

**Department of Planning and Budget
2026 General Assembly Session
State Fiscal Impact Statement**

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ORIGINAL

Bill Number: HB1398H1

Patron: Franklin

Bill Title: Fetal and Infant Mortality Review Team established; penalty; report

Bill Summary: Establishes the Fetal and Infant Mortality Review Team (FIMRT) to develop and implement procedures to ensure that fetal and infant deaths occurring in the Commonwealth are analyzed in a systematic way. The bill requires the Team to compile triennial statistical data regarding fetal and infant deaths and to make such data available to the Governor, the General Assembly, and the Department of Health. The bill provides that information and records obtained or created by the Team and portions of meetings of the Team at which individual fetal and infant deaths are discussed shall be confidential. The bill also adds a new violation which is punishable as a class 3 misdemeanor.

The bill, as amended in the nature of a substitute, adds a definition for “Infant death” and amends the definition for “Fetal death”.

Budget Amendment Necessary: Yes

Items Impacted: 276

Explanation: VDH will require additional general fund appropriation and up to seven positions to comply with the provisions of this legislation, attributable to Item 276 (Medical Examiner and Anatomical Services).

Fiscal Summary: It is assumed that VDH would require general fund resources, which include seven new positions, to support the establishment and ongoing operation of FIMRT. Added workload would include program administration, data summarization, epidemiological analysis, qualitative interviewing, and service coordination. See the fiscal analysis below for an overview of these costs.

General Fund Expenditure Impact:

<u>Agency</u>	<u>FY2026</u>	<u>FY2027</u>	<u>FY2028</u>	<u>FY2029</u>	<u>FY2030</u>	<u>FY2031</u>
VDH (601)	-	\$803,114	\$803,114	\$803,114	\$803,114	\$803,114

Position Impact:

<u>Agency</u>	<u>FY2026</u>	<u>FY2027</u>	<u>FY2028</u>	<u>FY2029</u>	<u>FY2030</u>	<u>FY2031</u>
VDH (601)	-	7	7	7	7	7

Fiscal Analysis: The provisions of this legislation would have a fiscal impact on VDH, as the agency would be required to establish and support FIMRT. Full surveillance of each fetal and natural infant death requires sufficient staff capacity to validate cases, obtain and review records, summarize relevant information, and enter data into the surveillance system. Beyond the staff required for data collection and surveillance, additional personnel are necessary to facilitate FIMRT activities, conduct data analysis, and oversee the interview process.

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The definition of “fetal death” was amended to mean a fetal death as described in § 32.1-258.1, Code of Virginia, for which the State Registrar is required to issue a Certificate of Birth Resulting in Stillbirth. This would slightly reduce the workload as OCME would be able to utilize those certificates to identify fetal deaths. There are over 300 fetal deaths per year that are subject to this legislation and approximately 300-500 natural infant deaths in the Commonwealth. The total number of cases subject to surveillance and review would require additional staffing resources given the Team’s statutory duties related to case selection, in-depth review, interviews, data analysis, and triennial reporting.

The Office of the Chief Medical Examiner (OCME) has estimated that the FIMRT would require additional resources and staffing for case identification, data collection, analysis, team facilitation, and dissemination of findings. OCME estimates that seven additional positions would be required. These positions along with the estimated salary and fringe benefit costs are as follows:

- One FIMRT project manager (\$148,505 general fund)
 - Responsible for all project oversight which includes surveillance, review team facilitation, record collection, database management, as well as data analysis, reporting, and evaluation.
- One mental health services coordinator (\$52,558 general fund)
 - Provide trauma informed and ongoing training, and act as a resource for interviewees to navigate the system to find services. This position would dedicate 60 percent of their time to this effort.
- Two FIMRT data abstractors (\$105,115 each for a total of \$210,230 general fund)
 - Responsible for abstracting data from all relevant sources related to fetal and infant death and entering the data into the surveillance system.
- Two FIMRT research assistants (\$95,197 each for a total of \$190,394 general fund)
 - Assist with data collection, data entry, data analysis, requesting records, literature review, and other related duties.
- One FIMRT epidemiologist/data coordinator (\$51,318 general fund)
 - Oversee all surveillance efforts and database management. This position would dedicate 50 percent of their time to this effort.

Additional support for the Director of the Division of Death Prevention is necessary to oversee, direct, and support the work of the FIMR staff. The director is currently funded through grants, and 25 percent of their salary would need to be cost allocated for anticipated time spent on FIMRT activities, as grants funds cannot be used for this effort. VDH reports that \$32,972 general fund would be needed to support this position. Based on these assumptions, total personal services costs (salaries and benefits) would be \$685,977 general fund. In addition to these costs, VDH reports that additional funding (\$117,137 general fund) would be needed for required travel, data collection, information technology, and office supplies. The total estimated fiscal impact of this bill is \$803,114 general fund annually.

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A Class 3 misdemeanor is punishable by a fine of up to \$500. These offenses carry no jail time. All revenue collected from such fines is deposited into the Literary Fund. However, it is not possible to estimate either the number of convictions that may result or the amount of each fine that may be assessed under this legislation. Therefore, any potential revenue impact to the Literary Fund is indeterminate.

Other: The provisions of HB336 have been incorporated into this bill.