



# HOUSE COMMITTEE ON APPROPRIATIONS

## FISCAL NOTE

HOUSE BILL NO. 507

PRINTER'S NO. 2289

PRIME SPONSOR: Fielder

### COST / (SAVINGS)

FUND	FY 2023/24	FY 2024/25
General Fund	\$0	\$0

#### SUMMARY:

House Bill 507, Printer's Number 2289 requires health care providers to obtain specific informed consent from the patient before performing certain procedures.

#### ANALYSIS:

The bill amends Act 13 of 2002, known as the Medical Care Availability and Reduction of Error (Mcare) Act, to add Section 504.1 concerning informed consent for pelvic, rectal, and prostate examinations. Health care providers, when involved in professional instruction or clinical training, must obtain specific informed consent (both verbal and written), before performing a pelvic examination, a rectal examination, or a prostate examination while the patient is anesthetized or unconscious in a facility that provides health care services.

Exceptions apply if the exam is within the scope of care ordered for the patient, or in an emergency.

A health care provider shall be liable for violations of the new section. If a student overseen by a health care provider in a training program violates the specific informed consent provisions, the supervisory health care provider shall be liable under the informed consent liability provisions of this section. The university, educational institution, or other corporate entity that hosts the clinical training programs shall be liable for a \$1,000 penalty for each violation, and a patient may be able to recover other damages from the university, educational institution, or other corporate entity.

A health care provider can delegate the task of obtaining specific informed consent in this section to a qualified medical practitioner but cannot delegate it to a student.

The bill takes effect in 60 days.

#### FISCAL IMPACT:

This legislation would have no fiscal impact to the commonwealth. Liability for violations of the act would fall on the qualified practitioner or the educational institution.

In cases where the commonwealth provides medical care to patients under its care, such as state correctional institutions, veterans homes, or DHS facilities, the procedures involving anesthesia that require specific informed consent are not likely to occur in those facilities and instead would be performed at a separate medical facility. Practitioners who are employees of the commonwealth are unlikely to be in situations covered by this legislation.

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**DATE:** November 15, 2023

*Estimates are calculated using the best information available. Actual costs and revenue impact incurred may vary from estimates.*