170,000	150,000	150,000

**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 2026	FY 2027	2025-27	2027-29	2029-31
EPIDEMIOLOGIST 2 (NON-MEDICAL)	105,612	0.5	0.4	0.5	0.4	0.4
<b>Total FTEs</b>		0.5	0.4	0.5	0.4	0.4

**III. D - Expenditures By Program (optional)**

Program	FY 2026	FY 2027	2025-27	2027-29	2029-31
Office of Health & Science (010)	33,000	32,000	65,000	64,000	64,000
Division of Prevention and Community Health (070)	50,000	33,000	83,000	66,000	66,000
Administration (090)	12,000	10,000	22,000	20,000	20,000
<b>Total \$</b>	95,000	75,000	170,000	150,000	150,000

**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

**Part V: New Rule Making Required**

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