

**LEGISLATIVE BUDGET BOARD**  
**Austin, Texas**

**FISCAL NOTE, 80TH LEGISLATIVE REGULAR SESSION**

**May 6, 2007**

**TO:** Honorable Jane Nelson, Chair, Senate Committee on Health & Human Services

**FROM:** John S. O'Brien, Director, Legislative Budget Board

**IN RE: SB439** by Deuell (Relating to advance directives and health care and treatment decisions.),  
**Committee Report 1st House, Substituted**

<p><b>No significant fiscal implication to the State is anticipated.</b></p>
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The Health and Human Services Commission (HHSC) indicates there could be costs to the Medicaid program related to amending the definition of "qualified patients" to include preterminal patients and to increasing the number of days from 10 to 21 that providers are required to provide life-sustaining treatment. However, HHSC indicates the costs would not be significant, given the small number of patients anticipated to be impacted.

The bill would require a facility in which one or more meetings of an ethics or medical committee is held to file a report with the Department of State Health Services (DSHS) at the time a license renewal application is submitted. It is assumed there would not be a significant fiscal impact to DSHS related to this reporting requirement.

The bill would authorize surrogates to seek court orders for life-sustaining treatment and would provide for appeals. The bill would prohibit filing fees or court costs from being assessed for these proceedings. It is assumed there would not be a significant fiscal impact to the state for these proceedings.

**Local Government Impact**

No significant fiscal implication to units of local government is anticipated.

**Source Agencies:** 212 Office of Court Administration, Texas Judicial Council, 503 Texas Medical Board, 529 Health and Human Services Commission, 537 State Health Services, Department of, 507 Board of Nurse Examiners

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