

OFFICE OF FISCAL ANALYSIS

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sSB-331

AN ACT CONCERNING STATE MARSHALS' HEALTH BENEFITS. AMENDMENT

LCO No.: 4241

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Senate Calendar No.: 215

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 25 \$	FY 26 \$
State Comptroller - Fringe Benefits ¹	GF - Reduces Cost in Bill	1,265,000	1,844,000

Note: GF=General Fund

Municipal Impact: None

Explanation

The amendment places additional limitations on state marshals to qualify for health insurance coverage through plans procured by the Comptroller, resulting in a reduction of costs in the underlying bill for the state share of medical premiums by \$1.27 million in FY 25 and \$1.84 million in FY 26.

The original fiscal note estimated costs up to \$2.98 million in FY 25, and \$4.35 million in FY 26 associated with allowing state marshals to participate in the state employee health insurance plan. Based on the new estimate of qualifying state marshals, at a rate of approximately \$24,900 annually for the medical and prescription drug premiums, the state cost is estimated to be \$1.72 million for the partial year coverage in

¹The fringe benefit costs for most state employees are budgeted centrally in accounts administered by the Comptroller. The estimated active employee fringe benefit cost associated with most personnel changes is 41.25% of payroll in FY 25.

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FY 25, and \$2.51 million in FY 26, dependent on the number of participating state marshals and their level of coverage.

The preceding Fiscal Impact statement is prepared for the benefit of the members of the General Assembly, solely for the purposes of information, summarization and explanation and does not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

Sources: State Marshal Commission Healthcare Study, 2023