

COMMITTEE ON LEGISLATIVE RESEARCH  
OVERSIGHT DIVISION

**FISCAL NOTE**

L.R. NO.: 2324-01  
BILL NO.: SB 646  
SUBJECT: Anatomical Gift Act  
TYPE: Original  
DATE: January 10, 2000

**FISCAL SUMMARY**

<b>ESTIMATED NET EFFECT ON STATE FUNDS</b>			
FUND AFFECTED	FY 2001	FY 2002	FY 2003
Highway Fund	(\$50,979)	\$0	\$0
Organ Donor Program	\$1,050,000 to Unknown	\$1,323,511 to Unknown	\$1,322,106 to Unknown
<b>Total Estimated Net Effect on <u>All</u> State Funds</b>	<b>\$999,021 to Unknown</b>	<b>\$1,323,511 to Unknown</b>	<b>\$1,322,106 to Unknown</b>

\* Net revenues from the program expected to exceed \$1.3 million annually.

<b>ESTIMATED NET EFFECT ON FEDERAL FUNDS</b>			
FUND AFFECTED	FY 2001	FY 2002	FY 2003
None			
<b>Total Estimated Net Effect on <u>All</u> Federal Funds</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

<b>ESTIMATED NET EFFECT ON LOCAL FUNDS</b>			
FUND AFFECTED	FY 2001	FY 2002	FY 2003
<b>Local Government</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

Numbers within parentheses: ( ) indicate costs or losses.

This fiscal note contains 10 pages.

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**FISCAL ANALYSIS**

ASSUMPTION

Officials from the **Department of Economic Development - Division of Professional Registration**, the **Department of Health**, the **Department of Public Safety - Missouri State Highway Patrol**, the **Department of Public Safety - Division of Fire Safety**, and the **Office of Attorney General** assume this proposal would not fiscally impact their agencies.

**Department of Revenue (DOR)** officials assume the following administrative and fiscal impacts:

**ADMINISTRATIVE IMPACT**

**DIVISION OF MOTOR VEHICLE AND DRIVERS LICENSING**

**Motor Vehicle Bureau**

The Motor Vehicle Bureau assumes the first year flyers would be mailed with all registrations to inform individuals of the \$1 donation option. This would also enable the MVB to revise applications to include a statement regarding organ donation. The MVB would incur expenses in the amount of \$13,667 for procedures/policy changes, forms, postage and flyers for renewals. This bureau would also incur expenses in the amount \$10,500 programming changes to motor vehicle registration system (FASTR) to include the \$1 donation option at the time of renewal or registration.

**Field Services Bureau**

***Collection of \$1 Organ Donation***

The Field Services Bureau estimates there will be an additional 30 seconds of processing time per motor vehicle transaction to ask the applicant if he/she wishes to donate \$1 to the organ donor fund and to make the appropriate entry on the computer screen. In FY98, approximately 4.7 million vehicle registrations were processed. Of these 21 percent, or 987,000, were processed in our branch offices.

$987,000 \times 30 \text{ seconds} = 29,610,000 \text{ seconds} \div 60 \text{ seconds} = 493,500 \text{ minutes}$   
 $493,500 \text{ minutes} \div 60 \text{ minutes} = 8,225 \text{ hours} \div 2080 \text{ work hours} = 4 \text{ Revenue License Technicians I.}$

ASSUMPTION (continued)

***Collection of Organ Donation Information***

This proposal requires the Division of Motor Vehicle and Drivers Licensing to modify the driver's license and identification card application process and renewal system to: 1) Obtain information from individuals over the age of eighteen regarding consent to anatomical donation and 2) Allow persons under the age of eighteen to register as donors with parental consent. The inquiry on the application and renewal form shall read "Do you wish to have the organ donor designation printed on your driver's license?"

This proposal does not specifically require the Division of MV/DL to obtain any more information than if the person wishes to be an organ donor. The way the proposal is written the FSB would not require any additional FTE to implement the legislation.

However, if the intent of proposal was to obtain ***VERY specific and detailed*** information from an applicant that chose organ donation such as what organs were chosen to be donated, there would be a great deal of education and time on the part of field offices to thoroughly explain these questions and that the information being given would be a part of the driver's license and the driver's license is legally binding and doctors can take the organs of a deceased person without consulting family members or further legal action. It would be imperative this be done while giving the applicant the necessary privacy and dignity to discuss this in detail and have all questions answered. ***IF*** this was the intent the FSB anticipates it would require an additional 22 Revenue License Technicians I for the 11 branch offices to screen all driver/non-driver license applicants before they reach the counter.

In order to minimize the risk of entering the information incorrectly, key entry will be done as part of the OTC application process. All questions concerning the organ donor process and designation of specific organs will be listed on OTC screens. Once all the questions have been answered, a form will be printed for the applicant to read, verify, and sign. If any information is incorrect or if an applicant has changed his/her mind about the process or about a particular organ, there will be an over-ride option as part of OTC allowing for corrections and reprinting of the form. The signed forms will be sent in to the central office. The FSB estimates an average of 4 additional minutes of processing time will be required for those transactions which include the designation of organ donor. For the last two years, there has been an average of 35,000 applications per month, or 420,000 per year, who have expressed interest in becoming an organ donor. Thirty-three percent, or 138,600 of those transactions were completed in branch offices.

$138,600 \times 4 \text{ minutes} = 554,400 \text{ minutes} \div 60 \text{ minutes} = 9,240 \text{ hours}$   
 $9,240 \text{ hours} \div 2,080 \text{ work hours} = 4.44 \text{ FTE}$

ASSUMPTION (continued)

***IF*** the intent of the proposal was to have the Division of MV/DL enter and maintain this VERY

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specific and detailed information the FSB would require 26.5 Revenue License Technicians I and the associated expense and equipment for these FTE.

**Oversight** assumes that the majority of offices could absorb the additional duties and has therefore allowed only two FTE.

### Drivers License Bureau

As previously stated above this proposal does not specifically require the Division of MV/DL to obtain any more information than if the person wishes to be an organ donor. The Drivers License Bureau currently asks an individual if they are interested in being an organ donor at the time of license application or renewal. ***IF*** the intent was to simply continue collecting this information and forward it to the Department of Health for inclusion the **existing donor registry** the DLB could implement this with existing resources. ***IF*** the intent is to collect additional information it would have a ***significant impact*** on the bureau and additional resources, expenses and equipment would be required.

This proposal also requires the Department to allow individuals to designate organ donation preferences even if the individual is not completing a driver license transaction. The Drivers License Bureau cannot determine the number of individual's who would choose this option; however, it would affect the following processing areas: mail room; license processing; key entry; microfilming; correspondence; telephone calls; central branch office; and valid without photo processing. This would require additional FTE and associated costs (equipment and expenses). The total cost for this portion of the proposal is **UNKNOWN**.

The Drivers License Bureau will incur programming expenses in the amount of \$42,000 to the Over-the-Counter system to accommodate the "organ donor" designation on the front of the driver's license or nondriver's license.

This proposal also requires the DLB to give access to hospitals, OPO's, etc. Since the number of individuals asking for access to this information cannot be determined programming costs are **UNKNOWN**.

### DIVISION OF TAXATION

This proposal requires DOR to provide a space on the face of the individual income tax return for the taxpayer to designate a contribution to the "Organ Donor Program." (Checkoff)

#### ASSUMPTION (continued)

The additional checkoff for the "Organ Donor Program" will need to be added to the Missouri

individual income tax returns, MO-1040, MO-1040A, MO-1040B, and MO-1040T.

The new checkoff requires programming modifications to several records in the MINITS system. This includes changes to the batch and on-line programs and screens, changes to statistics/reports, coordination of data transfer with the Telefile and ELF vendors, speed up changes for the new field entry screens, and additional notice messages to existing tables. The Division of Taxation will require three (1) Computer Information Technologist III for 1,211 hours of overtime, two (2) Computer Information Technologists IV for 346 hours of overtime and two (2) Programming Analysis Supervisors for 87 hours of overtime to test and make the above referenced programming modifications.. Total overtime hours = 1,644. Total expense incurred by Taxation for overtime is \$31,668.

**Oversight** assumes all programming changes would need to be completed by January 1, 2001 and has adjusted overtime costs to \$18,000.

The Division of Taxation assumes that the Organ Donor Program checkoff will be processed like other checkoffs on the individual income tax return and it will not bill for the checkoff amount.

### **STATE DATA CENTER**

The State Data Center will require an implementation cost of \$5,129 in FY01 to make modifications to the current Missouri Drivers License System (MODL) and the Uniform Field Office System (UFO). This center will also require \$10,584 for taxation system program changes in FY01 and ongoing costs in amount of \$451 for printing and disk storage for FY01, FY02 & FY03.

### **REVENUE IMPACT - Organ Donor Program Fund**

The Motor Vehicle Bureau estimates that approximately 30% of motor vehicle registration applicants will donate a \$1 to the organ donor program. (Currently 30% of the drivers license applicants are donating \$1)

$$4,600,000 \times 30\% = 1,380,000 \times \$1 = \$1,380,000$$

Special Note: The estimated increase in donations could be high as all individuals may not donate \$1 at the time of license renewal **AND** motor vehicle registration.

### **ASSUMPTION** (continued)

Section 194.249 allows an individual to voluntarily designate a contribution of any amount on the state individual income tax return. The Department of Revenue cannot determine the amount

of contributions that will be received. The revenue increase to the Organ Donor Program Fund is **UNKNOWN**.

**Oversight** notes that the fund is to repay the DOR the costs for development and implementation of the contribution program. These costs are reflected in the Highway Fund. Oversight has also reflected a transfer-in from the Organ Donor Program Fund to repay the costs of development and implementation. The proposal states that for the first fiscal year, the Organ Donor Program Fund shall reimburse the DOR for actual operating expenses of the program up to a maximum of \$100,000. For each fiscal year thereafter, the fund shall reimburse the DOR for the actual operating costs of the program in an amount not to exceed the prior year's actual operating costs, on a full fiscal year basis, plus three percent. Therefore, Oversight has calculated the net impact to DOR equal to approximately \$123,000 for FY01 and \$0 for FY02 and FY03 to reflect the reimbursement by the Organ Donor Program Fund.

**Oversight** cannot determine the expenditures related to the Organ Donor program. Therefore, Oversight will present an unknown amount of expenditures to the Organ Donor Program Fund. It is estimated that the amount of revenues will exceed the amount of expenditures for this new fund. Oversight has shown total impact to Organ Donor Program Fund equal to unknown to \$1,050,000 in FY01, unknown to \$1,323,511 in FY02, and unknown to \$1,322,106 in FY03 .

**Oversight** sent a fiscal note request to various community hospitals seeking input on any administrative or fiscal impacts on the hospitals by the proposal. However, we did not receive any responses. Oversight assumes that hospitals would experience some administrative tasks relating to this proposal. However, we believe that the functions could be absorbed with existing resources and therefore have shown no fiscal impact to hospitals.



(Continued)

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**ORGAN DONOR PROGRAM FUND**

Transfer - Out

Transfer To General Revenue Fund for DOR

Development and Implementation Costs	(\$100,000)	(\$56,489)	(\$57,894)
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**ESTIMATED NET EFFECT ON  
 ORGAN DONOR PROGRAM FUND**

	<b>\$1,050,000</b>	<b>\$1,323,511</b>	<b>\$1,322,106</b>
	to	to	to
	<b>Unknown</b>	<b>Unknown</b>	<b>Unknown</b>

FISCAL IMPACT - Small Business

No direct fiscal impact to small businesses would be expected as a result of this proposal.

DESCRIPTION

This proposal would modify Missouri's Uniform Anatomical Gift Act. It would allow minors at least 16 years of age to agree to donate an organ with parental consent noted on the donor card, application, driver's license, or other gift document. Any person would be able to donate his or her entire body, however, the gift would be invalid unless it is in writing at least 15 days before death or unless consent is given. If there are adult children of the deceased who are not children of the surviving spouse, their consent would be required for a whole body gift as well. If an individual completes any of the specified legal documents indicating organ donor status, then no consent would be required at the time of death.

If possible, hospitals would determine whether a patient has any document evidencing an anatomical gift. The absence of a document would not, however, create a presumption of the patient's wishes. Upon a donor's death, a hospital would make every effort to contact the donee. Current language has been deleted regarding the method hospitals may use to request anatomical gifts, when a suitable candidate is found. New language states that acute general hospitals may contact the federal Organ Procurement Organization (OPO) when a patient is under 75 years old and near death to determine the suitability for donation. Certain patient information would be given to the OPO for a suitability determination before a request is made of the patient. All information and contacts would be noted on the patient's medical record. If a donation is suitable, then the OPO and the attending physician would make a request of the patient and/or family. By August 28, 2001, hospitals would develop a protocol for organ requests. Each year, hospitals would perform a medical record review, subject to OPO guidelines, to determine donor

DESCRIPTION (continued)

potential and would report to the OPO within 45 days of completion of the review. Donors



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would designate that a "recovery specialist" may carry out donation procedures as outlined by a donor's will or other gift document. A recovery specialist would recover organs without a physician present.

The Division of Motor Vehicles would modify the driver's license application and renewal process by January 1, 2001. The new system would allow an individual to legally consent to organ donation and would allow persons under age 18 to register as donors with parental consent. With consent, the organ donation status would be noted on a driver's license. The OPO would be given access to this information at all times. The Department of Revenue would provide vehicle registration renewal applicants with the opportunity to donate \$1 to the Organ Donor Program Fund. The fund would reimburse the Department for costs of the program, subject to amount limitations. The Department would provide a space for a taxpayer to designate any amount for contribution to the Organ Donor Program Fund. The donation would be deducted from the individual's tax refund or added to the individual's tax payment. The Department Director would provide, by rule, the procedure and format for an applicant to designate an anatomical gift on the back of the driver's license. Certain persons, enumerated in Section 194.266 of this proposal, may search for a document or other information identifying an organ donor or donation refusal. No material discovered may be used for any purpose other than ascertaining organ donor status. Law enforcement officers must make reasonable efforts to notify next of kin when an individual is the victim of an accident-trauma and is hospitalized or dead. Such notification should be made in person, if possible. In addition to notifying family, the nearest OPO may be contacted to expedite decision making regarding potential organ and tissue recovery.

Hospitals or Physicians would be prohibited from being held liable for any actions done in accordance with these sections.

The Organ Donor Program Fund would be established and the moneys would be used solely by the Organ and Tissue Donor Awareness Board. Section 194.299, RSMo, which designated how the funds may be expended, is deleted. The Organ and Tissue Donor Awareness Board, consisting of nine members enumerated in Section 194.300 of the act, would be also established. The members would appointed by the Governor with the advice and consent of the Senate. The Board would develop donor awareness programs, award grants, and apply for appropriations, among other duties.

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

#### SOURCES OF INFORMATION

Department of Health

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Department of Revenue  
Department of Public Safety  
Missouri State Highway Patrol  
Division of Fire Safety  
Office of Attorney General

**NOT RESPONDING: Barton County Memorial Hospital, Cass Medical Center, Cooper County Memorial Hospital, Excelsior Springs Medical Center, Lincoln County Memorial Hospital, Pemiscot Memorial Hospital, Phelps County Regional Medical Center, Ray County Memorial Hospital, Samaritan Memorial Hospital, Ste. Genevieve County Memorial Hospital.**



Jeanne Jarrett, CPA  
Director  
January 10, 2000