

**LEGISLATIVE FISCAL OFFICE**  
**Fiscal Note**



Fiscal Note On: **SB 32** SLS 26RS 22

Bill Text Version: **ENGROSSED**

Opp. Chamb. Action: **w/ HSE COMM AMD**

Proposed Amd.:

Sub. Bill For.:

<b>Date:</b> April 29, 2026	9:21 AM	<b>Author:</b> MCMATH
<b>Dept./Agy.:</b> LA. Dept. of Health, Office of Women's Health		<b>Analyst:</b> John McKay
<b>Subject:</b> Perinatal Bereavement Care Initiative; Angel's Law		

HEALTH/HOSPITALS DEPT

EG1 INCREASE GF EX See Note

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Establishes a Perinatal Bereavement Care Initiative within the Louisiana Department of Health. (8/1/26)

Proposed law creates and establishes the Perinatal Bereavement Care Initiative, also known as "Angel's' Law" with the LA Department of Health (LDH), Office on Women's Health and Community Health. Proposed law requires the department to administer the initiative and coordinate with the Commission on Perinatal Care and Prevention of Infant Mortality and nonprofit organizations to provide certain resources to hospitals with a maternity unit or neonatal intensive care unit: (1) training for hospital personnel, (2) perinatal cooling device, (3) education for staff on operating devices; and (4) identifying available perinatal bereavement services for parents/family members. Proposed law requires the department to identify each hospital that has a maternity unit or neonatal intensive care unit and to prioritize hospitals that lack access to perinatal cooling devices, treat high-risk maternal patients, and deliver babies. Proposed law allows the department to seek and receive voluntary funds from any source to provide for proposed law. Proposed law requires LDH to submit annual reports to the Senate and House Committees on Health and Welfare for the next four years, with the first report due February 1, 2027, and subsequent reports due each February 1st through February 1, 2030.

EXPENDITURES	2026-27	2027-28	2028-29	2029-30	2030-31	5 -YEAR TOTAL
State Gen. Fd.	<b>INCREASE</b>	<b>INCREASE</b>	<b>INCREASE</b>	<b>INCREASE</b>	<b>INCREASE</b>	
Agy. Self-Gen.	<b>SEE BELOW</b>	<b>SEE BELOW</b>	<b>SEE BELOW</b>	<b>SEE BELOW</b>	<b>SEE BELOW</b>	
Ded./Other	\$0	\$0	\$0	\$0	\$0	<b>\$0</b>
Federal Funds	<b>SEE BELOW</b>	<b>SEE BELOW</b>	<b>SEE BELOW</b>	<b>SEE BELOW</b>	<b>SEE BELOW</b>	
Local Funds	\$0	\$0	\$0	\$0	\$0	<b>\$0</b>

**Annual Total**

REVENUES	2026-27	2027-28	2028-29	2029-30	2030-31	5 -YEAR TOTAL
State Gen. Fd.	\$0	\$0	\$0	\$0	\$0	<b>\$0</b>
Agy. Self-Gen.	<b>SEE BELOW</b>	<b>SEE BELOW</b>	<b>SEE BELOW</b>	<b>SEE BELOW</b>	<b>SEE BELOW</b>	
Ded./Other	\$0	\$0	\$0	\$0	\$0	<b>\$0</b>
Federal Funds	<b>SEE BELOW</b>	<b>SEE BELOW</b>	<b>SEE BELOW</b>	<b>SEE BELOW</b>	<b>SEE BELOW</b>	
Local Funds	\$0	\$0	\$0	\$0	\$0	<b>\$0</b>

**Annual Total**

**EXPENDITURE EXPLANATION**

Proposed law will increase state expenditures within LDH, Office on Women's Health and Community Health, associated with administering the Perinatal Bereavement Care Initiative, providing education and training resources to hospitals, and purchasing perinatal cooling devices for hospitals that lack such equipment. **Based on 35 birthing ready hospitals statewide, LDH estimates a cost of \$103,250 (\$2,950 x 35) to provide perinatal cooling devices. However, since some birthing hospitals already have devices, expenditures may be less and will depend on the number of hospitals requiring devices.** For this reason, the LFO believes the total cost exposure falls below the expenditure dual referral threshold as stipulated in Senate Rule 13.5.1 and House Rule 6.8(F)(1). There is no anticipated impact on LDH for providing education and training resources to hospitals required by proposed law.

Proposed law requires LDH to submit annual reports to the Senate and House Committees on Health and Welfare for the next four years, with the first report due February 1, 2027, and subsequent reports due each February 1st through February 1, 2030. It is anticipated that the department can accomplish this utilizing existing staff and resources.

**REVENUE EXPLANATION**

Proposed law authorizes LDH to receive federal fund and voluntary monies, including gifts, grants, and donations, which may offset program costs. The amount of revenue that would be received from voluntary monies is speculative and indeterminable.

Senate

Dual Referral Rules

House

13.5.1 >= \$100,000 Annual Fiscal Cost {S & H}

6.8(F)(1) >= \$100,000 SGF Fiscal Cost {H & S}

13.5.2 >= \$500,000 Annual Tax or Fee Change {S & H}

6.8(G) >= \$500,000 Tax or Fee Increase or a Net Fee Decrease {S}

**Patrice Thomas**  
**Deputy Fiscal Officer**