



Fiscal Note

Drafting Number: LLS 23-0329

Prime Sponsors: Sen. Coleman

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Bill Status: Senate Health & Human Services

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Bill Topic: TIMELY CERTIFIED DEATH CERTIFICATES

Summary of Fiscal Impact:

☒ State Revenue

☒ State Expenditure

☐ State Transfer

☐ TABOR Refund

☒ Local Government

☐ Statutory Public Entity

The bill changes the timeframe required for a funeral director to file a certificate of death from 5 days to 48 hours. Additionally, the Department of Public Health and Environment must provide a certified death certificate to a qualified applicant within 24 hours. The bill increases state expenditures on an ongoing basis.

Appropriation Summary:

For FY 2023-24, the bill requires an appropriation of \$54,431 to the Department of Public Health and Environment.

Fiscal Note Status:

The fiscal note reflects the introduced bill.

Table 1
State Fiscal Impacts Under SB 23-020

		Budget Year FY 2023-24	Out Year FY 2024-25
Revenue	Cash Funds	up to \$72,000	up to \$72,000
	Total Revenue	up to \$72,000	up to \$72,000
Expenditures	Cash Funds	\$54,431	\$56,047
	Centrally Appropriated	\$13,079	\$16,135
	Total Expenditures	\$67,510	\$72,182
	Total FTE	0.8 FTE	1.0 FTE
Transfers		-	-
Other Budget Impacts	TABOR Refund	up to \$72,000	up to \$72,000

Summary of Legislation

The bill changes the time frame required for funeral directors to file a certificate of death with the state registrar from 5 days to 48 hours, with limited exceptions. The bill requires that a qualified individual complete the medical certification within 36 hours after a death unless an inquiry to the coroner is required. The Colorado Department of Public Health and Environment (CDPHE), upon request, must provide a certified death certificate to an applicant with a direct and tangible interest in the certified copy within 24 hours.

State Revenue

The bill will increase revenue to the Vital Statistics Record Cash Fund by up to \$72,000 per year beginning in FY 2023-24, assuming fees are adjusted as need to cover the expected costs under the bill.

Fee impact on vital records certificates. Colorado law requires legislative service agency review of measures which create or increase any fee collected by a state agency. Because the Office of the State Registrar and Vital Statistics is a cash-funded office of CDPHE, the fiscal note assumes that fees will be raised on vital records documents and services as necessary to cover the expenditures in the bill. The exact timing and change to any specific fee has not been estimated, as fees will be set administratively by the CDPHE based on cash fund balance, program costs, and the number of documents subject to the fee. For information purposes, the [current fee](#) for death certificates is \$20 for the first certified copy and \$13 for additional copies ordered at the same time.

State Expenditures

The bill increases expenditures from the Vital Statistics Record Cash Fund by \$67,510 in FY 2023-24 and by \$72,182 in FY 2024-25. Expenditures are detailed in Table 2 and discussed below.

Table 2
State Expenditures Under SB 23-020

	FY 2023-24	FY 2024-25
Colorado Department of Public Health & Environment		
Personal Services	\$45,581	\$54,697
Capital Outlay	\$1,080	\$1,350
Operating Costs	\$7,770	-
Centrally Appropriated Costs ¹	\$13,079	\$16,135
Total	\$67,510	\$72,182
Total FTE	0.8 FTE	1.0 FTE

¹ Centrally appropriated costs are not included in the bill's appropriation.

Department of Health and Environment. The CDPHE will require a dedicated staff to issue death certificates within the bill's timeframe.

- **Assumptions.** The CDPHE receives an average of 8,775 requests for death certificates per year. Each request takes approximately 13 minutes to process. The department does not currently have a dedicated staff person to fill requests for death certificates; rather, these requests are placed in the queue of other record requests received by the Office of the State Registrar of Vital Statistics. The fiscal note assumes that to meet the bill's timeframes, the department requires a dedicated staff person to fill these requests.
- **Staff.** The CDPHE requires 1.0 FTE Technician III to process death certificates within the bill's time frames. Costs include standard operating and capital outlay costs, as well as costs for equipment used by vital records staff. First-year costs are prorated for a September 1 start date. Additionally, workload will increase for the CDPHE to require physicians not currently participating in electronic data entry to participate in order to meet the bill's deadlines.
- **Centrally appropriated costs.** Pursuant to a Joint Budget Committee policy, certain costs associated with this bill are addressed through the annual budget process and centrally appropriated in the Long Bill or supplemental appropriations bills, rather than in this bill. These costs, which include employee insurance and supplemental employee retirement payments, are shown in Table 2.

Local Government

County coroners and county vital records office staff will have increased workloads to meet the bill's requirements. Because county vital records office staff are deputies of CDPHE program, the fiscal note assumes that the bill will impact 60 county offices in the same way it affects the CDPHE. These local impacts have not been estimated; the fiscal note will be revised if additional information becomes available on local costs.

Effective Date

The bill takes effect 90 days following adjournment of the General Assembly sine die, assuming no referendum petition is filed.

State Appropriations

For FY 2023-24, the bill requires a General Fund appropriation of \$54,431 to the Colorado Department of Public Health and Environment, and 0.8 FTE.

Departmental Difference

The CDPHE assumes costs of about \$145,000 and 1.8 FTE in FY 2023-24 and \$170,000 and 2.3 FTE in FY 2024-25 paid from the General Fund. Staff include an additional Technician III to accommodate a manual data entry process that is estimated to occur for at least affected 9,000 records per year, and 0.3 Technician IV to provide supervision. The fiscal note differs from these costs in three ways. First, it assumes costs will be cash-funded. Second, it assumes the least cost method to implement the bill is to require physicians to use electronic data entry. Finally, supervisory staff is not included, as it is assumed an additional 1.0 FTE can be managed within the structure of the existing unit.

State and Local Government Contacts

County Coroners
Public Health

Information Technology

Law