

Department of Legislative Services
Maryland General Assembly
2000 Session

FISCAL NOTE

House Bill 891 (Delegate O'Donnell)

Environmental Matters

Parental Rights Act of 2000

This bill restricts the age, to those over the age of 15 years, at which a minor can be granted the same capacity as an adult to consent to medical treatment if the life or health of the minor would be adversely affected by delaying treatment to obtain the consent of the parent, guardian, or custodian of the minor. The bill similarly restricts the age at which a minor has the same capacity as an adult to consent to various medical treatments and advice, and physical examinations. It also repeals the provision that, without the consent of the minor, a physician is prohibited from giving a parent or guardian information about an abortion.

Fiscal Summary

State Effect: Because it is assumed that this bill would affect a limited number of cases, the impact is considered to be minimal and would not directly affect governmental finances.

Local Effect: Minimal secondary impacts from a limited number of cases could affect local expenditures.

Small Business Effect: None.

Analysis

Current Law: A minor is any person under the age of 18. A minor has the same capacity as an adult to consent to medical treatment if the life or health of the minor would be adversely affected by delaying treatment to obtain the consent of another individual. A minor also has the same capacity as an adult to consent to treatment for, or advice about drug abuse, alcoholism, venereal disease, pregnancy, and contraception other than sterilization. Additionally, a minor has the same capacity as an adult to consent to a (1) physical examination and treatment of injuries from an alleged rape or sexual offense; (2) physical examination to obtain evidence of an alleged rape or sexual offense; and (3) initial medical screening and physical examination on and after admission of the minor into a

detention center. A physician may also give information regarding the treatment needed by the minor without the consent of, or over the express objection of a minor, to the parent, guardian, custodian of the minor, or spouse of the parent, except information about an abortion.

State Expenditures: General fund expenditures could decrease to the extent that the bill's provisions result in fewer minors receiving information or prevention services. Any such decrease is assumed to be minimal. However, expenditures for Medicaid and/or public assistance could increase to the extent that restriction of adolescents' access to counseling and treatment for preventable conditions results in unplanned pregnancies, lack of prenatal care, or sexually transmitted diseases.

Local Expenditures: Expenditures in local health departments could decrease to the extent that the bill's provisions result in fewer minors receiving prevention information or services. Any such decrease is assumed to be minimal. However, public health care expenditures could increase to the extent that restriction of adolescents' access to counseling and treatment for preventable conditions results in unplanned pregnancies, lack of prenatal care, or sexually transmitted diseases.

Additional Information

Prior Introductions: Substantially similar bills were introduced in the 1997 (HB 1081), 1998 (HB 560), and 1999 (HB 94) sessions. Each bill received an unfavorable report from the House Environmental Matters Committee.

Cross File: None.

Information Source(s): Health Claims Arbitration Office, Department of Human Resources, Department of Legislative Services

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