

FISCAL IMPACT OF PROPOSED LEGISLATION

Measure: SB 362 - A

Seventy-Seventh Oregon Legislative Assembly – 2013 Regular Session
Legislative Fiscal Office

***Only Impacts on Original or Engrossed
Versions are Considered Official***

Prepared by: Kim To
Reviewed by: Linda Ames
Date: 2/18/2013

Measure Description:

Requires Oregon Health Authority to provide specified number of breast and cervical cancer screenings under Oregon Breast and Cervical Cancer Program.

Government Unit(s) Affected:

Oregon Health Authority (OHA)

Local Government Mandate:

This bill does not affect local governments' service levels or shared revenues sufficient to trigger Section 15, Article XI of the Oregon Constitution.

Analysis:

Senate Bill 362 A Engrossed requires the Oregon Health Authority to provide medical assistance, using funds appropriated by the Legislative Assembly for breast and cervical cancer screening, to at least [an unspecified]* number of women through the Breast and Cervical Cancer Program (BCCP) in each biennium.

*The bill leaves the number blank.

The fiscal impact of this bill is indeterminate depending on the number of additional women required to be screened through the BCCP.

As a point of reference, the Oregon Health Authority provides the following information:

The BCCP provides screening to women between the ages of 40 and 64, or for younger women if they meet specific symptomatic criteria. These screenings occur at certified providers who are reimbursed by the Public Health Department with funds from the Centers for Disease Control. If the results of one of these screenings show breast or cervical cancer, or pre-cancerous conditions, BCCP clients can receive treatment on a fee for service basis through the Oregon Health Plan's Breast and Cervical Cancer Medical (BCCM) program, if the following conditions are met:

1. The client has income no more than 250% of the Federal Poverty Level (FPL); and
2. The client is uninsured or underinsured, including ineligibility for any other Oregon Health Plan programs.

Currently, the BCCP screens 5,200 women a year. If an additional 7,500 women are screened during the 2013-15 biennium, OHA's Public Health estimates the increase cost to be approximately \$3.1 million General Fund for the 2013-15 biennium for reimbursements to providers, and to perform caseload management activities.

In addition, OHA estimates that approximately 3.7% of women who are screened are identified as needing treatment for breast or cervical cancer, or pre-cancerous conditions, and as a result are eligible to receive medical assistance. An increase in 7,500 screenings during 2013-15 biennium will result in roughly 270 additional clients needing treatment who are eligible for medical assistance. From this assumption, and using 2013-15 pricing model, OHA's Medical Assistance Program extrapolates that medical assistance costs could increase by approximately \$7.8 million Total Funds (\$1.2 million General Fund) for the 2013-15 biennium.

Please note that these numbers are rough estimates of mock scenarios. Medical inflation and policy changes through health care reform, at both the state and federal level, will impact the cost of these programs.