



**Fiscal Estimate Narratives**  
**DHFS 5/14/2007**

LRB Number	<b>07-2325/1</b>	Introduction Number	<b>SB-142</b>	Estimate Type	<b>Original</b>
<b>Description</b> Requirements to successfully complete training on use of an automated external defibrillator, extending the time limit for emergency rule procedures, providing an exemption from emergency rule procedures, and requiring the exercise of rule-making authority					

**Assumptions Used in Arriving at Fiscal Estimate**

Current law requires individuals who work in certain programs licensed or regulated by the Department to complete first aid courses in cardiopulmonary resuscitation (CPR). These individuals include (1) emergency medical technicians (EMTs); (2) first responders; (3) instructors of EMTs or first responders; (4) hospital medical and nursing personnel who provide emergency services; (5) staff in day care centers, children's group homes, and shelter care facilities who provide care for children; and (6) drivers of and attendants to passengers of specialized medical vehicles (SMVs).

SB 142 adds to the first aid/CPR requirement by providing that these individuals must also successfully complete a course on the use of automated external defibrillators (AEDs). SB 142 also requires the Department to (1) approve administrative rules which would require at least one staff person who is a housing resident in a residential care center for children to have training in the use of defibrillators and (2) approve training courses in the use of AEDs.

The Department can absorb the increased workload that will result from the requirements of this bill. As a result, the fiscal effect of this bill on the Department is expected to be minimal.

The fiscal effect on local providers will vary.

Currently, many of the standard courses in CPR include training in the use of AEDs. The use of AEDs is not generally taught as a stand-alone course but as part of a course in certification in the use of first aid and CPR. The cost of a certification course varies from \$30 in technical colleges to \$50 when taught in private centers.

EMTs, first responders, trainers of EMTs and first responders, and medical personnel who work in emergency services are generally trained in the use of AEDs as part of their standard training and certification. There is not likely to be an additional cost to these individuals or the agencies for which they work as a result of the requirements in this bill.

Day care workers and workers in children's group homes are less likely to be trained in AEDs because defibrillators are seldom used on children and AEDs are not located in most agencies. If the course in AEDs is part of the certification course on first aid and CPR which these individuals are required to take, there would be no additional cost as a result of the new requirements. However, if such training is not included in the first aid/CPR course and if workers who are already certified are required to undergo additional training in AEDs, there will be an additional cost either to the individual workers or to their places of employment.

An estimated 5,000 to 6,000 agencies, and possibly several thousand employees, will be affected by the provisions in this bill. It is not known how many employees would be required to undergo additional training to meet the requirements of this bill. Because there is high turnover in some areas of childcare employment, such as day care, employers who pay for additional training courses for employees may incur substantial costs. The potential cost to employers or employees cannot be estimated. The requirement could increase costs to county human services departments for foster care placements in these facilities, to the extent that facilities increase rates to fund additional training costs.

There are currently 159 SMV providers in the Medicaid system. Drivers and attendants of passengers in SMVs are required to be certified in first aid and CPR. There will be a cost to these individuals or their employers if they are required to undergo additional training in AEDs. The potential cost to employers or employees cannot be estimated.

## Long-Range Fiscal Implications