

**LEGISLATIVE SERVICES AGENCY
OFFICE OF FISCAL AND MANAGEMENT ANALYSIS
FISCAL IMPACT STATEMENT**

LS 7220
BILL NUMBER: HB 1339

NOTE PREPARED: Jan 7, 2025
BILL AMENDED:

SUBJECT: Hysterectomy and Oophorectomy Informed Consent.

FIRST AUTHOR: Rep. Borders
FIRST SPONSOR:

BILL STATUS: As Introduced

FUNDS AFFECTED: X GENERAL
DEDICATED
FEDERAL

IMPACT: State

Summary of Legislation: The bill requires a physician to provide certain information to a patient and obtain oral and written consent before a hysterectomy or an oophorectomy may be performed. The bill allows for an exception in an emergency. The bill allows for the modification of an informed consent form by the patient and specifies requirements for the modification.

Effective Date: July 1, 2025.

Explanation of State Expenditures: Noncompliance with the bill's requirement to obtain consent would be subject to administrative orders and procedures by the Medical Licensing Board (MLB). The nature of the noncompliance and the corrective actions taken would determine any increase in Professional Licensing Agency (PLA) staff workload to staff MLB hearings. Additionally, the PLA would likely need to notify license holders and possibly update the Agency's website of the bill's requirements. These are within the PLA's routine administrative functions and should be able to be implemented with no additional appropriations.

Explanation of State Revenues: The MLB could revoke or suspend a noncompliant physician's license or assess a maximum fine of \$1,000 to be deposited in the state General Fund. A license revocation or suspension would result in a decrease in revenue to the state General Fund in the amount of \$200 biennially. Any impact on state General Fund revenue is expected to be minimal.

Explanation of Local Expenditures:

Explanation of Local Revenues:

State Agencies Affected: Medical Licensing Board, Professional Licensing Agency.

Local Agencies Affected:

Information Sources: IC 25-1-9-9; Legislative Services Agency, *Indiana Handbook of Taxes, Revenues,*

and Appropriations, FY 2024.

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