

FISCAL ESTIMATE

DOA-2048 N(R10/96)

- ORIGINAL UPDATED
 CORRECTED SUPPLEMENTAL

Subject

Limitations on and requirements for use of semiautomatic defibrillators.

Fiscal Effect

State: No State Fiscal Effect

Check columns below only if bill makes a direct appropriation
 Or affects a sum sufficient appropriation.

Increase Costs - May be possible to Absorb
 Within Agency's Budget Yes No

- Increase Existing Appropriation Increase Existing Revenues
 Decrease Existing Appropriation Decrease Existing Revenues
 Create New Appropriation

Decrease Costs

Local: No local government costs

1. Increase Costs
 Permissive Mandatory
 2. Decrease Costs
 Permissive Mandatory

3. Increase Revenues
 Permissive Mandatory
 4. Decrease Revenues
 Permissive Mandatory

5. Types of Local Governmental Units Affected:
 Towns Villages Cities
 Counties Others _____
 School Districts WTCS Districts

Fund Sources Affected

- GPR FED PRO PRS SEG SEG-S

Affected Ch. 20 Appropriations

Assumptions Used in Arriving at Fiscal Estimate

This bill authorizes use of a semiautomatic defibrillator in rendering emergency care or treatment of an individual who appears to be in cardiac arrest, by a person other than an ambulance service provider, emergency medical technician or a first responder-defibrillation, if the person has received training in a course for which a physician serves as medical director and that is approved by DHFS. In addition the bill provides immunity for the above mentioned people from civil liability for the acts or omissions, in rendering in good faith emergency care, by use of a semiautomatic defibrillator. The bill also provides immunity from civil liability for the physician who serves as medical director for the above-mentioned training course. The bill also instructs DHFS to review training courses for the use of a semiautomatic defibrillator and authorizes DHFS to approve those courses that satisfy DHFS' standard for approval.

The Department's Bureau of Emergency Medical Services (EMS) in the Division of Public Health facilitates the establishment and maintenance of a comprehensive, coordinated system of emergency medical services by providing a state level focal point for leadership, quality assurance, administration, coordination and technical assistance to all EMS providers and other system components. The EMS Bureau is responsible for the coordination of training, licensing, community assistance, communications, grants management, public information and education for the state. The Department, without additional cost, can absorb the additional responsibilities as specified in the bill. The bill has no fiscal impact.

Long-Range Fiscal Implications

Agency/Prepared by: (Name & Phone No.)

DHFS/OSF
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Authorized Signature/Telephone No.


 John Kiesow, Exec. Asst., 266-0067

Date

April 6, 1999

FISCAL ESTIMATE WORKSHEET

1999 Session

Detailed Estimate of Annual Fiscal Effect
DOA-2047 (R10/96)

ORIGINAL UPDATED
 CORRECTED SUPPLEMENTAL

LRB or Bill No./Adm. Rule No.
~~SB00~~ **AB239**
LRB1382/1

Amendment No.

Subject
Limitations on and requirements for use of semiautomatic defibrillators.

I. One-time Costs or Revenue Impacts for State and/or Local Government (do not include in annualized fiscal effect):

II. Annualized Costs:	Annualized Fiscal impact on State funds from:	
	Increased Costs	Decreased Costs
A. State Costs by Category		
State Operations - Salaries and Fringes	\$ 00.00	\$ 00.00
(FTE Position Changes)	(FTE)	(- FTE)
State Operations - Other Costs		-
Local Assistance		-
Aids to Individuals or Organizations		-
TOTAL State Costs by Category	\$ 00.00	\$ 00.00
B. State Costs by Source of Funds	Increased Costs	Decreased Costs
GPR	\$	\$ -
FED		-
PRO/PRS		-
SEG/SEG-S		-
State Revenues Complete this only when proposal will increase or decrease state revenues (e.g., tax increase, decrease in license fee, etc.)	Increased Rev.	Decreased Rev.
GPR Taxes	\$	\$ -
GPR Earned		-
FED		-
PRO/PRS		-
SEG/SEG-S		-
TOTAL State Revenues	\$	\$ -

NET ANNUALIZED FISCAL IMPACT
STATE

LOCAL

NET CHANGE IN COSTS \$ 00.00 _____ \$ 00.00 _____

NET CHANGE IN REVENUES \$ 00.00 _____ \$ 00.00 _____

Agency/Prepared by: (Name & Phone No.) DHFS/OSF Richard T. Chao	Authorized Signature/Telephone No. John Kiesow, Exec. Asst., 266-0067	Date April 5, 1999
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