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## FISCAL IMPACT REPORT

SPONSOR Rawson DATE TYPED 2-14-05 HB \_\_\_\_\_

SHORT TITLE Certificates for Certain Fetal Deaths SB 71

ANALYST Collard

### APPROPRIATION

Appropriation Contained		Estimated Additional Impact		Recurring or Non-Rec	Fund Affected
FY05	FY06	FY05	FY06		
			See Narrative		

(Parenthesis ( ) Indicate Expenditure Decreases)

### SOURCES OF INFORMATION

LFC Files

#### Responses Received From

Department of Health (DOH)

State Commission of Public Records

### SUMMARY

#### Synopsis of Bill

Senate Bill 71 amends Section 22-14-22 NMSA 1978 to require registration of a certificate of stillbirth with the Bureau of Vital Records and Health Statistics within DOH or as directed by the registrar (of vital statistics) when a spontaneous fetal death occurs where the fetus weighs 500 grams or more or that occurs after 20 weeks of gestation. Existing language requires that spontaneous fetal death be “reported” to the registrar. It also only addresses weight of the fetus – NOT length of gestation. The bill also adds language in Subsection A requiring the certificate to be completed and registered within 10 days following the spontaneous fetal death – the 10-day requirement is now contained in Subsection F, which is deleted in the amended version. The Bureau of Vital Records and Health Statistics does not currently issue certified copies of Reports of Fetal Deaths, and is prohibited from doing so by regulation. Conforming changes are made through the remainder of the section and current Subsection C is split into two separate subsections for what appears to be clarification.

The bill also amends Section 24-14-29 NMSA 1978 to include a new Subsection C providing for a \$5 fee for each search of a vital record to produce a certified copy of stillbirth. The fees are to be deposited to the general fund.

## **FISCAL IMPLICATIONS**

Although there is no direct appropriation contained in this bill, the bill allows for a \$5.00 fee to search for a "Certificate of Stillbirth." DOH indicates the Bureau of Vital Records and Health Statistics receives an average of 87 reports of fetal death per year, totaling \$435 annually to be deposited in the general fund. However, the estimate for the number of requests for certified copies is less than 5 per year.

DOH indicates the bill will result in increased costs to the Bureau of Vital Records and Health Statistics. The Report of Fetal Death would need to be reprinted with the title "Certificate of Stillbirth." This form would need to be distributed to approximately 35 hospitals around the state, as well as physicians, the Office of the Medical Investigator, and midwives. Additionally, since there is no current issuance of certified copies of fetal death, secure safety paper would need to be provided. Searches for birth and death certificates are conducted electronically and certified copies of birth certificates are printed from the computer system. There is no such system for fetal deaths. Computer systems for fetal death would need to be developed. DOH estimates the cost of this development at \$25 thousand.

## **ADMINISTRATIVE IMPLICATIONS**

DOH specifies implementation of this bill would require a change for reporting, therefore, individuals who complete the report would need training. Because the current fetal death report is only used for statistical reporting and research, and is not issued, procedures for verifying items on the form, and correcting the form would need to be developed. Bureau of Vital Records and Health Statistics regulations prohibit issuance of fetal death reports and allow for disposition of Reports of Fetal Death when statistical processing is complete. For issuance of Certificates of Stillbirth, the state registrar would need to revise the regulations. Procedures for long-term filing of the Certificates of Stillbirth would need to be developed. However, DOH does not see the need for an increase in program staff to implement these changes. The additional workload could be incorporated into existing activities. Changes to the electronic system would be necessary for issuance of the certificate, and would require information technology staff.

## **OTHER SUBSTANTIVE ISSUES**

DOH notes the bill amends the Vital Statistics Act to change "Report of Fetal Death" to "Certificate of Stillbirth." A spontaneous fetal death is defined as a death prior to the complete expulsion or extraction from its mother of a product of human conception resulting in other than a live birth and which is not an induced abortion. While often termed a stillbirth, fetal death is the term used by statistical health agencies, including the United States Centers for Disease Control (CDC) and the World Health Organization. Changing the title of the form may create confusion for individuals who are completing the form, as well as individuals and agencies who refer to fetal death statistics. There are relatively few fetal deaths that occur in New Mexico (an average of 87 per year). To change the title of the form, new forms would have to be printed and distributed around the state.

Additionally, the bill amends the Vital Statistics Act to require reporting of fetal deaths for fetuses weighing 500 or more grams or that occurs after 20 complete weeks of gestation. Currently, fetal deaths are reported if the fetus weighs 500 or more grams. Prior to 1980, New Mex-

ico statute required reporting of fetal deaths of 20 or more weeks of gestation. The statute was revised in 1980 to the weight requirement so that New Mexico would be consistent with the National Center for Health Statistics (now part of the CDC). Additionally, weight can be reliably ascertained while gestation in weeks is not as reliable.

### **ALTERNATIVES**

DOH indicates changes to implement the bill could become costly and the search fee revenues would not offset the extra costs. Given there are relatively few fetal deaths per year and very few parents who request certified copies, another option would be to have the Bureau of Vital Records and Health Statistics issue a copy of the Report of Fetal Death to parents upon request, if available. However, Bureau of Vital Records and Health Statistics regulations would need to be revised to allow issuance. If the bill is enacted, it could be amended to assure conformity to national definitions of and for fetal death certificates instead of stillbirth could be provided.

KBC/yr