

COMMITTEE ON LEGISLATIVE RESEARCH
OVERSIGHT DIVISION

FISCAL NOTE

L.R. No.: 0123-01
Bill No.: SB 196
Subject: Abortion; Health Care; Health Care Professionals; Health Department; Physicians
Type: Original
Date: February 14, 2007

Bill Summary: This proposal enacts provisions relating to the capacity of an unborn child to experience pain during an abortion.

FISCAL SUMMARY

ESTIMATED NET EFFECT ON GENERAL REVENUE FUND			
FUND AFFECTED	FY 2008	FY 2009	FY 2010
General Revenue	(Less than \$3,130)	(Less than \$3,758)	(Less than \$3,758)
Total Estimated Net Effect on General Revenue Fund	(Less than \$3,130)	(Less than \$3,758)	(Less than \$3,758)

ESTIMATED NET EFFECT ON OTHER STATE FUNDS			
FUND AFFECTED	FY 2008	FY 2009	FY 2010
Total Estimated Net Effect on <u>Other</u> State Funds	\$0	\$0	\$0

Numbers within parentheses: () indicate costs or losses.
This fiscal note contains 6 pages.

ESTIMATED NET EFFECT ON FEDERAL FUNDS			
FUND AFFECTED	FY 2008	FY 2009	FY 2010
Federal	(Less than \$5,200)	(Less than \$6,242)	(Less than \$6,242)
Total Estimated Net Effect on <u>All</u> Federal Funds	(Less than \$5,200)	(Less than \$6,242)	(Less than \$6,242)

ESTIMATED NET EFFECT ON FULL TIME EQUIVALENT (FTE)			
FUND AFFECTED	FY 2008	FY 2009	FY 2010
Total Estimated Net Effect on FTE	0	0	0

- Estimated Total Net Effect on All funds expected to exceed \$100,000 savings or (cost).
- Estimated Net Effect on General Revenue Fund expected to exceed \$100,000 (cost).

ESTIMATED NET EFFECT ON LOCAL FUNDS			
FUND AFFECTED	FY 2008	FY 2009	FY 2010
Local Government	\$0	\$0	\$0

FISCAL ANALYSIS

ASSUMPTION

Officials from the **Office of the Attorney General (AGO)** state that the provisions of this proposal do not directly affect this office. However, AGO assumes that because this proposal has the potential to be the subject of litigation, costs are unknown, but are likely to be less than \$100,000.

Officials from the **Department of Health and Senior Services (DHSS)** assume the proposed legislation would require the DHSS to develop materials related to fetal pain and to post them on the department's website. Security established through the department's firewall will immediately notify the department of any tampering with the website. Printed materials may need to be distributed by the department based on the interpretation of the proposed legislation.

In 2005, 7,977 abortions were performed in Missouri with .6% (48) occurring after the 20th week of pregnancy. The cost for printing of the brochure on fetal pain is estimated at \$.50 (48 x \$.50 = \$24) per copy and the cost for mailing by certified mail with a receipt at \$5.00 each (48 x \$5.00 = \$240), with a total cost of \$5.50 each (48 x \$5.50 = \$264). This amount will be reimbursed through charges to those requesting the literature.

The department has no way to project the amount of printed literature that may be requested under this proposed legislation and thus cannot determine an exact cost. It is possible that Missourians, other than pregnant women seeking an abortion, may request printed copies of the information. It is projected that requesters of bulk printed literature would be charged the cost per piece of literature and a cost for shipping and handling.

Oversight assumes the DHSS could absorb the costs of printing and mailing the brochures related to this proposal. Oversight assumes any significant increase in the workload of the DHSS would be reflected in future budget request.

Officials from the **Department of Social Services - Division of Medical Services (DMS)** assume the proposed legislation could have a minimal fiscal impact on the DMS.

The treating physician must inform women seeking abortions after 20 weeks gestation that she has the right to review information provided by the state of Missouri about the capacity of an unborn child to experience pain during an abortion. The Department of Health and Senior Services will provide the printed material with this information.

ASSUMPTION (continued)

After reviewing the information and if the pregnant woman consents, the treating physician will administer the anesthetic or analgesic. Since there could be an increase use of anesthetic or analgesic during an abortion, it could have a fiscal impact on the DMS. Medicaid payment is only available for abortions performed when the life of the mother would be endangered if the fetus were carried to term or that the pregnancy is the result of act of rape or incest. Since DMS pays for very few abortions, the fiscal impact is expected to be minimal. The amount is unknown, but less than \$10,000.

Oversight notes that states can earn the federal medical assistance percentage (FMAP) on Medicaid program expenditures. The Social Security Act requires the Secretary of Health and Human Services to calculate and publish the actual FMAP each year. The FMAP is calculated using economic indicators from state and the nation as a whole. Missouri's FMAP is a 62.42% federal match. The state matching requirement is 37.58%.

<u>FISCAL IMPACT - State Government</u>	FY 2008 (10 Mo.)	FY 2009	FY 2010
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GENERAL REVENUE FUND

<u>Costs - Department of Social Services</u> Program Costs (DMS)	<u>(Less than</u> <u>\$3,130)</u>	<u>(Less than</u> <u>\$3,758)</u>	<u>(Less than</u> <u>\$3,758)</u>
ESTIMATED NET EFFECT ON GENERAL REVENUE FUND	<u>(Less than</u> <u>\$3,130)</u>	<u>(Less than</u> <u>\$3,758)</u>	<u>(Less than</u> <u>\$3,758)</u>

FEDERAL FUNDS

<u>Costs - Department of Social Services</u> Program Costs (DMS)	<u>(Less than</u> <u>\$5,200)</u>	<u>(Less than</u> <u>\$6,242)</u>	<u>(Less than</u> <u>\$6,242)</u>
ESTIMATED NET EFFECT ON FEDERAL FUNDS	<u>(Less than</u> <u>\$5,200)</u>	<u>(Less than</u> <u>\$6,242)</u>	<u>(Less than</u> <u>\$6,242)</u>

<u>FISCAL IMPACT - Local Government</u>	FY 2008 (10 Mo.)	FY 2009	FY 2010
	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>

FISCAL IMPACT - Small Business

If physicians and/or abortion providers are required to provide the information in the printed format it will cost them \$5.50 per woman to provide the information.

FISCAL DESCRIPTION

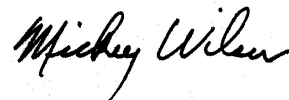
This legislation establishes the Unborn Child Pain Prevention Act. This legislation requires treating physicians to inform women seeking abortions after 20 weeks gestation that she has the right to review specified information about the capacity of an unborn child to experience pain during an abortion. The treating physicians must also offer the women the option of administering an anesthetic or analgesic to the unborn child. There are exceptions to these requirements in the cases of medical emergencies.

This legislation also removes the definition of "medical emergency" from Section 188.039, and moves it, without any changes, to the definitions in Section 188.015.

This legislation is not federally mandated, would not duplicate any other program and would not require additional capital improvements or rental space.

SOURCES OF INFORMATION

Office of the Attorney General
Department of Health and Senior Services
Department of Social Services



Mickey Wilson, CPA
Director

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