

FISCAL IMPACT OF PROPOSED LEGISLATION

Measure: SB 172

Seventy-Seventh Oregon Legislative Assembly – 2013 Regular Session
Legislative Fiscal Office

*Only Impacts on Original or Engrossed
Versions are Considered Official*

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Measure Description:

Directs Oregon Health Authority to adopt rules requiring all infants born at birthing facilities located in this state to be screened for congenital heart defects.

Government Unit(s) Affected:

Oregon Health Authority (OHA)

Local Government Mandate:

This bill does not affect local governments' service levels or shared revenues sufficient to trigger Section 15, Article XI of the Oregon Constitution.

Analysis:

SB 172 requires the Oregon Health Authority (OHA) to adopt rules (by January 1, 2014) requiring birthing facilities in Oregon to perform a pulse oximetry screening on each newborn delivered at the birthing facility before discharging the newborn. The bill contains an emergency clause and takes effect on passage.

The fiscal impact of drafting administrative rules, conducting rulemaking hearings and adopting final rules is minimal. OHA will use existing staff to work with the Department of Justice and health systems partners to carry out these provisions.

OHA notes that the bill has an indeterminate impact on the Oregon Health Plan and the Public Health program:

If all mandated facilities fully complied with the rules, all infants born in Oregon birthing facilities would be screened for Critical Congenital Heart Disease (CCHDs) by pulse oximetry screening before discharge. This includes any Oregon Health Plan clients who are born in Oregon birthing facilities. Increased screening may result in early identification of more cases of CCHD, some of whom might then be referred to Babies First! or CACOON (CAre COOrdination) home visiting programs.

The bill is silent regarding the tracking of screening outcomes and mechanisms for follow-up on positive screens. In addition, the bill is silent on the implementation or enforcement of the rules once adopted. Therefore the impact on the Center for Prevention and Health Promotion Programs and the function of health care regulation programs of OHA are unknown.