Fiscal Estimate - 2003 Session

	Original		Updated	38	Corrected		Supplemental
LRB	Number	03-1984/1		Introd	luction Numb	oer SI	B-99
Subjec	t ·						
Require	e hospital to p	provide sexual	assault victim	info and eme	rgency contrace	otion	
Fiscal	Effect						
	No State Fiscondeterminate Increase E Appropriat Decrease Appropriat Create Ne	Existing ions Existing	Rever Decre Rever	ase Existing	to abs	se Costs - orb within Yes ase Costs	- May be possible agency's budget ⊠No
2	ndeterminate I. Increase Permiss 2. Decreas	e Costs ive Mandato e Costs ive Mandato	3. Increary Permi	ise Revenue ssive Man ase Revenue ssive Man	datory Tov	ment Unit wns unties hool stricts	ts Affected Village Cities Others WTCS Districts
Fund Sources Affected Affected Ch. 20 Appropriations GPR FED PRO PRS SEG SEGS 20.435 (6)(a)							
Agency	y/Prepared E	Зу	7	Authorized S	ignature		Date
DHFS/	Curtis Cunni	ngham (608) 26	66-5362 F	redi Ellen Bo	edi Ellen Bove (608) 266-2907		

Fiscal Estimate Narratives DHFS 9/8/2003

LRB Number 03-1984/1	Introduction Number	SB-99	Estimate Type	Original			
Subject							
Require hospital to provide sexual assault victim info and emergency contraception							

Assumptions Used in Arriving at Fiscal Estimate

Emergency contraception is prescribed at the discretion of a physician within 72 hours following unprotected intercourse to prevent unintended pregnancy. Currently, Wisconsin does not require doctors or hospitals to provide information regarding emergency contraception or to prescribe emergency contraception. However, if a doctor or hospital withholds information regarding emergency contraception, a patient might be able to sue the provider for malpractice on the basis that patients have a right to receive information necessary to make informed decisions. Also, in some cases a patient may be able to sue if emergency contraception is not provided. Wisconsin law exempts certain medical providers from any civil damages resulting from their refusal to perform specific services, such as abortions, based on religious or moral grounds, but emergency contraception is not one of these services.

Senate Bill 99 requires a hospital that provides emergency services to provide a victim of sexual assault, upon victim's consent, accurate unbiased information about emergency contraception, inform her of her option to receive emergency contraception and provide emergency contraception immediately to her if she requests it. The hospital is also responsible to ensure that each hospital employee that provides care to victims of sexual assault has available medically accurate and unbiased information about emergency contraception. Senate Bill 99 also defines emergency contraception as a drug or device that prevents a pregnancy after intercourse. Emergency contraception does not include a drug or device that terminates the pregnancy of a woman who is known to be pregnant.

Senate Bill 99 states that the Department of Health and Family Services is responsible to respond to any complaint concerning non-compliance and shall periodically review hospital procedures to determine compliance. The bill sets a fine of \$2,500-\$5,000 for each violation of a provision in the bill. If a hospital violates the provisions twice, the Department may, after providing notice to the hospital, suspend or revoke the hospital's certificate of approval and may deny application for a new certificate of approval.

There are 157 hospitals in Wisconsin that would be affected by this legislation. Currently, the Department does not have staff to monitor compliance. It would cost approximately \$65,000 to hire 1.0 FTE nurse consultant to monitor compliance and respond to complaints. This legislation does not identify who would pay to produce the information to be provided, provide the training, or pay for the medication of individuals who could not assume the cost. Since the Department is not provided any authority or funding for these purposes, it is likely that these costs would be borne by the hospitals. If hospital certification is revoked, the hospital may not be certified under Medicaid. Therefore, if several hospitals (or a few key hospitals) are decertified, access to Medicaid hospital care could be restricted in certain areas of the State.

Long-Range Fiscal Implications

Fiscal Estimate Worksheet - 2003 Session

Detailed Estimate of Annual Fiscal Effect

☑ Original ☐ Updated	Corrected	Supplemental						
LRB Number 03-1984/1	Introduction Num	ber SB-99						
Subject Require hospital to provide sexual assault victim info and emergency contraception								
I. One-time Costs or Revenue Impacts for State and/or Local Government (do not include in annualized fiscal effect):								
II. Annualized Costs:	Annualized Fisc	cal Impact on funds from:						
	Increased Costs	Decreased Costs						
A. State Costs by Category								
State Operations - Salaries and Fringes	\$58,400							
(FTE Position Changes)	(1.0 FTE)							
State Operations - Other Costs	6,600							
Local Assistance								
Aids to Individuals or Organizations								
TOTAL State Costs by Category	\$65,000	\$						
B. State Costs by Source of Funds								
GPR	65,000							
FED								
PRO/PRS								
SEG/SEG-S								
III. State Revenues - Complete this only w revenues (e.g., tax increase, decrease in I	icense fee, ets.)	decrease state						
	Increased Rev	Decreased Rev						
GPR Taxes	\$	\$						
GPR Earned								
FED								
PRO/PRS								
SEG/SEG-S								
TOTAL State Revenues	\$	\$						
NET ANNUA	ALIZED FISCAL IMPACT							
	<u>State</u>	<u>Local</u>						
NET CHANGE IN COSTS	\$65,000	\$						
NET CHANGE IN REVENUE	\$	\$						
Agency/Prepared By	Authorized Signature	Date						
DHFS/ Curtis Cunningham (608) 266-5362	Fredi Ellen Bove (608) 266-29	9/8/2003						