

Fiscal Estimate - 2015 Session

Original
 Updated
 Corrected
 Supplemental

LRB Number 15-0257/2	Introduction Number AB-0852				
Description Expanding eligibility for the earned income tax credit; hospital best practices for postpartum patients and newborns; hospital staff privileges and written agreements required for nurse-midwives; coverage of nurse-midwives under the injured patients and families compensation fund; a report on information related to hospital neonatal intensive care units; an electronic application and information system to determine eligibility and register for public assistance programs; directing the Department of Health Services to request a Medical Assistance waiver; evidence-based home visitation program services for persons who are at risk of poor birth outcomes or of abusing or neglecting their children; designating race and ethnicity on birth certificates; a report on fetal and infant mortality and birth outcomes; requiring informed consent for performance on pregnant women of certain elective procedures prior to the full gestational term of a fetus; cultural competency training for certain students enrolled in the University of Wisconsin System and the technical college system; granting rule-making authority; and requiring the exercise of rule-making authority					
Fiscal Effect State: <input type="checkbox"/> No State Fiscal Effect <input type="checkbox"/> Indeterminate <input checked="" type="checkbox"/> Increase Existing Appropriations <input type="checkbox"/> Increase Existing Revenues <input type="checkbox"/> Increase Costs - May be possible to absorb within agency's budget <input type="checkbox"/> Decrease Existing Appropriations <input type="checkbox"/> Decrease Existing Revenues <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Create New Appropriations <input type="checkbox"/> Decrease Costs					
Local: <input checked="" type="checkbox"/> No Local Government Costs <input type="checkbox"/> Indeterminate 1. <input type="checkbox"/> Increase Costs 3. <input type="checkbox"/> Increase Revenue <input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory <input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory 2. <input type="checkbox"/> Decrease Costs 4. <input type="checkbox"/> Decrease Revenue <input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory <input type="checkbox"/> Permissive <input type="checkbox"/> Mandatory 5. Types of Local Government Units Affected <input type="checkbox"/> Towns <input type="checkbox"/> Village <input type="checkbox"/> Cities <input type="checkbox"/> Counties <input type="checkbox"/> Others <input type="checkbox"/> School Districts <input type="checkbox"/> WTCS Districts					
<table style="width: 100%;"> <tr> <td style="width: 50%;">Fund Sources Affected</td> <td style="width: 50%;">Affected Ch. 20 Appropriations</td> </tr> <tr> <td> <input checked="" type="checkbox"/> GPR <input type="checkbox"/> FED <input type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEGS </td> <td></td> </tr> </table>		Fund Sources Affected	Affected Ch. 20 Appropriations	<input checked="" type="checkbox"/> GPR <input type="checkbox"/> FED <input type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEGS	
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Agency/Prepared By	Authorized Signature	Date			
OCI/ Jason Levine (608) 267-7911	Dan Schwartzter (608) 267-1233	2/16/2016			

Fiscal Estimate Narratives

OCI 2/16/2016

LRB Number	15-0257/2	Introduction Number	AB-0852	Estimate Type	Original
Description Expanding eligibility for the earned income tax credit; hospital best practices for postpartum patients and newborns; hospital staff privileges and written agreements required for nurse-midwives; coverage of nurse-midwives under the injured patients and families compensation fund; a report on information related to hospital neonatal intensive care units; an electronic application and information system to determine eligibility and register for public assistance programs; directing the Department of Health Services to request a Medical Assistance waiver; evidence-based home visitation program services for persons who are at risk of poor birth outcomes or of abusing or neglecting their children; designating race and ethnicity on birth certificates; a report on fetal and infant mortality and birth outcomes; requiring informed consent for performance on pregnant women of certain elective procedures prior to the full gestational term of a fetus; cultural competency training for certain students enrolled in the University of Wisconsin System and the technical college system; granting rule-making authority; and requiring the exercise of rule-making authority					

Assumptions Used in Arriving at Fiscal Estimate

Under current law, certain health care providers (covered health care providers), who meet certain criteria, are covered by the Injured Patients and Families Compensation Fund (Fund) for claims for damages for bodily injury or death due to acts or omissions of those covered health care providers. Any claims filed against a covered health care provider must follow the procedures and are subject to the restrictions in current law. Currently, nurse midwives are not included separately as a provider under the Fund, and as a result are not covered by the Fund.

Covered health care providers, under current law, are required to maintain certain liability insurance or to qualify as a self-insurer. The insurance policy under which a covered health care provider is covered must meet certain requirements under current law. If the covered health care provider satisfies the requirements of current law, he or she is liable for malpractice for no more than the prescribed limits of a self-insured covered health care provider or no more than the maximum liability limit for which the covered health care provider is insured. The Fund pays any portion of a medical malpractice claim against a covered health care provider that is in excess of the self-insured limits or the liability insurance limit, except if the damages for injury or death are caused by an intentional crime. Covered health care providers pay an annual assessment, which is deposited in the fund.

This bill would add nurse-midwives to the law pertaining to the fund and to the malpractice claims, and therefore, under the bill, nurse-midwives would be covered by the fund and would be subject to the restrictions to be covered by the fund.

Although most of the costs of implementing this bill would ultimately be borne by the Fund and not the State, the Office of the Commissioner of Insurance (OCI) would need to engage in rulemaking to amend ch. Ins 17, Wis Adm. Code accordingly. OCI notes that insurers would need at least six months, rather than the three months currently provided for in the bill, to implement the changes required by the bill.

Estimated rulemaking expenditures for OCI (including salary and fringe benefits) would be:

Attorney \$12,172.00
Chief Insurance Examiner \$4,434.00
Total Salary and Fringe Benefits \$16,606.00

Long-Range Fiscal Implications

None