



**Colorado  
Legislative  
Council  
Staff**

**HB16-1218**

**FINAL  
FISCAL NOTE**

**FISCAL IMPACT:**  State  Local  Statutory Public Entity  Conditional  No Fiscal Impact

**Drafting Number:** LLS 16-0233  
**Prime Sponsor(s):** Rep. Saine  
Sen. Neville T.

**Date:** August 4, 2016  
**Bill Status:** Postponed Indefinitely  
**Fiscal Analyst:** Bill Zepernick (303-866-4777)

**BILL TOPIC:** A WOMAN'S RIGHT TO ACCURATE HEALTH CARE INFO

Fiscal Impact Summary*	FY 2016-17	FY 2017-18
<b>State Revenue</b>	<u>&lt;\$5,000</u>	<u>&lt;\$5,000</u>
Cash Funds	<5,000	<5,000
<b>State Expenditures</b>	Workload increase. See State Expenditures section.	
<b>TABOR Impact</b>	\$0	<\$5,000
<b>Appropriation Required:</b> None.		
<b>Future Year Impacts:</b> Ongoing potential increase in state revenue and expenditures.		

**NOTE: This bill was not enacted into law; therefore, the impacts identified in this analysis do not take effect.**

**Summary of Legislation**

The bill creates the Women's Reproductive Information Guarantee for Health and Transparency Act (act), specifying terms related to abortions performed in Colorado. Under the bill, an abortion may not be performed or induced without the voluntary and informed consent of a patient who will be undergoing the procedure. In order to fulfill the informed consent requirements, a healthcare provider must share the following information with the patient at least 24 hours before an abortion is performed:

- the name of the physician who will perform the abortion;
- a thorough and accurate description of the proposed method for performing the abortion, including information on the probable gestational age and anatomical and physiological characteristics of the fetus;
- a description of immediate and long-term physical and psychological risks involved in the abortion procedure;
- a description of alternatives to abortion;
- a description of medical assistance benefits that may be available for prenatal care, childbirth, and neonatal care, in addition to information on the liability of the father for child support; and
- any other medical or other information that a reasonable patient would consider important for making a decision.

Additionally, the act requires that at least 24 hours prior to an abortion the healthcare provider give the patient the opportunity to receive a current picture of the ultrasound portraying the entire body of the unborn child. If a healthcare provider refuses to comply with the ultrasound provision, they must give the woman a list of providers within a ten-mile radius who will provide a free ultrasound and comply with the provisions. Further, the healthcare provider must post a notice stating that the facility does not provide ultrasounds and is not a medical facility. In regards to an ultrasound, the healthcare provider must provide:

- an oral description of all relevant features of the ultrasound, with audible heartbeat, if present;
- a written and oral description of whether or not the pregnancy is viable;
- a list of all known ultrasound providers within a ten-mile radius of the abortion provider, in order to allow a patient to seek a second opinion;
- a description of the probable gestational age of the unborn child;
- a description of the development of the unborn child's nerve endings and the unborn child's ability to feel pain at each stage of development; and
- a statement that the patient may withdraw consent to the abortion at any time.

Any person who recklessly violates any provision of the act commits an unclassified misdemeanor and is subject to a fine of up to \$1,000 per violation. A person who suffers a loss or injury as a result of any violation of the act may bring a cause of action against the healthcare provider.

## **Comparable Crime**

State law requires Legislative Council Staff to include certain information in the fiscal note for any bill that creates a new crime, changes the classification of an existing crime, or changes an element of the existing crime that creates a new factual basis for the offense. The behavior required under HB 16-1218 is not currently required of healthcare providers. For this reason, no information about the likely offenders or victims is available. Due to the professional nature of providers performing abortion services, the fiscal note assumes a high rate of compliance with the provisions of this bill.

## **State Revenue**

Beginning in FY 2016-17, this bill is anticipated to increase state revenue by less than \$5,000 per year to the Fines Collection Cash Fund in the Judicial Department. The fine penalty for this unclassified misdemeanor may not exceed \$1,000 per violation. Because the courts may impose a fine up to this maximum amount, the precise impact to state revenue cannot be determined. However, based on the likelihood of high compliance among healthcare providers, the fiscal note assumes that any revenue generated is likely to be less than \$5,000.

## **TABOR Impact**

The bill may increase state cash fund revenue from fines, which may increase the amount required to be refunded under TABOR beginning in FY 2017-18. TABOR refunds are paid from the General Fund. No TABOR refund is projected for FY 2016-17.

**State Expenditures**

The bill affects workload and costs in some state agencies, as discussed below.

**Judicial Department.** The bill may increase workload in the trial courts by a minimal amount. The bill may result in additional criminal filings for healthcare providers acting in violation of the bill. The bill also creates a new civil cause of action against healthcare providers that may result in additional civil filings. However, the fiscal note assumes a high level of compliance among healthcare providers and that no new appropriations are required.

**Office of the State Public Defender and the Office of Alternate Defense Counsel.** The bill may increase workload or costs for the Office of the State Public Defender and Office of Alternate Defense Counsel, to provide representation for any persons deemed to be indigent. The fiscal note assumes any such increases are minimal and will not require an increase in appropriations for either agency.

**Department of Regulatory Agencies.** The bill may increase workload in the Division of Professions and Occupations to investigate and adjudicate complaints of unprofessional conduct concerning healthcare providers who do not comply with the provisions of the bill. Given the assumed high rate of compliance, any impact to DORA is assumed to be minimal and no change in appropriations is required.

**Local Government Impact**

Beginning in FY 2016-17, the bill may increase workload in local governments by a minimal amount.

**Misdemeanor offenses in county courts.** First, the bill may increase workload for district attorneys to prosecute any new offenses by healthcare providers who do not comply with the requirements of the bill. It is assumed that the impact of this bill will be minimal.

**Denver County Court.** The bill results in an increase in workload for the Denver County Court, managed and funded by the City and County of Denver. The court will try misdemeanor cases under the bill where a healthcare provider failed to fulfill the informed consent requirements of the bill in that jurisdiction.

**Effective Date**

The bill was postponed indefinitely by the House State, Veterans, and Military Affairs Committee on April 21, 2016.

**State and Local Government Contacts**

Corrections	Counties	Health Care Policy and Financing
Higher Education	Human Services	Information Technology
Judicial	Law	Public Health and Environment
Public Safety	Regulatory Agencies	Sheriffs