

**FISCAL NOTE**  
**Requested by Legislative Council**  
**04/23/2019**

Amendment to: Engrossed HB 1194

- 1 A. **State fiscal effect:** *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

	2017-2019 Biennium		2019-2021 Biennium		2021-2023 Biennium	
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds
<b>Revenues</b>			\$2,954,445	\$11,817,781	\$3,412,930	\$13,651,718
<b>Expenditures</b>			\$(7,386,113)	\$11,817,781	\$(8,532,324)	\$13,651,718
<b>Appropriations</b>						

- 1 B. **County, city, school district and township fiscal effect:** *Identify the fiscal effect on the appropriate political subdivision.*

	2017-2019 Biennium	2019-2021 Biennium	2021-2023 Biennium
<b>Counties</b>			
<b>Cities</b>			
<b>School Districts</b>			
<b>Townships</b>			

- 2 A. **Bill and fiscal impact summary:** *Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).*

HB 1194 creates a tribal health care coordination fund and 60% of the general fund savings from care coordination would be deposited into the fund.

- B. **Fiscal impact sections:** *Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.*

HB 1194 section 1 requires the Department to facilitate tribal care coordination agreements. This will generate general fund savings due to federal policy that allows 100% federal financing for services rendered to Medicaid-eligible Indian Health Services/Tribal 638 beneficiaries under a care coordination agreement. These savings are to be tracked by the Department, 60% of the savings is to be deposited in the Tribal Health Care Coordination Fund and are to be used by the tribes for health-related purposes. The remaining 40% shall be returned to the state general fund. For the 2019-2021 biennium, the total savings are projected to be \$7,386,113, of which \$4,431,668 will go to the Tribal Health Care Coordination Fund and \$2,954,445 will go to the general fund.

The projected impact for the 2021 – 2023 biennium is \$8,532,324, of which \$5,119,394 will go to the Tribal Health Care Coordination Fund and \$3,412,930 will go to the general fund.

With the emergency clause the department does not expect a significant impact for the 17 – 19 biennium.

3. **State fiscal effect detail:** *For information shown under state fiscal effect in 1A, please:*

- A. **Revenues:** *Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.*

The services provided under Section 1 of HB 1194 under a care coordination agreement are eligible for 100% federal financing.

The State will recognize revenue from the deposit of the savings amount from Tribal Care Coordination agreements that are to be split 60/40 between the Tribal Health Care Coordination Fund and the General Fund.

**B. Expenditures:** *Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.*

HB 1194 section 1 requires the Department to facilitate tribal care coordination agreements. This will generate general fund savings due to federal policy that allows 100% federal financing for services rendered to Medicaid-eligible Indian Health Services/Tribal 638 beneficiaries under a care coordination agreement. These savings are to be tracked by the Department, 60% of the savings is to be deposited in the Tribal Health Care Coordination Fund and are to be used by the tribes for health-related purposes. The remaining 40% shall be returned to the state general fund. For the 2019-2021 biennium, the total savings are projected to be \$7,386,113, of which \$4,431,668 will go to the Tribal Health Care Coordination Fund and \$2,954,445 will go to the general fund.

The projected impact for the 2021 – 2023 biennium is \$8,532,324, of which \$5,119,394 will go to the Tribal Health Care Coordination Fund and \$3,412,930 will go to the general fund.

With the emergency clause the department does not expect a significant impact for the 17 – 19 biennium.

**C. Appropriations:** *Explain the appropriation amounts. Provide detail, when appropriate, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation or a part of the appropriation is included in the executive budget or relates to a continuing appropriation.*

Section 1 contains continuing appropriation authority to disperse funds from the Tribal Health Care Coordination Fund, the Department will need an additional \$7,386,113 of federal authority for services rendered under a care coordination agreement that are eligible for 100% federal financing in the 19 – 21 biennium.

For the 21 – 23 biennium the Department will need an additional \$8,532,324 of federal authority for services rendered under a care coordination agreement that are eligible for 100% federal financing.

With the emergency clause the department does not expect a significant impact for the 17 – 19 biennium.

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