

## Department of Planning and Budget

### 2020 Fiscal Impact Statement

**1. Bill Number:** SB733ES1

<b>House of Origin</b>	<input type="checkbox"/> Introduced	<input type="checkbox"/> Substitute	<input checked="" type="checkbox"/> Engrossed
<b>Second House</b>	<input type="checkbox"/> In Committee	<input type="checkbox"/> Substitute	<input type="checkbox"/> Enrolled

**2. Patron:** McClellan

**3. Committee:** Education and Health

**4. Title:** Provision of abortion; informed consent; regulations.

**5. Summary:** Eliminates the procedures and processes, including the performance of an ultrasound, the provision of specified information, and the offer to review certain printed materials, required under existing law to effect a pregnant person's informed written consent prior to the performance of an abortion; however, the bill retains the requirement that a physician obtain a pregnant person's informed written consent prior to performing any abortion. The bill expands who can perform first trimester abortions to any person licensed by the Board of Medicine as a physician's assistant and acting within such person's scope of practice or any person jointly licensed by the Board of Medicine and Nursing as a nurse practitioner acting within the nurse practitioner's such person's scope of practice. The bill removes a provision classifying facilities that perform five or more first trimester abortions per month as hospitals for the purpose of complying with regulations establishing minimum standards for hospitals.

**6. Budget Amendment Necessary:** No.

**7. Fiscal Impact Estimates:** Minimal, see item #8.

**8. Fiscal Implications:** This bill, as amended, would have a revenue impact on the Commonwealth. The bill removes language classifying facilities that perform five or more first-trimester abortions per month as hospitals for the purpose of complying with regulations establishing minimum standards for hospitals. First trimester abortion facilities, classified as hospitals, currently have biennial inspection requirements with an annual licensing fee, which is deposited to fund 02601. The removal of this requirement creates a revenue loss of a \$75 licensure fee for each facility. Currently, 14 facilities pay this fee, which results in a total revenue loss of \$1,050 each year. It is assumed that the agency can absorb any reduction in licensing fee revenue. The workload attributed to these inspections is estimated to be half a position, however, there are additional licensure procedures for which this position can be repurposed. Therefore, this bill would not affect expenditures, as this work will be replaced by other licensure inspections.

**9. Specific Agency or Political Subdivisions Affected:** Department of Health.

**10. Technical Amendment Necessary:** No.

**11. Other Comments:** None.