



Legislative  
Council Staff

*Nonpartisan Services for Colorado's Legislature*

**HB 18-1399**

# FINAL FISCAL NOTE

**Drafting Number:** LLS 18-1239  
**Prime Sponsors:** Rep. Buckner  
Sen. Aguilar

**Date:** August 15, 2018  
**Bill Status:** Postponed Indefinitely  
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**Bill Topic:** REGULATION OF SURGICAL SMOKE

**Summary of Fiscal Impact:**

<input type="checkbox"/> State Revenue	<input type="checkbox"/> TABOR Refund
<input checked="" type="checkbox"/> State Expenditure	<input checked="" type="checkbox"/> Local Government ( <i>potential</i> )
<input type="checkbox"/> State Transfer	<input type="checkbox"/> Statutory Public Entity

This bill would have required licensed health facilities to adopt policies on preventing exposure to surgical smoke based on rules established by the Colorado Department of Public Health and Environment. This bill would have resulted in a minimal, ongoing increase in state agency workload, and potentially increased costs for state and local government entities that operate health facilities.

**Appropriation Summary:** No appropriation is required.

**Fiscal Note Status:** This fiscal note reflects the introduced bill. This bill was not enacted into law; therefore, the impacts identified in this analysis do not take effect.

## Summary of Legislation

This bill requires the Colorado Department of Public Health and Environment (CDPHE) to establish rules on the evacuation of surgical smoke during surgery by March 1, 2019. Health facilities that perform surgery (hospitals and ambulatory surgical centers) must adopt a plan for limiting human exposure to surgical smoke by July 1, 2019.

## State Expenditures

The bill increases state agencies workload, and potentially costs, as described below.

**Colorado Department of Public Health and Environment.** The CDPHE will have a one-time increase in workload in FY 2018-19 to conduct rulemaking and stakeholder engagement on the required surgical smoke rules. On an ongoing basis in future years, the CDPHE will be required to monitor compliance by hospitals and ambulatory surgical centers as part of the existing facility survey process. It is assumed that this workload can be accomplished within existing appropriations.

**Health facilities.** To the extent any health facilities operated by institutions of higher education or other state agencies are required to acquire new equipment for surgical facilities in order to comply with the rules concerning surgical smoke, costs will increase. These potential costs will vary by facility and have not been estimated.

**Local Government**

Similar to the health facility impact discussed in the State Expenditures section, any local governments that operate hospital or other surgical facilities may have costs to comply with the surgical smoke rules required under the bill. These costs will vary by facility and have not been estimated.

**Effective Date**

This bill was postponed indefinitely by the House Health, Insurance, and Environment Committee on May 3, 2018.

**Departmental Difference**

The CDPHE estimates that it will have one-time costs of \$33,137 and 0.3 FTE to conduct rulemaking and stakeholder engagement under the bill. The fiscal note does not include these costs given the narrow scope of the rulemaking.

**State and Local Government Contacts**

Higher Education

Information Technology

Public Health and Environment