

Fiscal Estimate - 2007 Session

Original Updated Corrected Supplemental

LRB Number 07-1092/4		Introduction Number AB-0969	
Description Changing informed consent requirements for HIV testing, disclosure of test results, reporting significantly exposed persons, increasing liability for certain violations, and providing penalties			
Fiscal Effect			
State:			
<input checked="" type="checkbox"/> No State Fiscal Effect			
<input type="checkbox"/> Indeterminate			
<input type="checkbox"/> Increase Existing Appropriations		<input type="checkbox"/> Increase Existing Revenues	
<input type="checkbox"/> Decrease Existing Appropriations		<input type="checkbox"/> Decrease Existing Revenues	
<input type="checkbox"/> Create New Appropriations		<input type="checkbox"/> Increase Costs - May be possible to absorb within agency's budget	
		<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<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	
Fund Sources Affected		Affected Ch. 20 Appropriations	
<input type="checkbox"/> GPR <input type="checkbox"/> FED <input type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEGS			
Agency/Prepared By		Authorized Signature	Date
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Fiscal Estimate Narratives

DHFS 4/14/2008

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Description Changing informed consent requirements for HIV testing, disclosure of test results, reporting significantly exposed persons, increasing liability for certain violations, and providing penalties					

Assumptions Used in Arriving at Fiscal Estimate

Current law requires the subject of an HIV test to provide informed consent for the procedure before they are tested or before the results of the test can be released. Wisconsin statutes require the administrator of the test to obtain written informed consent from the individual being tested on a specific form as defined by the statutes. Current law also provides that, under certain limited circumstances, an individual may be tested without his or her consent.

AB 969 removes the written informed consent requirement and in its place requires providers to orally inform individuals that a test for HIV will be performed unless that individual declines consent. The individual may give oral consent and, if he or she does not decline consent, may be assumed to have given consent. Providers must also inform individuals being tested that they have the right to identify people to whom the results may or may not be disclosed. AB 969 also makes other changes to provisions regarding HIV testing, including provisions regarding the information health care providers report to the state epidemiologist on HIV positive tests and it provides for increased penalties for wrongful intentional disclosure of results of a test.

The provisions in AB 969 will make Wisconsin state law more consistent with new federal Centers for Disease Control and Prevention (CDC) guidelines regarding HIV testing.

As a result of this bill, the Department will likely conduct some health care provider education on the new provisions. This training can be absorbed within the current budget. The CDC guidelines and AB 969 are intended to increase HIV testing in medical care settings and identify more persons infected with HIV. The majority of HIV testing in medical care settings is funded by private insurance and Medicaid. In addition, there may be a small increase to the amount of testing performed by the State Laboratory of Hygiene. It is also expected that the HIV testing changes included in AB 969 may result in more persons identified with HIV infection and corresponding increases in HIV/AIDS care services. None of the increases in testing or services is expected to be significant. Earlier identification and treatment of AIDS may also result in reduced long term medical costs, which would offset any potential increase in testing costs. There will be no significant fiscal effect on the Department as a result of this bill.

Long-Range Fiscal Implications