

**FISCAL NOTE**

**LEGISLATIVE FISCAL ANALYST ESTIMATE**

Revised to include provisions of AM 816 and AM 1711

<b>ESTIMATE OF FISCAL IMPACT – STATE AGENCIES (See narrative for political subdivision estimates)</b>					
<b>EXPENDITURES</b>	<b>GENERAL</b>	<b>CASH</b>	<b>FEDERAL</b>	<b>REVOLVING</b>	<b>TOTAL</b>
FY2025-2026	0	0	0	0	0
FY2026-2027	9,634	0	15,476	0	25,110
FY2027-2028	19,268	0	30,952	0	50,220
FY2028-2029	19,268	0	30,952	0	50,220
<b>REVENUE</b>	<b>GENERAL</b>	<b>CASH</b>	<b>FEDERAL</b>	<b>REVOLVING</b>	<b>TOTAL</b>
FY2025-2026	0	0	0	0	0
FY2026-2027	0	0	0	0	0
FY2027-2028	0	0	0	0	0
FY2028-2029	0	0	0	0	0

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

This bill as amended requires coverage for self-measure blood pressure monitors and associated services for pregnant and post partum women under the medical assistance program, Medicaid, no later than January 1, 2027.

The Department of Health and Human Services (DHHS) estimates the costs of including this service for this population is \$50,220 for a full year. This estimate is based on 279 clients taking up the service and \$15 monthly service fee. The fiscal impact does not account for the cost of the monitors as previous fiscal notes did, which would add \$80 per monitor for an estimated additional cost of \$22,320 in the first year; Blood-pressure monitors would not necessarily need annual replacement however the devices would need to be purchased for each new client and the devices would degrade over time. For this fiscal note DHHS utilizes a fund mix assumption of 61.63% for both fiscal years based on a blended Federal Medical Assistance Percentage (FMAP) that combines higher federal participation for the Medicaid expansion population and a lower federal participation for regular Medicaid. The estimate appears to be reasonable.

ADMINISTRATIVE SERVICES STATE BUDGET DIVISION: REVIEW OF AGENCY & POLT. SUB. RESPONSE

LB: 365 AM: 816, 1711 AGENCY/POLT. SUB: Nebraska Department of Health & Human Services

REVIEWED BY: Ann Linneman DATE: 2-2-2026 PHONE: (402) 471-4180

COMMENTS: Concur with the Nebraska Department of Health and Human Services' assessment of fiscal impact.

**ESTIMATE PROVIDED BY STATE AGENCY OR POLITICAL SUBDIVISION**

State Agency or Political Subdivision Name:(2) Department of Health and Human Services

Prepared by: (3) John Meals

Date Prepared 2-2-2026

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	<u>FY 2026-2027</u>		<u>FY 2027-2028</u>	
	<u>EXPENDITURES</u>	<u>REVENUE</u>	<u>EXPENDITURES</u>	<u>REVENUE</u>
<b>GENERAL FUNDS</b>	\$9,634		\$19,268	
<b>CASH FUNDS</b>				
<b>FEDERAL FUNDS</b>	\$15,476		\$30,952	
<b>OTHER FUNDS</b>				
<b>TOTAL FUNDS</b>	\$25,110		\$50,220	

Return by date specified 72 hours prior to public hearing, whichever is earlier.

**Explanation of Estimate:**

LB365 AM816 AM1711 requires the Department of Health and Human Services (DHHS) to provide coverage and reimbursement for self-measure blood pressure monitoring services for pregnant and postpartum women eligible under Nebraska Medicaid by January 1, 2027. Covered services include patient education and training on the set-up and usage of the device, separate self-measurement blood pressure readings, collection of data, and reporting to a health care provider to create or modify treatment plans.

In SFY 2025, there were 9,295 maternity kick payments. Assuming a 3% utilization rate for pregnant and postpartum women, services will be added for 279 members. For the services involving data collection, interpretation of results, and reporting, this fiscal note assumes a monthly cost of \$15 per member. For these 279 members, the result is an annual increase in aid expenditures of \$50,220. With an implementation date of January 1, 2027, the increase in expenditure for SFY 2027 is \$25,110 Total Funds (\$15,476 Federal Funds and \$9,634 General Funds). For SFY 2028, the increase is \$50,220 Total Funds (\$30,952 Federal Funds and \$19,268 General Funds). Based on the proportion of regular Medicaid members and expansion newly members, a blended FMAP of 61.63% was used for SFY 2027 and SFY 20278.

Other increases in aid expenditures will be minimal as a result of LB365 AM816 AM1711. Changes to fee schedules would need to be made. Approval from the Centers for Medicare and Medicaid (CMS) would be needed. The expenses related to the other increases in aid expenditures, and to the time and effort of changing fee schedules and receiving approval from CMS, would be absorbed by DHHS.

**MAJOR OBJECTS OF EXPENDITURE**

**PERSONAL SERVICES:**

POSITION TITLE	NUMBER OF POSITIONS		2026-2027	2027-2028
	26-27	27-28	EXPENDITURES	EXPENDITURES
Benefits.....				
Operating.....				
Travel.....				
Capital Outlay.....				
Aid.....			\$25,110	\$50,220
Capital Improvements.....				
<b>TOTAL.....</b>			<b>\$25,110</b>	<b>\$50,220</b>