FISCAL NOTE

| STATE OF ALASKA 2012 LEGISLATIVE SESSION | | | | | Bill Version Fiscal Note Number () Publish Date | | SB202 | | |
|--|---|------------------------------------|--|---------------------------|--|------|--------------------|------|--|
| Identifier (file name) SB202-DHSS-EP-3-2-12 Title Resuscitation Protocol Documents | | | al Doguments | | Dept. Affected Health and Social Services Appropriation Public Health | | ervices | | |
| Resuscitation Protocol Documents | | | | | Allocation | | Emergency Programs | | |
| Sponsor Senator Egan | | | | | | | | | |
| Requester Senate HSS Committee | | | | OMB Component Number 2877 | | | | | |
| Expenditures/Re | evenues | | | (Thou | usands of Dolla | ars) | | | |
| Note: Amounts do | | unless otherwise | noted below. | (1110 | | | | | |
| | | FY13 Appropriation Requested | Included in Governor's FY13 Request | | Out-Year Cost Estimates | | | | |
| OPERATING EXP | ENDITURES | FY13 | FY13 | FY14 | FY15 | FY16 | FY17 | FY18 | |
| Personal Services Travel Services Commodities Capital Outlay Grants, Benefits Miscellaneous | | | | | | | | | |
| | PERATING | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| FUND SOURCE | | | | | usands of Dollar | | | | |
| 1002 Federal Re 1003 GF Match 1004 GF 1005 GF/Prgm (1037 GF/MH (U0 | DGF) | | | (| | | | | |
| 1178 temp code | | | | | | | | | |
| ТО | TAL | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | |
| POSITIONS | | | | | | | | | |
| Full-time | | | | | | | | | |
| Part-time | | | | | | | | | |
| Temporary | | | | | | | | | |
| CHANGE IN REVENUES | | | | | | | | | |
| Estimated SUPPLEMENTAL (FY12) operating cost: (discuss reasons and fund source(s) in analysis section (Estimated CAPITAL (FY13) costs (discuss reasons and fund source(s) in analysis section (Estimated CAPITAL (FY13) costs (discuss reasons and fund source(s) in analysis section (Estimated CAPITAL (FY13) costs (discuss reasons and fund source(s) in analysis section (Estimated CAPITAL (FY13) costs (discuss reasons and fund source(s) in analysis section (Estimated CAPITAL (FY13) costs (discuss reasons and fund source(s) in analysis section (Estimated CAPITAL (FY13) costs (discuss reasons and fund source(s) in analysis section (Estimated CAPITAL (FY13) costs (discuss reasons and fund source(s) in analysis section (Estimated CAPITAL (FY13) costs (discuss reasons and fund source(s) in analysis section (Estimated CAPITAL (FY13) costs (discuss reasons and fund source(s) in analysis section (Estimated CAPITAL (FY13) costs (discuss reasons and fund source(s) in analysis section (Estimated CAPITAL (FY13) costs (Estimated CAPITAL (Estim | | | | | (separate supplemental appropriation required, (separate capital appropriation required, | | | | |
| Why this fiscal no Not applicable. Initi | | evious version (if | initial version | , please no | te as such) | | | | |
| Prepared by | | t, M.D., MPH / Ch | ief Medical Offi | cer-Director | | | 269-6680 | | |
| Division | Public Health Date/Time 3/2/12 4:00 PM | | | | | | | | |
| Approved by | Nancy Rolfzen, Assistant Commissioner Date 3/2/2012 DHSS Finance & Management Services | | | | | | | | |

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FISCAL NOTE

STATE OF ALASKA 2012 LEGISLATIVE SESSION

BILL NO. SB202

Analysis

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| The bill amends AS 47.05.012 by adding resuscitation protocols to the list of materials that may be incorporated by reference in regulations. This will allow Emergency Medical Services (EMS) instructors to teach the most appropriate cardiopulmonary resuscitation techniques without the delay in adopting new statutory changes when new standards are published. The state EMS office has to choose between teaching and testing EMTs on current best practices or according to current state regulations which reference outdated and incorrect medical standards. |
| There is no fiscal impact to the department. The cost to update training materials to the current ILCOR standards is expected to be minimal and can be absorbed with existing resources. |
| The International Liaison Committee on Resuscitation (ILCOR) is an international consensus group of scientists that reviews studies, makes treatment recommendations for resuscitation, and publishes its findings when appropriate, usually every five years. |
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