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## FISCAL IMPACT REPORT

**SPONSOR** Stewart **ORIGINAL DATE** 02/02/10  
**LAST UPDATED** \_\_\_\_\_ **HM** 36  
**SHORT TITLE** Expand Cancer Clinical Trial Access **SM** \_\_\_\_\_  
**ANALYST** Pava

### APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Non-Rec	Fund Affected
FY10	FY11		
	NFI	Recurring	General Fund

(Parenthesis ( ) Indicate Expenditure Decreases)

### SOURCES OF INFORMATION

LFC Files

Responses Received From  
Department of Health (DOH)  
Health Policy Commission (HPC)

### SUMMARY

#### Synopsis of Bill

HM 36 requests the DOH - Chronic Disease Prevention and Control Bureau to convene a diverse working group to identify gaps in current patient access to cancer clinical trials and investigate methods to expand cancer clinical trials to areas of the state not currently served and identify potential funding sources for expansion of services. Recommendations are to be presented to the Legislative Health and Human Services Committee by October 2010.

### FISCAL IMPLICATIONS

There is no appropriation indicated.

### SIGNIFICANT ISSUES

Cancer clinical trials are research studies that translate 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. For eligible patients, the experimental procedures available only through cancer treatment clinical trials may increase survival or improve quality of life compared to standard treatment.

## **House Memorial 36 – Page 2**

HM36 indicates that: In 2008, approximately 8,260 new cancer cases were diagnosed in New Mexico. More than 3,310 New Mexicans die of cancer each year. Cancer is the second leading cause of death in the United States. Clinical trial systems allowing patients to remain in their homes and receive care from a familiar physician is cost-effective and easier for the patient. However, cancer clinical trials are not available in many rural areas of the State.

### **PERFORMANCE IMPLICATIONS**

HM 36 support the goal of *The New Mexico Cancer Plan 2007-2011*: to increase access to and participation of New Mexicans in (1) cancer prevention and therapeutic clinical trials and (2) long-term follow-up, survivorship, and epidemiological research studies.

### **ADMINISTRATIVE IMPLICATIONS**

The provisions of HM36 could be accomplished with current DOH staffing.

### **DUPLICATION**

HM036 is a duplicate of SJM019.

### **OTHER SUBSTANTIVE ISSUES**

Only about three to five percent of adult cancer patients participate in clinical treatment trials. Certain populations, such as those that are low income, elderly, racial/ethnic minorities, or those who live in rural areas have the smallest percentage of clinical trial participants (Intercultural Cancer Council, 2005).

### **WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL**

The consequences of not enacting HM 36 would undermine the possible expansion of cancer clinical trials in varying parts of New Mexico that currently do not have access to clinical trials.

### **ALTERNATIVES**

DOH suggests: on page 2, line 22, before “university” insert “New Mexico Cancer Council”; on page 2, lines 22 and 23, after “center” delete “and the New Mexico Cancer Council”.

CP/mew