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FISCAL IMPACT REPORT

SPONSOR	Tho	mson	ORIGINAL DATE LAST UPDATED	02/03/14	HB	140
SHORT TITI	E	Coordinated Rural	Cancer Prevention		SB	

ANALYST Esquibel

<u>APPROPRIATION</u> (dollars in thousands)

Appropr	iation	Recurring	Fund Affected	
FY14	FY15	or Nonrecurring		
	\$200.0	Recurring	General Fund	

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION LFC Files

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

SUMMARY

Synopsis of Bill

House Bill 140 would appropriate \$200 thousand from the general fund to DOH for expenditure in FY15 to provide coordinated cancer prevention, research, and education services, including access to clinical trials in rural areas. The bill specifies that DOH provide these services through a nonprofit statewide network of health care providers engaged in conducting clinical trials, providing educational services to physicians and patients, and coordinating with organizations that provide support services to cancer patients and their families.

FISCAL IMPLICATIONS

HB 140 includes an FY15 general fund recurring appropriation of \$200 thousand. Any unexpended or unencumbered balance remaining at the end of FY15 shall revert to the general fund.

OTHER SUBSTANTIVE ISSUES

DOH indicates the American Cancer Society estimated that 10,090 new cases of cancer would be diagnosed in New Mexico in 2013. Cancer is the second leading cause of death in the State and it is estimated that approximately 3,540 New Mexicans died from the disease in 2013. (http://www.cancer.org/research/cancerfactsfigures/cancerfactsfigures/cancer-facts-figures-2013).

House Bill 140 – Page 2

Comprehensive cancer control addresses the spectrum of cancer care from prevention to early detection, treatment, survivorship, and end-of-life issues. The DOH currently provides limited cancer prevention and education services, and does not conduct research activities. The provisions of HB140 would support the *New Mexico Cancer Plan* developed by the New Mexico Cancer Council.

(http://nmcancercouncil.org/cancer_plan.htm)

Cancer clinical trials are research studies designed to translate scientific research results into better ways to prevent, diagnose, or treat cancer. Cancer clinical treatment trials provide access to either the best available standard treatment or a promising new treatment for patients with cancer. Advances in cancer care and the development of cancer therapeutics depend largely upon an effective clinical trial process. Eligible patients, the experimental procedures, available only through cancer treatment clinical trials, may increase survival or improve quality of life as compared to the standard treatment. However, the American Cancer Society reports that fewer than 5 percent of adult cancer patients participate in clinical research studies. Most people with cancer reported they were either unaware or unsure that participation in clinical trials was an option for their treatment, and most of them said they would be willing to consider enrolling had they known it was possible.

(http://www.cancer.org/acs/groups/cid/documents/webcontent/003006-pdf.pdf)

In New Mexico, an estimated 8 percent of cancer survivors reported having participated in clinical trials as part of their treatment (NM Behavioral Risk Factor Surveillance System, 2010). Clinical trials are not without risk to patients. Possible risks of participating in clinical treatment trials include the following: new drugs or procedures under study are not always better than the standard care to which they are being compared, experimental treatments may have side effects or risks that doctors do not expect or that are worse than those resulting from standard care, participants may be required to make more visits to the doctor than they would if they were not in the clinical trial, and health insurance may not cover all patient care costs in a trial (National Cancer Institute, *Clinical Trials Fact Sheet*, 2008

www.cancer.gov/cancertopics/factsheet/Information/clinical-trials).

HB 140 would fund efforts to educate both physicians and the public about clinical trials.

RAE/jl