

COMMITTEE ON LEGISLATIVE RESEARCH  
OVERSIGHT DIVISION

**FISCAL NOTE**

L.R. No.: 5202-01  
Bill No.: HB 1607  
Subject: Health Care; Health Care Professionals; Health Dept.  
Type: Original  
Date: March 19, 2012

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Bill Summary: Establishes the Compassionate Assistance for Rape Emergencies (CARE) Act which requires hospitals and health care facilities to provide emergency contraception to sexual assault victims.

**FISCAL SUMMARY**

<b>ESTIMATED NET EFFECT ON GENERAL REVENUE FUND</b>			
FUND AFFECTED	FY 2013	FY 2014	FY 2015
General Revenue	(Unknown greater than \$101,600)	(Unknown greater than \$101,640)	(Unknown greater than \$101,681)
<b>Total Estimated Net Effect on General Revenue Fund</b>	<b>(Unknown greater than \$101,600)</b>	<b>(Unknown greater than \$101,640)</b>	<b>(Unknown greater than \$101,681)</b>

<b>ESTIMATED NET EFFECT ON OTHER STATE FUNDS</b>			
FUND AFFECTED	FY 2013	FY 2014	FY 2015
<b>Total Estimated Net Effect on <u>Other</u> State Funds</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Numbers within parentheses: ( ) indicate costs or losses.  
This fiscal note contains 7 pages.

<b>ESTIMATED NET EFFECT ON FEDERAL FUNDS</b>			
<b>FUND AFFECTED</b>	<b>FY 2013</b>	<b>FY 2014</b>	<b>FY 2015</b>
<b>Total Estimated Net Effect on <u>All</u> Federal Funds</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

<b>ESTIMATED NET EFFECT ON FULL TIME EQUIVALENT (FTE)</b>			
<b>FUND AFFECTED</b>	<b>FY 2013</b>	<b>FY 2014</b>	<b>FY 2015</b>
<b>Total Estimated Net Effect on FTE</b>	<b>0</b>	<b>0</b>	<b>0</b>

- Estimated Total Net Effect on All funds expected to exceed \$100,000 savings or (cost).
- Estimated Net Effect on General Revenue Fund expected to exceed \$100,000 (cost).

<b>ESTIMATED NET EFFECT ON LOCAL FUNDS</b>			
<b>FUND AFFECTED</b>	<b>FY 2013</b>	<b>FY 2014</b>	<b>FY 2015</b>
<b>Local Government</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## FISCAL ANALYSIS

### ASSUMPTION

Officials from the **Department of Insurance, Financial Institutions, and Professional Registration** assume the proposal will have no fiscal impact on their organization.

Officials from the **Office of Attorney General** assume any potential costs arising from this proposal can be absorbed with existing resources.

Officials from the **Department of Social Services (DSS)** state there is no fiscal impact to the DSS. MO HealthNet already covers emergency contraception so the legislation has no fiscal impact to the MO HealthNet Division.

Officials from the **Joint Committee on Administrative Rules (JCAR)** state the legislation is not anticipated to cause a fiscal impact to JCAR beyond its current appropriation.

Officials from the **Office of Secretary of State (SOS)** state many bills considered by the General Assembly include provisions allowing or requiring agencies to submit rules and regulations to implement the act. The Secretary of State's office is provided with core funding to handle a certain amount of normal activity resulting from each year's legislative session. **The fiscal impact for this fiscal note to the SOS for Administrative Rules is less than \$2,500. The SOS recognizes this is a small amount and does not expect that additional funding would be required to meet these costs.** However, it is also recognized that many such bills may be passed by the General Assembly in a given year and that collectively the costs may be in excess of what the office can sustain within its core budget. **Therefore, the SOS reserves the right to request funding for the cost of supporting administrative rules requirements should the need arise based on a review of the finally approved bills signed by the governor.**

Officials from the **Department of Health and Senior Services (DHSS)** provide the following:

#### Section 191.718.3

This section requires the DHSS to develop, prepare, and produce informational material relating to emergency contraception and distribute to hospitals and health care facilities in the state. Currently, there are 122 hospitals in Missouri that report having emergency departments. The DHSS is unable to determine the number of urgent care facilities attached to hospitals since they are not licensed in Missouri. To ensure that an adequate number of brochures are provided for hospitals and urgent care facilities, 10,000 brochures would be printed. Printing costs for a tri-fold, four-process color brochure is \$0.10 per brochure, totaling \$1,000 (10,000 X \$0.10). The brochures would be distributed to hospitals and health care providers throughout the state.

Mailing for an estimated 200 packets is \$600 (\$3.00/packet X 200 packets). The total cost estimated for this section is \$1,600.

ASSUMPTION (continued)

Section 191.718.5

This section states, “The department of health and senior services shall respond to complaints and shall periodically determine whether hospitals and health care facilities are complying with the provisions of this section.” The definition of “health care facility” as defined in section 191.717.2(3) of the proposed legislation is “any urgent care center or facility that offers treatment for patients during normal business, after-business, or weekend hours and that is affiliated with a licensed hospital”. This is a broad definition and could include outpatient clinics, urgent care centers, and in some cases physician offices. The division is also unsure of the meaning of the term “affiliated”; this could be construed to mean “owned” by the hospital, “operated” by the hospital, etc. The Division of Regulation and Licensure (DRL) currently inspects hospitals and responds to complaints about hospital care, but does not inspect or investigate complaints for all of the other health care facilities that may fall under the definition of “health care facility”. The DHSS assumes that it would be required to investigate complaints and periodically determine compliance at these additional facilities. The DHSS is unable to determine how many facilities that are currently not regulated would fall under the definition of health care facility included in this proposed legislation.

The DHSS has no way to determine how many instances of emergency care provided to sexual assault victims would result in a complaint against a hospital or health care facility. Based on the current average time to complete a complaint investigation, any such complaints received would each require approximately 67 hours to investigate.

Section 191.718.5(1) and (2) of the proposed legislation requires the DHSS to impose fines on hospitals or health care facilities for non-compliance with the provisions of the bill. A \$5,000 fine would be imposed for each woman who is denied information about emergency contraception or who is not offered or provided emergency contraception; a \$5,000 fine would be imposed for failure to comply with the provisions of the bill; and, an additional \$5,000 fine would be imposed every 30 days that the hospital or health care facility is not in compliance. The department is unable to determine the number of instances in which a hospital or health care facility would not be in compliance, and therefore, determines the amount of revenue generated to be unknown. In keeping with the requirements of Article IX of the Missouri Constitution, the DHSS assumes that any administrative penalties collected pursuant to this proposed legislation would need to be deposited in the county school fund.

Based on the above uncertainties, this section will result in a fiscal impact of unknown, greater than \$100,000 to the Division of Regulation and Licensure.

ASSUMPTION (continued)

Section 191.718.6

The DHSS is unsure how often investigations of hospital and health care facilities will be performed. According to section 191.718.6 of the proposed legislation, the department is required to promulgate rules to implement the provisions of the bill. The DHSS assumes that existing hospital regulations would be revised to include the frequency that investigations will be performed.

**Oversight** assumes any increase or decrease in fine or penalty revenues generated cannot be determined. Therefore, the fiscal note does not reflect any fine or penalty revenues for the local school districts.

<u>FISCAL IMPACT - State Government</u>	FY 2013 (10 Mo.)	FY 2014	FY 2015
<b>GENERAL REVENUE FUND</b>			
<b>§191.718</b>			
<u>Costs - DHSS</u>			
Program Costs	(Unknown greater than \$100,000)	(Unknown greater than \$100,000)	(Unknown greater than \$100,000)
Printing Brochure and Postage Costs	(\$1,600)	(\$1,640)	(\$1,681)
Total <u>Costs</u> - DHSS	<u>(Unknown greater than \$101,600)</u>	<u>(Unknown greater than \$101,640)</u>	<u>(Unknown greater than \$101,681)</u>
<b>ESTIMATED NET EFFECT ON GENERAL REVENUE FUND</b>	<b><u>(Unknown greater than \$101,600)</u></b>	<b><u>(Unknown greater than \$101,640)</u></b>	<b><u>(Unknown greater than \$101,681)</u></b>
<u>FISCAL IMPACT - Local Government</u>	FY 2013 (10 Mo.)	FY 2014	FY 2015
	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>

FISCAL IMPACT - Small Business

No direct fiscal impact to small businesses would be expected as a result of this proposal.

FISCAL DESCRIPTION

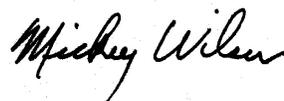
This proposal establishes the Compassionate Assistance for Rape Emergencies (CARE) Act which requires that the standard of care for any health care facility that provides emergency care to sexual assault victims will be to give a victim information regarding emergency contraception, inform the victim of her option to be provided emergency contraception, and provide a complete regimen of emergency contraception if requested. The health care provider must follow federal Department of Justice protocols on HIV/STI screening and prophylactic treatment. An emergency health care facility must ensure that the victim is treated by a provider who has medically and factually accurate, objective information about emergency contraception.

The Department of Health and Senior Services must: (1) develop, prepare, and produce informational materials regarding emergency contraception for the prevention of pregnancy for distribution in any health care facility in the state. The materials must be medically and factually accurate and objective; clearly written and comprehensible; provide an explanation of the use, safety, efficacy, and availability of emergency contraception; and explain that it does not cause an abortion; and (2) respond to complaints and periodically perform compliance checks on emergency health care facilities. If the department determines that a facility is not in compliance, it must impose a \$5,000 administrative penalty for each woman who is denied the informational materials or who is not offered emergency contraception and a \$5,000 administrative penalty for failure to comply with the provisions of the bill with an additional \$5,000 penalty for every 30 days of non-compliance.

This legislation is not federally mandated, would not duplicate any other program and would not require additional capital improvements or rental space.

SOURCES OF INFORMATION

Office of Attorney General  
Department of Insurance, Financial Institutions, and Professional Registration  
Department of Health and Senior Services  
Department of Social Services  
Joint Committee on Administrative Rules  
Office of Secretary of State



L.R. No. 5202-01  
Bill No. HB 1607  
Page 7 of 7  
March 19, 2012

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March 19, 2012