September 15, 2026

Julie Thomas
Deputy Director
900 SW Jackson, Suite 504
Topeka, Kansas 66612

Dear Ms. Thomas:

This budget document for fiscal year 2028 is respectfully submitted on behalf of the Health Care Stabilization Fund Board of Governors. Estimated expenditures were prepared in accordance with the instructions promulgated by the Division of the Budget.

Approximately 80% of our reportable expenditures each year are the product of court approved settlement agreements or jury awards that result in claim payments. We have no control over those expenditures and such payments are somewhat unpredictable. Expenses associated with settlements and jury trials are entirely dependent on the frequency and severity of claims and therefore are equally unpredictable. These claims expenses normally comprise about 15% of our reportable expenditures. The administrative overhead costs for our agency are normally only about five percent of total reportable expenditures.

The details of our estimated income and expenses have been submitted via the Internet Budget and Reporting System (IBARS). If there are questions about these details, or questions about the Health Care Provider Insurance Availability Act, our Board of Governors, or the operations of our agency, please contact me (Clark.D.Shultz@ks.gov).

Respectfully submitted,

Clark Shultz
HCSF Executive Director

Copies to: Brianna Horton, Legislative Research Department

AGENCY MISSION

The mission of the Health Care Stabilization Fund Board of Governors is to administer the Health Care Provider Insurance Availability Act in accordance with the duties and responsibilities set out in the Act. The principal goals are: (1) to assure that Kansas health care providers have access to adequate professional liability coverage, (2) to stabilize the medical professional liability insurance market for Kansas health care providers, and (3) to assure that sufficient assets are reserved to adequately fund accrued HCSF liabilities.

AGENCY PHILOSOPHY

The HCSF Board of Governors and staff have a statutory duty to assure that all operational activities and management decisions are in accordance with the Health Care Provider Insurance Availability Act. In addition, the Board has a statutory duty to protect the actuarial integrity of the Health Care Stabilization Fund by assuring that assets are equal to or exceed liabilities. The Board and the staff have a fiduciary duty to manage resources efficiently and to assure that surcharge revenues collected from health care providers are used appropriately.

PROGRAMS ESTABLISHED TO ACCOMPLISH THE AGENCY MISSION

1. Medical Professional Liability Coverage Program

This program is often referred to as the "compliance program," but it is not regulatory. The Compliance Section staff publishes the instructions needed by health care providers or their insurers to comply with the statutory professional liability insurance requirements stipulated in K.S.A. 40-3402 and K.S.A. 40-3404. The compliance auditors review documentation submitted by health care providers and insurers to assure that the information is accurate and complete and to assure that correct surcharge payments were paid. They then enter the information into the HCSF database such that each health care provider has an independent record, but the data can be aggregated and sorted for purposes of actuarial analysis. The Compliance program staff assist health care providers, their staff members, and insurers who need help or have unusual circumstances.

2. Medical Professional Liability Adjudication Program

This program is a function of the statutory liabilities of the Health Care Stabilization Fund. Expenditures in support of this program are either: (1) court-approved payment of settlements, (2) court-approved payment of jury awards, or (3) attorney fees, deposition costs, expert witness fees, and similar costs that are the direct result of claims activity. These expenditures are identifiable under budget units 2300 (claim expenses) and 2400 (claim payments). Because these costs are a product of civil litigation and claims are approved by the courts, the appropriation acts have always granted "no limit" expenditure authority for these cost categories.

3. Administrative Support Subprogram

Costs of this subprogram are allocated between the Coverage Program and the Adjudication Program. This subprogram includes activities of the Board of Governors, the executive staff, and the administrative support staff. In addition to salaries and benefits, other major operating costs include office rent, actuarial and other contractual services, and information technology costs, as well as routine office supplies.

STATUTORY HISTORY

The Health Care Provider Insurance Availability Act (K.S.A. 40-3401, *et seq*.) was enacted July 1, 1976. The original Act delegated responsibility for compliance activities and administration of the Health Care Stabilization Fund to the Commissioner of Insurance, whereas amendments enacted by the 1994 and 1995 Legislatures transferred those responsibilities to the Health Care Stabilization Fund Board of Governors. The Commissioner of Insurance appoints the eleven members of the Board of Governors. Principal features of the Act are:

- Establishes the Health Care Stabilization Fund, specifying that it "shall be held in trust in the state treasury and accounted for separately from other state funds;"
- Requires that all health care providers, as defined in the Act, who have an active license to render professional services in Kansas: (1) purchase basic professional liability insurance with limits not less than $500,000 per claim subject to not less than $1,500,000 annual aggregate coverage, and (2) participate in funding the Health Care Stabilization Fund via assessments (premium surcharges);
- Creates the Health Care Stabilization Fund Board of Governors and delegates responsibility to administer provisions of the Availability Act;
- Enumerates the liabilities of the Health Care Stabilization Fund and requires payment from the Fund when those liabilities occur;
- Establishes a joint underwriting association named the Health Care Provider Insurance Availability Plan governed by a separate Board of Directors that is also appointed by the Commissioner of Insurance.

As defined under K.S.A. 40-3401(f), the following health care providers are required to comply with provisions of the Act:

- Medical doctors, doctors of osteopathic medicine, and chiropractors who are licensed or hold a temporary permit issued by the Kansas Board of Healing Arts;
- Persons engaged in a postgraduate training program approved by the Kansas Board of Healing Arts (MDs, DOs, and DCs);
- Licensed podiatrists;
- Licensed physician assistants;
- Advanced practice nurse anesthetists and nurse midwives licensed by the Board of Nursing;
- Dentists who have been certified by the Kansas Board of Healing Arts to administer anesthetics;
- Licensed medical care facilities (hospitals, ambulatory surgical centers, and recuperation centers);
- Psychiatric hospitals (selected facilities only);
- Licensed mental health centers and clinics;
- Three categories of licensed adult care homes (nursing facilities, assisted living facilities, and residential health care facilities);

- Kansas professional corporations or partnerships organized by defined health care providers for the purpose of rendering health care services;
- Kansas limited liability companies organized for the purpose of rendering professional services by members who are health care providers as defined under the Act; and
- Certain Kansas non-profit corporations organized to render professional services by defined health care providers.

AGENCY-WIDE BUDGET OVERVIEW

Statutory Requirements: The Health Care Stabilization Fund was created by K.S.A. 40-3403(a) which prescribes that, "**The fund shall be held in trust in the state treasury and accounted for separately from other state funds**." Subsection (c) of that same section of the Statutes further stipulates that, "the fund shall be liable to pay:" and then enumerates seventeen specific financial responsibilities.

Sources of Funding: The Health Care Stabilization Fund is the source of revenue for the entire agency budget. Exclusively the Health Care Stabilization Fund funds all claim payments and claim related expenses.

Revenue: Subsection (a) of K.S.A. 40-3404 requires the Board of Governors to levy an annual premium surcharge on each health care provider for each year. This surcharge is an assessment for the professional liability coverage provided by the Health Care Stabilization Fund. The annual premium surcharge must be based on a rating classification system that is "reasonable, adequate, and not unfairly discriminating." These surcharges are the principal source of revenue for the Health Care Stabilization Fund, but the Stabilization Fund does receive some income in addition to the premium surcharges.

Investments: Stabilization Fund reserves for accrued liabilities are invested by the Pooled Money Investment Board and the investment earnings are a significant source of supplemental income to the Stabilization Fund. The HCSF cash flow is closely monitored to assure that reserves are properly invested in accordance with K.S.A. 40-3406 and the investment policy adopted by the Board of Governors. Ideally, there would never be any idle reserves, but in practice, the cash balance needed for near-term claim obligations as well as routine operating expenditures must be available at all times. This amount varies, requiring daily monitoring of cash flow.

Reimbursements: In 1989, the Legislature decided to self-insure the basic professional liability of residents in training as well as full time physician faculty members at the University of Kansas Medical Center (both Kansas City and Wichita). Responsibility for initial payment of claims and related expenses was delegated to the Stabilization Fund, to be subsequently reimbursed by the faculty foundations and the State of Kansas. This avoids the cost of expensive medical malpractice insurance premiums for residents in training as well as full time physician faculty members at KU Medical Center. Claims are managed by the HCSF Chief Counsel. There is no reimbursement to the HCSF for this administrative expense.

Claims: The most recent report from the Board's independent actuary estimates accrued liabilities as of June 30, 2026 amounting to $234.9 million. The report does not predict when those claims will be paid.

Past Legislation: House Substitute for Senate Bill 78 was enacted during the 2021 legislative session. This law eliminated the current three coverage level options for health care providers and creates two new coverage level options. The new law also granted the Board of Governors the authority to offer only one option if so desired. The Board voted in 2021 to offer only one coverage level for health care providers of $500,000. The Board evaluated a second coverage level option this year but made no motion to pursue it.

Current Legislation: The 2026 legislature enacted three pieces of legislation that will result in new groups of providers joining the Fund on January 1, 2028. These three groups include, 1) Optometrists who are credentialed to perform certain procedures, 2) Pharmacists who independently initiate therapy pursuant to state statute, and 3) Advance Practice Registered Nurses. In addition, the Board of Governors will add two new members resulting in a total of 13 board members. These additional groups will likely cause the Fund to be fully staffed at the current authorized level.

CURRENT FISCAL YEAR

Summary: It is important to note that the coding system in IBARS has not been modified to allow allocation of our administrative support costs between the two principal programs, Liability Coverage (a.k.a. Compliance) and Liability Adjudication (a.k.a. Claims). For this reason, our narrative will focus on the costs of state operations and the costs of adjudication of claims.

These cost categories are readily identifiable in prior fiscal years and provide the opportunity for logical analysis of trends. Conceptually, all administrative support costs are allocated to the Liability Coverage Program and in IBARS, these costs are labeled "Administration Program." The total budget amounting to $75,176,772 includes reportable expenditures amounting to $48,491,772 and $26,685,000 million for non-reportable reinvestment of reserves.

State Operations: The requested $2,933,772 includes $2,321,047 for salaries and benefits and $612,725 for other costs.

Claims: The FY 2027 request for claims is $39,000,000 which is an estimate based on actual claims expenses in previous years. The $6,558,000 amount for claim related expenses includes attorney fees, expert witness fees, deposition costs, etc.

FISCAL YEAR 2028

Summary: The total budget amounting to $71,338,075 includes reportable expenditures of $44,653,075 and $26,685,000 million for non-reportable reinvestment of reserves.

State Operations: The requested $3,096,275 includes $2,490,000 for salaries and benefits and $606,275 for other costs.

Claims: The $35,000,000 estimate for claims is again an estimate based on actual claims expenses in previous years. The $6,556,800 estimate for claim related expenses is for claim related expenses includes attorney fees, expert witness fees, deposition costs, etc.

BUDGET INFORMATION APPLICABLE TO BOTH FISCAL YEARS

Actual Position Data: Currently we have 21 of 21 FTE positions filled.

New Funds Requested: None

Third Party Agreements: None; equipment is either owned or rented without purchase option.

Homeland Security: No funding is received from the Department of Homeland Security.

Reduced Resource Target: Because the majority of the budget for the HCSF Board of Governors is financed by a trust fund and the balance is funded by a fee fund, there is no reduced resource target.

PERFORMANCE MEASURES

INTRODUCTION

It is our understanding that the FY2027 and 2028 budgets should incorporate the performance measures that have been established for our agency. These performance measures evaluate the performance of the two principal HCSF programs; Medical Professional Liability Coverage and Medical Professional Liability Adjudication. Both of these programs are statutory responsibilities delegated by the Legislature to the HCSF Board of Governors. These performance measures were approved by the Division of the Budget and the Legislative Research Department.

LIABILITY COVERAGE OBJECTIVE #1

One of the principal reasons the Legislature created the Health Care Provider Insurance Availability Act is to encourage commercial insurance companies to offer professional liability insurance products in Kansas. This includes insurance products for a particular professional category or medical specialty as well as insurance for health care facilities. Currently there are several different companies providing professional liability insurance coverage to health care providers, but some of those companies are risk retention groups serving only a selected group of specialists.

PERFORMANCE MEASURE #1

Approved companies actively marketing medical professional Liability Insurance in Kansas as of July 1	Actual FY24	Actual FY25	Actual FY26	Actual FY27
	36	35	35	35

LIABILITY COVERAGE OBJECTIVE #2

Another major public policy objective is to assure that if a patient is injured as a result of an unexpected medical outcome, the patient will have access to an available remedy. This is accomplished by requiring that all health care providers maintain a basic policy of professional liability insurance with excess coverage via the Health Care Stabilization Fund.

PERFORMANCE MEASURE #2

Providers as of July 1	Actual FY24	Actual FY25	Actual FY26	Actual FY27
	20,003	19,833	21,574	23,684

LIABILITY COVERAGE OBJECTIVE #3

Because the HCSF Board of Governors is not a regulatory agency, extraordinary efforts are made to assure voluntary compliance with the requirements of the Health Care Provider Insurance Availability Act. Collection of correct surcharge assessments is almost entirely dependent on the cooperation of insurers and their agents. This activity also requires an effective collaborative relationship with the Kansas Insurance Department to assure that basic coverage insurance policies offered by medical professional liability insurers meet the requirements of the Act. It is also necessary to maintain effective collaborative relationships with the various licensing agencies that enforce the Act on behalf of the HCSF Board of Governors.

Each year the Board carefully evaluates the actuarial analysis performed by an independent actuary. Based on that analysis, the Board makes adjustments that will affect future surcharge collections. For that reason, we often revise our surcharge revenue estimates from year to year. And, of course, annual surcharge collections are affected by a constantly changing variable; the number of health care providers actively rendering professional services in the State of Kansas. The 2021 legislative session significantly changed statutes regarding coverage limits which resulted in reduced surcharge beginning in FY 2022.

PERFORMANCE MEASURE #3

	Actual FY23	Actual FY24	Actual FY25	Actual FY26
Net premium surcharge revenue	$19,782,219	$20,215,254	$21,464,460	$22,339,101

LIABILITY ADJUDICATION OBJECTIVE #4

It is extremely important that all claims involving the HCSF be managed effectively by attorneys who are knowledgeable about civil litigation (particularly medical malpractice liability actions) and by legal assistants who possess claims management skills. Staff attorneys must be knowledgeable about the practice of medicine and surgery as well as the intricacies of civil law. Because many of these claims eventually result in a confidential settlement agreement, active involvement in settlement conferences and mediations is essential. Another important aspect of this process is the evaluation of litigation expenses to assure that invoices are appropriate and are properly documented. For purposes of outcome measures, it is important to keep in mind that some cases require a substantial amount of time to be resolved, particularly those cases that are decided by a jury trial. Nonetheless, the number of closed claims is an indication of the level of productivity and the number of new claims may indicate a trend over time that could require additional resources.

In the past, this objective was measured based on number of cases. Because each case typically includes a number of different claims, that method of measuring performance understates the workload and level of activity. For example, it is not uncommon for a case to name a hospital as well as a number of different physicians as defendants. Each defendant constitutes a claim, requiring a separate file and work by the legal staff. Furthermore, some cases may be closed for a period of time and then reopened, which requires staff resources. Therefore, claims activity is a much better performance measure. The number of closed claims reflects diligence and steady progress on the part of our Legal Section staff as well as those attorneys hired to defend health care providers.

PERFORMANCE MEASURE #4

	Actual FY2023	Actual FY2024	Actual FY2025	Actual FY2026
Number of open claims, July 1 of fiscal year	921	930	966	1000
Number of new claims opened during fiscal year	567	519	580	574
Number of claims closed during fiscal year	540	527	556	636
Number of open claims, June 30 of fiscal year	930	922	1014	979

LIABILITY ADJUDICATION OBJECTIVE #5

Neither our Board of Governors, our Legal Section staff, nor defense counsel can control the compensation that injured patients receive as a result of settlements or jury awards. This is, nonetheless, an important performance measure because it identifies trends that assist in predicting future expenditures. Each year the agency's Chief Counsel prepares a comprehensive report for the Board of Governors that is also presented to the HCSF Oversight Committee. Two of the components of that report are: (1) the number of claims with HCSF obligations (2) the total amount of HCSF obligation for those claims. For a number of reasons, particularly periodic payment of structured settlements, these amounts are not the same as expenditures during the same fiscal years.

PERFORMANCE MEASURE #5

	Actual FY23	Actual FY24	Actual FY25	Actual FY26
Claims with HCSF Obligations	98	82	95	69
Settlements and Jury Awards	$31,394,663	$ 35,227,373	$ 30,740,000	$ 26,712,847

LIABILITY ADJUDICATION OBJECTIVE #6

Most HCSF obligations are the result of a settlement between the plaintiff and the defendant or defendants. The decision to pursue a jury trial is based on numerous factors. Furthermore, the cost of a jury trial can be substantial. Therefore, the decision to take a case to a jury must be a carefully calculated risk. The obvious objective is to pursue a jury trial only if there is reasonable likelihood of success.

PERFORMANCE MEASURE #6

	Actual FY2023	Actual FY2024	Actual FY2025	Actual FY2026
Jury Trials	21	16	17	20
Defense Verdicts	17	15	14	13

EXPENDITURE JUSTIFICATION – LIABILITY COVERAGE PROGRAM (State Operations)

Budget Unit 100: Salaries and Wages

	Actual FY2025	Actual FY2026	Budget FY2027	Budget FY2028
Operations – 2100	$1,994,356	$2,117,973	$2,321,047	$2,490,000

SUMMARY: All salaries and wages are budgeted in the Coverage Program.

Budget Year – FY2028: The $2,490,000 budgeted for salaries and benefits assumes that all positions will remain filled.

Budget Units 200 – 290: Contractual Services

	Actual FY2025	Actual FY2026	Budget FY2027	Budget FY2028
Operations – 2100	$262,773	$277,647	$529,675	$529,325

SUMMARY: Principal expenditures in this category are: facilities rent, equipment rent, actuarial and other professional services, computer software maintenance contracts, and job related travel and professional development

Budget Year - FY2028: The $529,325 budget includes the usual funding for rents, actuarial services, and other professional services.

Budget Units 300 - 390: Commodities

	Actual FY2025	Actual FY2026	Budget FY2027	Budget FY2028
Operations – 2100	$9,787	$ 11,057	$23,150	$20,650

SUMMARY: The principal costs in this category are

supplies. *Budget Year - FY 2028:* $20,650 is budgeted.

Budget Unit 400: Capital Outlay

	Actual FY2025	Actual FY2026	Budget FY2027	Budget FY2028
Operations - 2100	$32,956	$71,943	$59,900	$56,300

SUMMARY: In order to maximize the use of technology for operational effectiveness, it is necessary to continuously replace file servers, desktop computers, laptops, and other obsolete equipment.

Budget Year - FY2028: The $56,300 budget includes routine system maintenance and equipment replacement.

Budget Units 520 - 590: Other Grants, Claims & Assistance

SUMMARY: There are no expenditures for grants or claims in the Compliance Program. Because the payment of claims is the most important statutory responsibility delegated in the Health Care Provider Insurance Availability Act, a completely separate program has been established.

EXPENDITURE JUSTIFICATION – LIABILITY ADJUDICATION PROGRAM (Claims)

Budget Unit 100: Salaries & Wages
SUMMARY: All salaries and benefits costs are budgeted in the Coverage Program (Operations).

Budget Units 200 - 290: Contractual Services

	Actual FY2025	Actual FY2026	Budget FY2027	Budget FY2028
Adjudication Program– 2300	$5,777,988	$ 4,895,427	$6,557,000	$6,555,600

SUMMARY: The major expenditures in these object codes are attorney fees, expert witness fees, deposition costs such as court reporter fees, and similar defense costs directly related to claims and lawsuits against health care providers. These expenditures also include staff travel expenses directly associated with active claims, such as attendance at settlement conferences. These costs vary depending on the number of active claims during a fiscal year.

Budget Year - FY2028: The $6,555,600 budget is estimated based on expense history from previous years.

Budget Units 300 - 390: Commodities

	Actual FY2025	Actual FY2026	Budget FY2027	Budget FY2028
Adjudication Program – 2300	$397	$691	$1,000	$1,200

SUMMARY: Gasoline purchased for legal staff travel is accounted for under this category of expense.

Budget Year – FY2028: The $1,200 budget is estimated based on expense history from previous years and the current gas prices.

Budget Unit 400: Capital Outlay
SUMMARY: All expenditures for furniture and equipment are budgeted in the Coverage Program (Operations).

Budget Units 500 - 590: Other Grants, Claims & Assistance

	Actual FY2025	Actual FY2026	Budget FY2027	Budget FY2028
Adjudication Program – 2400	$35,995,247	$26,712,847	$39,000,000	$35,000,000

SUMMARY: These expenditures are the result of court-approved settlement agreements or jury awards. These costs depend on numerous factors and are difficult to predict. Claims frequency, that is, the number of claims that will be paid in a fiscal year is guesswork based on observable trends and speculation.

Budget Year - FY2028: The $35,000,000 budget is based on claims history from previous years.

Narrative Information—DA 405

State of Kansas | Agency: Health Care Stabilization Fund – 270

Division of the Budget | Program: Liability Coverage (Operations)

Health Care Stabilization Fund (7404)

The HCSF was created by K.S.A. 40-3403, a major section in the Health Care Provider Insurance Availability Act which stipulates that the HCSF shall be held in trust in the State Treasury. The principal source of revenue is the premium surcharge assessed on each health care provider licensed to render professional services in Kansas. Premium surcharge rates are determined by the HCSF Board of Governors.

Each year the Board is required to evaluate the actuarial analysis of accrued liabilities and then determine appropriate surcharges to assure sufficient assets are available to fund the accrued liabilities. The Board decided to reduce surcharge rates effective January 2022.

Because the Board uses a laddered approach to investments, there are intermittent investment maturities each year. This income is identified as "461300 Investments Sold Matured." Interest earnings on assets reserved for liabilities are another significant source of revenue.

Reimbursements to the HCSF from the State of Kansas for claims paid on behalf of residents in training and full-time physician faculty at the University of Kansas Medical Center resumed in FY2014. Estimates for these reimbursements are based on analysis of the most recent ten-year loss experience of the State self-insurance program. In addition, there are transfers from the Private Practice Foundation Reserve Fund (766010 Operating Transfers In) that amount to $500,000 per fiscal year.

404 Aggregate Report

Agency: 00270 Health Care Stabilization

Version: 2028-A-02-00270

Series: 7404 HEALTH CARE STABILIZATION FD

		FY 2026 Actuals	FY 2027 Adjusted Budget Request	FY 2028 Adjusted Budget Request	FY 2029 Adjusted Budget Request
40007	CASH FORWARD	34,284,122	61,397,342	94,897,342	128,697,342
452100	HEALTH CARE PREMIUM SURCHARGE	22,731,988	30,000,000	30,000,000	0
452200	HLTH CARE PROV INS AVAIL PLAN	(602,574)	(600,000)	(700,000)	0
766010	OPERATING TRANSFERS IN	500,000	500,000	500,000	0
766090	REVENUE TRANSFERS FROM THE GEN	4,483,806	3,600,000	4,000,000	0
	Total Available	61,397,342	94,897,342	128,697,342	128,697,342
	Total Expenditures	0	0	0	0
	Balance Forward	61,397,342	94,897,342	128,697,342	128,697,342

Agency	Health Care Stabilization
Program	0000000 Hlth Care Stabilization Fund B
Reporting Level	270-00-01030-0000000-0000-000

1 Object/Revenue Description	Code	2 FY 2026 Actuals	3	4 FY 2027 Adjusted Budget Request	5	6 FY 2028 Base Budget Request	7
EXPENDITURES							
UNCLASSIFIED REGULAR	511100	1,452,474	0	1,689,697	0	1,794,993	0
UNCLASSIFIED TEMPORARY	511110	76,192	0	34,999	0	36,346	0
UNCLASS HOLIDAY INCL IN BASE	511140	57,857	0	0	0	0	0
LEAVE PAYMENT ASSESSMENTS	517600	7,457	0	8,970	0	9,887	0
PUBLIC EE RETIREMENT SYSTEM	518100	191,435	0	208,171	0	222,220	0
MEDICARE	519101	22,187	0	25,011	0	26,553	0
OASDI	519102	94,868	0	106,930	0	113,547	0
GROUP HEALTH HOSPITALIZATION	519500	214,129	0	245,738	0	285,029	0
WORKERS COMPENSATION	519700	1,158	0	1,189	0	693	0
UNEMPLOYMENT COMPENSATION	519800	216	0	342	0	732	0
Salaries and Wages	**1**	**2,117,973**	**0**	**2,321,047**	**0**	**2,490,000**	**0**
COMMERCIAL COMM SERVICE OTHER	520400	2,830	0	3,200	0	4,000	0
INTERGOV LCL COMM SVC OP DISC	520500	9,902	0	12,000	0	12,000	0
INTERGOV LCL COMM SVC CAP DISC	520510	203	0	300	0	400	0
INTERGOV POSTAGE OP DISC	520600	3,576	0	4,200	0	4,200	0
CELLULAR PHONES	520910	9,618	0	13,000	0	13,000	0
OTHER FREIGHT AND EXPRESS	521900	63	0	100	0	100	0
PRINT BIND STATE FACILITY ONLY	522100	394	0	250	0	400	0
COPY PRINTING EQUIPMENT RENTAL	523100	1,410	0	2,500	0	2,500	0
BUILDING SPACE RENTAL	523200	71,641	0	85,000	0	98,000	0
EQUIPMENT RENTAL	523300	204	0	700	0	400	0
COMPUTER SOFTWARE RENTAL	523700	11,010	0	26,875	0	26,875	0
OTHER RENTALS	523900	9,600	0	12,000	0	12,000	0
REPAIR AND SVC EQUIP FURN	524300	0	0	3,500	0	3,000	0
REPAIR AND SVC BLDG GROUND	524400	0	0	850	0	800	0
REPAIR & SVC COMPUTER EQUIP	524700	0	0	1,500	0	1,000	0
REPAIR & SVC OTHER	524900	0	0	15,000	0	8,000	0
PRIVATE VEHICLE MILES IN STATE	525110	0	0	500	0	0	0
PRIVATE CHARTER IN STATE	525120	0	0	200	0	0	0
MEALS AND LODGING IN STATE	525180	0	0	300	0	0	0
NON SUBSISTENCE IN STATE	525190	68	0	50	0	100	0
PRIV VEHICLE MILES OUT STATE	525210	0	0	300	0	0	0
AIR RAIL & BUS FARE OUT STATE	525270	0	0	1,000	0	1,000	0
MEALS AND LODGING OUT STATE	525280	2,560	0	2,000	0	2,500	0
NON SUBSISTENCE OUT STATE	525290	0	0	300	0	300	0
PRIVATE VEHICLE MILES	525510	318	0	700	0	500	0
AIR RAIL AND BUS FARE	525570	0	0	3,500	0	3,000	0
MEALS AND LODGING	525580	1,267	0	2,000	0	2,000	0
NON SUBSISTENCE	525590	303	0	200	0	400	0
COMPUTER PROGRAMMING OP DISC	526300	23,937	0	27,000	0	30,000	0
COMPUTER PROGRAMMING CAP DISC	526310	486	0	1,000	0	0	0
COMPUTER PROGRAMMING NOT DISC	526320	40,903	0	40,000	0	40,000	0

Agency	Health Care Stabilization
Program	0000000 Hlth Care Stabilization Fund B
Reporting Level	270-00-01030-0000000-0000-000

1 Object/Revenue Description	Code	2 FY 2026 Actuals	3	4 FY 2027 Adjusted Budget Request	5	6 FY 2028 Base Budget Request	7
DATABASE ACCESS FEES NOT DISC	526330	0	0	100	0	100	0
COURT COSTS	526400	0	0	500	0	0	0
EMPLOYEE AND STUDENT TUITION	526600	4,502	0	5,000	0	5,000	0
JOB RELATED TRAIN & CONF REG	526610	1,185	0	7,000	0	8,000	0
OTHER FEES	526900	24,550	0	23,000	0	24,000	0
ATTORNEYS AND LAWYERS	527200	6,424	0	20,000	0	10,000	0
ACTUARIAL SERVICES	527860	34,100	0	100,000	0	100,000	0
INFORMATION SYSTEMS CONSULTING	527910	0	0	72,500	0	72,500	0
CONSULTING SERVICES OTHER	527919	5,750	0	6,000	0	6,000	0
OTHER PROFESSIONAL FEES	527990	1,200	0	3,000	0	3,000	0
DUES AND SUBSCRIPTIONS	529100	9,342	0	6,000	0	8,000	0
NON EMPLOYEE AWARDS	529500	0	0	500	0	500	0
SURETY BOND AND INS PREMIUMS	529600	24	0	50	0	50	0
OFFICIAL HOSPITALITY	529700	277	0	1,000	0	700	0
OTHER CONTRACTUAL SERVICES	529900	0	0	25,000	0	25,000	0
Contractual Services	**2**	**277,647**	**0**	**529,675**	**0**	**529,325**	**0**
FOOD FOR HUMAN CONSUMPTION	532010	1,524	0	2,300	0	1,800	0
BLDGS AND GROUNDS MATERIALS	534100	0	0	500	0	500	0
COMPUTER SYS PARTS MATERIALS	534300	0	0	100	0	100	0
OTHER EQUIP MATERIALS PARTS	534900	0	0	250	0	250	0
GASOLINE	535100	0	0	150	0	150	0
DRUGS AND PHARMACEUTICALS	536100	0	0	50	0	50	0
PRO SCIENTIFIC SUPPLY OTHER	536900	0	0	300	0	300	0
STATIONERY AND OFFICE SUPPLIES	537100	2,236	0	5,000	0	4,000	0
DATA PROCESSING SUPPLIES	537200	5,117	0	12,000	0	10,000	0
HOUSEHOLD SUPPLIES	539200	2,180	0	2,000	0	3,000	0
OTHER SUPPLIES AND MAT	539900	0	0	500	0	500	0
Commodities	**3**	**11,057**	**0**	**23,150**	**0**	**20,650**	**0**
HOUSEHOLD EQUIPMENT NON CAP	540290	0	0	3,000	0	1,000	0
OFFICE EQUIPMENT	540300	0	0	500	0	500	0
OFFICE EQUIPMENT NON CAP	540390	54	0	1,300	0	200	0
OFFICE FURNITURE NON CAP	540391	4,648	0	5,000	0	4,000	0
PRO & SCIENTIFIC EQUIP NON CAP	540490	5,043	0	0	0	5,000	0
OTHER FURN FIXTURES NON CAP	540990	86	0	15,000	0	800	0
OTHER EQUIPMENT NON CAP	540991	0	0	500	0	500	0
BOOKS & LIBRARY MAT NON CAP	541190	0	0	500	0	500	0
PRINTING EQUIP NON CAPITAL	541290	1,255	0	0	0	0	0
MICROCOMPUTER EQUIP NON CAP	541390	39,256	0	10,000	0	10,000	0
INFO PROCESSING EQUIPMENT	541610	0	0	17,000	0	17,000	0
INFO PROCESSING EQUIP NON CAP	541690	0	0	5,000	0	5,000	0
SOFTWARE	541810	202	0	0	0	0	0
SOFTWARE NON CAPITAL	541890	20,635	0	600	0	10,000	0

Agency	Health Care Stabilization
Program	0000000 Hlth Care Stabilization Fund B
Reporting Level	270-00-01030-0000000-0000-000

1 **Object/Revenue** **Description**	**Code**	2 **FY 2026 Actuals**	3	4 **FY 2027 Adjusted Budget Request**	5	6 **FY 2028 Base Budget Request**	7
TELECOM TERMINATION NON CAP	546190	764	0	500	0	800	0
DATA COMM EQUIP NON CAP	546690	0	0	1,000	0	1,000	0
Capital Outlay	**4**	**71,943**	**0**	**59,900**	**0**	**56,300**	**0**
PRINCIPAL AND PREMIUMS	570100	8,884,890	0	27,000,000	0	27,000,000	0
ACCRUED INTEREST PURCHASED	570300	63,527	0	150,000	0	150,000	0
INVESTMENT ADVANCES	572300	(117,749)	0	(465,000)	0	(465,000)	0
Non-Expense Items	**92**	**8,830,668**	**0**	**26,685,000**	**0**	**26,685,000**	**0**
TOTAL EXPENDITURES for 0000000 Hlth Care Stabilization Fund B (270-00-01030-0000000-0000-000)		**11,309,288**	**0**	**29,618,772**	**0**	**29,781,275**	**0**
MEANS OF FUNDING							
HCSF-OPERATING EXPENDITURES	2100	2,478,620	0	2,933,772	0	3,096,275	0
HCSF-INVESTMENT ACCOUNT	2500	8,830,668	0	26,685,000	0	26,685,000	0
HEALTH CARE STABILIZATION FD	**7404**	**11,309,288**	**0**	**29,618,772**	**0**	**29,781,275**	**0**
TOTAL FUNDING for 0000000 Hlth Care Stabilization Fund B (270-00-01030-0000000-0000-000)		**11,309,288**	**0**	**29,618,772**	**0**	**29,781,275**	**0**
AUTHORIZED EMPLOYEES							
FTE		0.00	0.00	21.00	0.00	21.00	0.00
TOTAL AUTHORIZED EMPLOYEES for 0000000 Hlth Care Stabilization Fund B (270-00-01030-0000000-0000-000)		0.00	0.00	21.00	0.00	21.00	0.00

Agency	Health Care Stabilization
Program	0000000 Hlth Care Stabilization Fund B
Reporting Level	270-00-09900-0000000-0000-000

1 Object/Revenue Description	Code	2 FY 2026 Actuals	3	4 FY 2027 Adjusted Budget Request	5	6 FY 2028 Base Budget Request	7
EXPENDITURES							
OTHER FREIGHT AND EXPRESS	521900	595	0	1,000	0	1,000	0
PRIVATE VEHICLE MILES IN STATE	525110	0	0	300	0	300	0
PRIVATE CHARTER IN STATE	525120	1,519	0	1,800	0	1,800	0
NON SUBSISTENCE IN STATE	525190	211	0	300	0	500	0
PRIVATE VEHICLE MILES	525510	253	0	2,200	0	500	0
MEALS AND LODGING	525580	0	0	1,000	0	1,000	0
NON SUBSISTENCE	525590	31	0	200	0	300	0
COURT COSTS	526400	0	0	200	0	200	0
OTHER FEES	526900	73,650	0	100,000	0	100,000	0
ATTORNEYS AND LAWYERS	527200	3,382,555	0	4,450,000	0	4,600,000	0
EXPERT WITNESS FEES	527970	1,117,165	0	1,500,000	0	1,500,000	0
COURT REPORTING FEES	527980	190,617	0	300,000	0	200,000	0
OTHER PROFESSIONAL FEES	527990	128,831	0	200,000	0	150,000	0
Contractual Services	**2**	**4,895,427**	**0**	**6,557,000**	**0**	**6,555,600**	**0**
GASOLINE	535100	691	0	1,000	0	1,200	0
Commodities	**3**	**691**	**0**	**1,000**	**0**	**1,200**	**0**
MEDICAL MALPRACTICE CLAIMS	552600	26,712,847	0	39,000,000	0	35,000,000	0
Other Assistance	**9**	**26,712,847**	**0**	**39,000,000**	**0**	**35,000,000**	**0**
TOTAL EXPENDITURES for 0000000 Hlth Care Stabilization Fund B (270-00-09900-0000000-0000-000)		**31,608,965**	**0**	**45,558,000**	**0**	**41,556,800**	**0**
MEANS OF FUNDING							
HCSF-LGL SVC/OTHER CLAIMS EXP	2300	4,896,118	0	6,558,000	0	6,556,800	0
HCSF-CLAIMS AND BENEFITS	2400	26,712,847	0	39,000,000	0	35,000,000	0
HEALTH CARE STABILIZATION FD	**7404**	**31,608,965**	**0**	**45,558,000**	**0**	**41,556,800**	**0**
TOTAL FUNDING for 0000000 Hlth Care Stabilization Fund B (270-00-09900-0000000-0000-000)		**31,608,965**	**0**	**45,558,000**	**0**	**41,556,800**	**0**