

Legislative Council Staff

Nonpartisan Services for Colorado's Legislature

Revised Fiscal Note

(replaces fiscal note dated February 23, 2024)

Drafting Number: Prime Sponsors:	LLS 24-0599 Sen. Ginal Rep. Brown	Date: Bill Status: Fiscal Analyst:	March 20, 2024 House Health & Human Services Kristine McLaughlin 303-866-4776 kristine.mclaughlin@coleg.gov
Bill Topic:	MEDICAL AID-IN-DYING		
Summary of Fiscal Impact:	5 1	5	□ Local Government □ Statutory Public Entity edical aid-in-dying. The bill increases
Appropriation Summary:	state workload and potentially expenditures on an ongoing basis. No appropriation is required.		
Fiscal Note Status:	The revised fiscal note reflects the reengrossed bill.		

Summary of Legislation

Under current law, a mentally competent, terminally ill patient who resides in Colorado with a prognosis of less than 6 months may receive medical aid-in-dying by following a qualifying procedure. Current law also prohibits the patient's life, health, or accident insurance rates and benefits from depending on the decision to request medical aid-in-dying, and allows providers and health care facilities to refuse to participate.

The bill changes current law by:

- allowing advance practice nurses the same prescribing authority as physicians; and
- reducing the waiting period between oral requests from 15 days to 7 days, and eliminating the waiting period if the prognosis is less than 48 hours.

Additionally, the bill:

- prohibits using parenteral injection or infusion for self-administered aid-in-dying medication;
- places disclosure requirements on providers and facilities that refuse to participate;
- prohibits facilities from prohibiting providers from providing select information to patients;
- states that medical aid-in-dying must not prevent the state from receiving federal funds; and
- codifies certain health and life insurance requirements, and prohibits health insurance carriers from attempting to coerce a request for medical aid-in-dying.

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State Expenditures

Workload will minimally increase in the Department of Public Health and Environment (CDPHE) and the Department of Regulatory Agencies (DORA) to promulgate rules, conduct outreach, and respond to complaints and questions. Workload in the Department of Law (DOL) may increase to an indeterminate extent. Federal funds received by the state are assumed to be unaffected. These impacts are discussed below.

Department of Public Health and Environment. Workload will minimally increase for the Board of Health under CDPHE to promulgate rules around the changes and in the Vital Statistics Unit to make any updates to how death statistics are collected.

Department of Regulatory Agencies. Workload will minimally increase for DORA to conduct outreach regarding the new insurance requirements. Workload may be further impacted to the extent that the bill results in fewer or additional complaints being filed.

Department of Law. The CDPHE or DORA may require additional legal services from the DOL. The fiscal note assumes that this can be accomplished within existing legal services hours initially and additional funding may be provided as needed through the annual budget process.

Other state agencies. The bill includes a severability clause to ensure provisions of the bill do not take effect if they will prevent the state from receiving federal funds. Therefore, the bill is not expected to impact federal funding received by any state agency.

Effective Date

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

State and Local Government Contacts

District Attorneys

Information Technology

Public Health and Environment

Corrections Human Services Law Sheriffs Health Care Policy and Financing Judicial Regulatory Agencies

The revenue and expenditure impacts in this fiscal note represent changes from current law under the bill for each fiscal year. For additional information about fiscal notes, please visit the <u>General Assembly website</u>.