

FINANCIAL IMPACT STATEMENT

DEPARTMENT	Department of Health, Center for Licensing and Regulation Branch
DIVISION	Health Facilities Services
PERSON COMPLETING THIS STATEMENT	Connie Melton, Section Chief
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SHORT TITLE OF THIS RULE **Rules and Regulations for Perfusionists in Arkansas.**

1. Does this proposed, amended, or repealed Rule or Regulation have a financial impact? **No additional financial impact. The Department licenses perfusionists currently.**
2. Please estimate the cost of compliance to regulated entities & others outside the department. **No additional impact.** Identify any financial impact on municipalities or counties. **None.**
3. If you believe that the development of a financial impact statement is so speculative as to be cost prohibitive, please explain.
4. If the purpose of this Rule or Regulation is to implement a federal law or Rule or Regulation, please give the incremental cost for implementing the Regulation. **None.**

<u>2012-2013 Fiscal Year</u>		<u>2013- 2014 Fiscal Year</u>	
General Revenue	_____	General Revenue	_____
Federal Funds	_____	Federal Funds	_____
Cash Funds	_____	Cash Funds	_____
Special Revenue	_____	Special Revenue	_____
Other	_____	Other	_____
Total	_____	Total	_____

5. What is the total estimated cost by fiscal year to any entity or individual subject to the proposed, amended, or repealed Rule or Regulation. No additional impact.
6. What is the total estimated cost by fiscal year to the agency to implement this Regulation? **No additional impact.**
7. Does the Proposed Rule impose a cost on state or local school districts? **No.** If yes, then file a fiscal impact statement.

References: Act 884 of 1995, Ark. Code Ann. § 10-3-309
 Act 1104 of 1995, Ark. Code Ann. § 25-15-204
 Act 221 of 1977, Ark. Code Ann. § 19-1-302