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FISCAL IMPACT REPORT

SPONSOR	Car	raro	ORIGINAL DATE LAST UPDATED	1/25/06	HB	
SHORT TITLE		Mammogram Vouchers for Low-Income Women			SB	188
				ANAI	AST	Lewis

APPROPRIATION (dollars in thousands)

Арргор	riation	Recurring or Non-Rec	Fund Affected
FY06	FY07		
	1,500.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

Relates to HB 204/SB 13 (Mammograms for Low-Income Women)

SOURCES OF INFORMATION

LFC Files

<u>Responses Received From</u> Department of Health (DOH) Health Policy Commission (HPC)

SUMMARY

Synopsis of Bill

Senate Bill 188 appropriates \$1,500,000 from the general fund to the Department of Health for expenditure in fiscal year 2007 for the Public Health Division to develop and implement a state-wide voucher program to provide baseline mammograms to women in low-income households.

FISCAL IMPLICATIONS

The appropriation of \$1,500,000 contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of fiscal year 2007 shall revert to the general fund.

SIGNIFICANT ISSUES

The Department of Health (DOH) and the Health Policy Commission (HPC) both note that SB 188 does not specify age, income or insurance status guidelines for the voucher program.

DOH suggests that the eligibility guidelines for the New Mexico Breast and Cervical Cancer Early Detection Program (BCC) could be utilized for the voucher program, as could BCC's existing provider network, along with existing billing and reimbursement methods.

According to the Health Policy Commission (HPC), the National Cancer Institute estimates that, based on current rates, 13.2 percent of women born today (1 in every 7.5 women) will be diagnosed with breast cancer at some time in their lives. The estimated lifetime risk of breast cancer has gone up gradually over the past several decades.

The HPC also notes that the Center for Disease Control and Prevention stated that in 2004 an estimated 215,990 new cases of invasive breast cancer would be diagnosed among women and an estimated 40,580 women would die of this disease. Seventy-five percent of all diagnosed cases of breast cancer are among women aged 50 years or older.

The National Breast Cancer Foundation (NBCF) describes mammography as a low-dose x-ray examination that can detect breast cancer up to two years before it is large enough to be felt. NBCF recommends a mammogram

- every one to two years for women 40-49, depending on previous findings; and
- every year for women 50 and older.

ADMINISTRATIVE IMPLICATIONS

The DOH states that, if the intent of SB 188 is for a one-time non-recurring appropriation, the mammogram voucher program would have to be contracted out, as the Public Health Division of DOH does not administer any voucher programs.

If the voucher program is ongoing and could be administered out of the existing BCC Program, DOH would need to add one full-time administrator, one full-time nurse, and one full-time billing specialist to implement the program. DOH's estimated cost of implementation is \$150,000 for 3 FTE and associated administrative costs (i.e., \$30,000 full-time administrator, \$40,000 billing specialist; and \$50,000 full-time nurse, and \$30,000 for administrative costs).

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

The HPC notes that uninsured low-income women might not be screened and go undiagnosed. They may potentially die of breast cancer because they did not have access to lifesaving screening programs for early detection.

ML/nt