

NORTH CAROLINA GENERAL ASSEMBLY

LEGISLATIVE FISCAL NOTE

BILL NUMBER: SB 389 < 1st Edition>
SHORT TITLE: Physician-Assisted Suicide Unlawful
SPONSOR(S): Senators Forrester, Purcell, et al.

FISCAL IMPACT

Yes () No () No Estimate Available (X)

FY 2001-02 FY 2002-03 FY 2003-04 FY 2004-05 FY 2005-06

REVENUES

EXPENDITURES

No estimate available
No significant impact expected

POSITIONS: 0

**PRINCIPAL DEPARTMENT(S) &
PROGRAM(S) AFFECTED:** Judicial Branch, Department of Corrections

EFFECTIVE DATE: Applies to offenses committed on or after December 1, 2001

BILL SUMMARY:

Enacts new GS 14-17.2 making it a Class D felony for a physician, nurse, pharmacist, or other specified licensed health care professional to participate in a medical procedure or willfully prescribe any drug, compound, or substance for the express purpose of assisting a patient to intentionally end the patient's life. It also provides definitions for licensed health care professional and physician-assisted suicide. Additionally, the bill includes exemptions for carrying out the provisions of advanced directives or living wills; withholding or withdrawing life sustaining procedure or compliance with any other State or federal law authorizing withdrawal or refusal of medical treatments or procedures; and administering, prescribing, or dispensing medications or procedures for the purpose of alleviating another person's pain or discomfort, or to a patient diagnosed with a medical condition that includes an element of suicidal ideation.

ASSUMPTIONS AND METHODOLOGY:

Sentencing Commission

Since the proposed bill creates a new offense, the Sentencing Commission does not have any historical data from which to estimate the impact of this bill on the prison population. It is not known how many offenders might be sentenced under this bill. Under Structured Sentencing, with the exception of extraordinary mitigation, all Class D offenders are required to receive an active sentence. The average estimated time served for a Class D offender was 75.7 months in FY 1999/00.

Judicial Branch

Because of the severity of the punishment associated with these charges, AOC would expect trials and guilty pleas to demand significant court time and preparation time. While AOC predicts some impact, they are unable to provide an estimate. Since data are not available on the number of licensed health care professional that might be charged with physician-assisted suicide, or how often the prescribed conduct might occur.

To the extent that the exemptions provided in SB389 cover most of the possible occurrences where such assistance would occur, and that the vast majority of licensed health care professionals that could be charged would comply with the law, AOC does not expect many violations under the bill.

TECHNICAL CONSIDERATIONS: None

FISCAL RESEARCH DIVISION 733-4910

PREPARED BY: Lisa Robinson and Jim Mills

APPROVED BY: James D. Johnson

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