

## Ohio Legislative Service Commission

Office of Research and Drafting

Legislative Budget
Office

H.B. 229 135<sup>th</sup> General Assembly

## Fiscal Note & Local Impact Statement

Click here for H.B. 229's Bill Analysis

Version: As Introduced

**Primary Sponsors:** Reps. Sweeney and Patton

Local Impact Statement Procedure Required: No

Jacquelyn Schroeder, Senior Budget Analyst

## **Highlights**

- The Ohio Department of Health (ODH) will experience costs to develop sudden unexpected death in epilepsy (SUDEP) information sheets, provide guidance to health care practitioners in determining whether a patient is at elevated risk for SUDEP, and to issue warnings for violations. Costs will depend on a number of factors including the number of practitioners seeking guidance and the type of guidance provided, as well as the number of violations.
- The State Medical Board and the Board of Nursing could experience investigation and disciplinary costs, depending on the number of repeated violations of the bill's provisions or cases of willful or wanton misconduct.
- Government-owned hospitals may realize minimal costs to ensure that specified health care practitioners are providing the information to patients.

## **Detailed Analysis**

The bill requires any health care practitioner who has the primary responsibility for the treatment or care, other than during an emergency situation, of a patient who has been diagnosed with epilepsy to provide the patient with written information regarding (1) current, evidence-based information about sudden unexpected death in epilepsy (SUDEP) risk factors and conditions, as provided by the Ohio Department of Health (ODH) and (2) contact information for nonprofit organizations that provide information and support services for epilepsy conditions. The bill requires ODH to provide health care practitioners the written information and to post the information on ODH's website. The bill requires the information to be reviewed and approved by one or more professional nonprofit organizations with expertise in neurology and epilepsy, and also requires ODH to ensure that the information is culturally and linguistically appropriate

for all recipients. Additionally, the bill requires ODH, in consultation with local and national organizations that provide education or services related to epilepsy conditions, to provide guidance to health care practitioners to assist them in determining whether a patient is at an elevated risk for SUDEP. The Director of ODH is required to issue a warning to a health care practitioner in the case of an initial violation of the bill. In the case of willful or wanton misconduct, or for subsequent violations, the practitioner may be subject to professional disciplinary action by the practitioner's licensing board.

ODH may experience a minimal increase in costs to develop the information sheet and make the information publicly available on ODH's website and to practitioners. Additionally, ODH may experience costs to assist health care practitioners in determining whether a patient is at risk for SUDEP. These costs will depend on how many practitioners seek guidance from ODH regarding their patients and what the guidance provided by ODH actually entails. ODH may also experience costs to ensure compliance with the bill's provisions and to issue warnings for any violations. The impact will depend on how ODH determines compliance (e.g., will ODH perform any record verification to ensure that information has been provided, etc.) and the number of violations. The State Medical Board and the Board of Nursing regulate health care practitioners impacted by the bill, including physicians, physician assistants, and specified advanced practice registered nurses. The boards could experience investigation and disciplinary costs, depending on the number of repeated violations or cases of willful or wanton misconduct. Lastly, government-owned hospitals and other health care facilities may experience minimal costs to ensure patients are receiving the required information.

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