# **Department of Fiscal Services**

Maryland General Assembly

#### **FISCAL NOTE**

Senate Bill 696 (Senator Haines, et al.) Judicial Proceedings

### Women's Right To Know Act

This bill requires a physician to obtain informed and voluntary consent from a woman upon whom an abortion is to be performed, except in the case of a medical emergency. The Department of Health and Mental Hygiene (DHMH) is required to publish and make available upon request printed materials containing information describing the unborn child and listing agencies offering an alternative to abortion. A physician who is to perform an abortion must inform the woman that a free copy of the printed materials is available. A physician who performs an abortion without first obtaining informed consent is subject to disciplinary action and guilty of a misdemeanor and on conviction is subject to a fine of not more than \$500.

## **Fiscal Summary**

**State Effect:** General fund expenditures could increase by at least \$19,700 in FY 1997, with potential indeterminate increased expenditures in the Medicaid and public assistance programs. Future year expenditures increase with annualization and inflation. Potential minimal increase in general fund revenues due to the bill's penalty and disciplinary provisions.

(in dollars)	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001
GF Revenues					
GF Expenditures	19,700	26,800	27,300	27,900	28,400
Net Effect	(\$19,700)	(\$26,800)	(\$27,300)	(\$27,900)	(\$28,400)

Note: ( ) - decrease; GF - general funds; FF - federal funds; SF - special funds

**Local Effect:** Local health department expenditures and revenues could increase by an indeterminate amount.

#### **Fiscal Analysis**

**State Revenues:** General fund revenues could increase by an indeterminate amount, depending on (1) the magnitude of any disciplinary penalties imposed by the Board of Physician Quality Assurance; and (2) the number of convictions and fines imposed for those cases heard in the District Court under the bill's monetary penalty provision. Any such increase is assumed to be minimal.

**State Expenditures:** General fund expenditures in DHMH could increase by at least an estimated \$26,250 in fiscal 1997 for the cost of printing the materials required by the bill. This estimate reflects the bill's effective date of October 1, 1996 and assumes that (1) 36,000 women in Maryland each year become pregnant unintentionally; (2) 16,500 abortions are performed annually; (3) half of the 19,500 women, or an additional 9,750 women, who unintentionally become pregnant but don't get abortions consider it as an option and consult a physician each year; (4) DHMH must make printed materials available to the 16,500 women who have abortions and the 9,750 who consider abortions, for a total of 26,250; and (5) printing costs are at least \$1 per piece of printed material. DHMH advises that printing costs could range from \$1-\$3 per piece of printed material, depending on whether drawings or photographs are used to describe the unborn child.

Medicaid expenditures for prenatal care, childbirth, neonatal care, and child health care services and public assistance (Aid to Families with Dependent Children) could potentially increase under the bill's requirements that (1) a physician who is to perform an abortion must inform the pregnant woman that Medicaid assistance may be available; and (2) the DHMH printed material must contain information on Medicaid assistance. It is not possible at this time to reliably estimate the number of women and children who may become eligible for public assistance as a result of not having an abortion because of DHMH's materials.

**Local Effect:** Local expenditures could increase to the extent that women who might otherwise have had an abortion use health services provided by local health departments. Local revenues from local health department collections could increase by an indeterminate amount, since local health departments charge sliding scale fees based on client income. It is not possible at this time to reliably estimate the number of women and children for whom these conditions apply.

**Information Source(s):** Department of Health and Mental Hygiene (Local and Family Health Administration), Department of Fiscal Services

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