

TITLE 410 INDIANA STATE DEPARTMENT OF HEALTH

Economic Impact Statement

LSA Document # 11-458

Description of Rule

In 2003, IC 16-41-6, Communicable Disease: Mandatory Testing of Individuals With Communicable or Dangerous Diseases, was enacted by the Indiana General Assembly to require that healthcare providers offer “opt-out” HIV testing to all pregnant patients. This code was revised in July 2011 and is now in compliance with the guidelines recommended by the Centers for Disease Control and Prevention (CDC). This proposed amendment revises language within 410 IAC 1-6 and 410 IAC 1-7 to clarify healthcare provider responsibilities as outlined in the updated IC 16-41-6.

Economic Impact on Small Businesses

1. Estimate of the number of small businesses, classified by industry sector, that will be subject to the proposed rule.

Revising the language of 410 IAC 1-6 and 410 IAC 1-7 will not have an economic impact on small businesses.

2. Estimate of the average annual reporting, record keeping, and other administrative costs that small businesses will incur to comply with the proposed rule.

This proposed amendment will not impose any additional expense to licensed healthcare facilities who already comply with current best practices as described in the revised IC 16-41-6.

3. Estimate of the total annual economic impact that compliance with the proposed rule will have on all small businesses subject to the rule.

Revising the language of 410 IAC 1-6 and 410 IAC 1-7 will not have an economic impact on small businesses.

4. Statement justifying any requirement or cost that is imposed on small businesses by the rule; and not expressly required by the statute authorizing the agency to adopt the rule; or any other state or federal law.

This proposed amendment does not impose any additional requirements or costs on small businesses.

5. Regulatory Flexibility Analysis

Other factors considered:

A. Establishment of less stringent compliance or reporting requirements for small businesses.

The least stringent means have been utilized in this rule. The proposed amendment only provides updated requirements based on best practices. Compliance with the revised language of 410 IAC 1-6 and 410 IAC 1-7 achieves the highest quality of patient care that serves the medical community and the public interest.

B. Establishment of less stringent schedules or deadlines for compliance or reporting requirements for small businesses.

IC 16-41-6 became effective July 1, 2011. The revised language of 410 IAC 1-6 and 410 IAC 1-7 merely clarifies healthcare provider responsibilities as outlined in IC 16-41-6.

C. Consolidation or simplification of compliance or reporting requirements for small businesses.

Compliance activities will not require any additional action by the licensed healthcare provider.

D. Establishment of performance standards for small businesses instead of design or operational standards imposed on other regulated entities by the rule.

Not applicable.

E. Exemption of small businesses from part or all of the requirements or costs imposed by the rule.

The proposed amendment will only apply to licensed healthcare providers. No other small businesses are affected.

Conclusion

Failure to comply with current best practices as described in the revised IC 16-41-6 will increase the likelihood of vertical HIV transmission from mother to child. This proposed amendment will not impose any additional expense to the ISDH, the State of Indiana, local government or licensed healthcare facilities who already comply with current best practices.

Submitted by,

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