

# BDR 40-32

## SB 336

### EXECUTIVE AGENCY FISCAL NOTE

#### AGENCY'S ESTIMATES

Date Prepared: March 25, 2015

Agency Submitting: Nevada Department of Corrections

Items of Revenue or Expense, or Both	Fiscal Year 2014-15	Fiscal Year 2015-16	Fiscal Year 2016-17	Effect on Future Biennia
Total	0	0	0	0

#### Explanation

(Use Additional Sheets of Attachments, if required)

The Department of Corrections has reviewed BDR # 40-32 which if passed would allow inmates that have six months to live and that are at least 18 years of age to request that a doctor prescribe a controlled substance to end his or her life. It is assumed that the Nevada Department of Corrections will not be required to treat offenders who are terminal and who chose the end of life alternative that is proposed by this BDR. However, enabling inmates to terminate their lives could open the door for litigation by advocates who believe that inmates should be able to take their own life if they meet the medical criteria. Conversely, inmate families could file complaints against the Department relative to providing access to the drugs to the inmates. It is unlikely that the Department will be able to secure the drugs, as drug companies have collectively decided to withhold providing drugs to prisons that may be used for executions. The same situation may occur with drugs prescribed for self-suicide. Incorporating the proposed law is expected to result in significant transaction costs that cannot be quantified at this time. See additional information attached.

Name Scott K. Sisco

Title Deputy Director

#### DEPARTMENT OF ADMINISTRATION'S COMMENTS

Date Tuesday, March 24, 2015

The agency's response appears reasonable.

Name James R. Wells

Title Director

BDR 40-32  
Nevada Department of Corrections  
March 23, 2015

Budget Account: 3706 (Medical)  
Agency Number: 440

Bill draft request 40-32 will allow inmates that have six months to live and that are at least 18 years of age to request that a doctor prescribe a control substance to end his or her life. The prescribing physician will have to assess the condition of the patient and determine the ability of the individual's condition to make end of life decisions. It is assumed that the Nevada Department of Corrections (NDOC) will not be required to treat offenders who are terminal and who chose the end of life alternative that is proposed by this bill draft request. The NDOC has proposed a Hospice/Palliative program that provides comfort care to terminally ill patients without curative effect. This type of care is much different than what is being proposed. Enabling inmates to terminate their lives would open the door for litigation by advocates who believe that inmates should be able to take their own life if they meet the medical criteria. Conversely, inmate families will file complaints against our department about providing access to the drugs to the inmates. Considering the potential legal ramifications, the NDOC should require a court order to avoid any perception that NDOC sanctions, condones or encourages this process. Furthermore, it is unlikely, that the NDOC will be able to obtain the drugs, as drug companies have collectively decided to withhold selling drugs to prisons that may be used for executions. The same situation may occur with drugs prescribed by prisons for self-suicide. Thus, incorporating the proposed law is expected to result in significant transaction costs that cannot be quantified at this time.

In addition, Section 24 makes it a category A felony, punishable with five to fifteen years in prison, to coerce a terminally ill patient to end his or her life or to forge or to alter someone's request to opt to have the medication prescribed or administered. The impact of the creation of this new crime cannot be determined at this time given the lack of data.