

### Fiscal Estimate - 2015 Session

Original     
  Updated     
  Corrected     
  Supplemental

LRB Number **15-1503/1** Introduction Number **SB-028**

**Description**  
 Permitting certain individuals to make requests for medication for the purpose of ending their lives and providing penalties

**Fiscal Effect**

**State:**

No State Fiscal Effect  
 Indeterminate  
 Increase Existing Appropriations     
  Increase Existing Revenues     
  Increase Costs - May be possible to absorb within agency's budget  
 Decrease Existing Appropriations     
  Decrease Existing Revenues     
  Yes       No  
 Create New Appropriations     
  Decrease Costs

**Local:**

No Local Government Costs  
 Indeterminate

1.  Increase Costs      3.  Increase Revenue  
 Permissive  Mandatory     
  Permissive  Mandatory  
 2.  Decrease Costs      4.  Decrease Revenue  
 Permissive  Mandatory     
  Permissive  Mandatory

5. Types of Local Government Units Affected

Towns       Village       Cities  
 Counties       Others  
 School Districts       WTCS Districts

**Fund Sources Affected**      **Affected Ch. 20 Appropriations**

GPR     FED     PRO     PRS     SEG     SEGS    20.435. (1) (gm)

Agency/Prepared By	Authorized Signature	Date
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## Fiscal Estimate Narratives

DHS 2/20/2015

LRB Number	15-1503/1	Introduction Number	SB-028	Estimate Type	Original
<b>Description</b> Permitting certain individuals to make requests for medication for the purpose of ending their lives and providing penalties					

### Assumptions Used in Arriving at Fiscal Estimate

Under current law, all suicides in Wisconsin must be reported to the sheriff, police chief, or medical examiner of the county where the death took place. This includes physician-assisted suicides in the case of terminal illness. In the event that a health care provider assists an individual in taking his or her own life, neither the health care provider nor facility is protected from being charged with a crime, being held civilly liable, or charged with unprofessional conduct, no matter the circumstance.

Under this bill, an individual may request medication for the purpose of ending his or her life from his or her attending physician, provided the individual meets stated preconditions (including diagnosis with a terminal illness). After the initial oral request, the requester must submit a medical request form that is supplied by the Department and stored in the requester's health care record. Once this and all other requirements have been met by the requester and his or her attending physician, the physician will report information about the request to the Department on a Department-prescribed form. The physician will then be free to prescribe medication that will end the individual's life without being charged with a crime, being held civilly liable, or being charged with unprofessional conduct (provided that directives of the statute have been satisfied).

If enacted, the responsibilities of the Department would include creating and distributing medical request forms and accompanying statute information, creating, providing, and storing physician compliance forms, annually examining a sample of the received compliance forms, and providing copies of forms during investigations of alleged violations of the statute. The Department expects a low volume of records, and so would keep the records as paper or scanned documents. Assuming low volume, the Department anticipates that it can accomplish the additional workload with existing resources.

The Office of Health Informatics provides the majority of its forms electronically with near-zero additional cost. In order to provide hard copies to the locations specified in s. 156.15, the Department expects an initial cost of \$0.05 per copy, with five copies to 1000 locations, or \$250. The Department anticipates that the cost to provide subsequent forms to these locations or private persons would be minimal, and absorbed within the agency's budget.

The Department does not anticipate a fiscal impact on local health departments.

### Long-Range Fiscal Implications