

FISCAL NOTE

Requested by Legislative Council
01/12/2005

Bill/Resolution No.: SB 2169

1A. **State fiscal effect:** *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

	2003-2005 Biennium		2005-2007 Biennium		2007-2009 Biennium	
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds
Revenues						
Expenditures			\$322,435	\$857,185	\$322,435	\$857,185
Appropriations			\$322,435	\$857,185	\$322,435	\$857,185

1B. **County, city, and school district fiscal effect:** *Identify the fiscal effect on the appropriate political subdivision.*

2003-2005 Biennium			2005-2007 Biennium			2007-2009 Biennium		
Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts
			\$148,090	\$78,019	\$97,805	\$148,090	\$78,019	\$97,805

2. **Narrative:** *Identify the aspects of the measure which cause fiscal impact and include any comments relevant to your analysis.*

The provisions of the bill would add colorectal cancer screening as a mandated benefit to the PERS plan

3. **State fiscal effect detail:** *For information shown under state fiscal effect in 1A, please:*

A. **Revenues:** *Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.*

B. **Expenditures:** *Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.*

BCBS is the health carrier for the PERS plan. PERS submitted this bill to them to determine if it would have an effect on PERS premiums for the 2005-2007 biennium. They indicated that it would and the additional premium required would be \$3.60 per contract per month. This is based upon an average cost of \$1,100 for the screening (procedure and related services). The utilization assumptions reflect the NDPERS demographics and follow the AMA clinical recommendations of colonoscopy once every 10 years beginning at age 50, flexible sigmoidoscopy every 5 years beginning at age 50, double-contrast barium enema every 5 years beginning at age 50, fecal occult blood testing every year beginning at age 50.

C. **Appropriations:** *Explain the appropriation amounts. Provide detail, when appropriate, of the effect on the biennial appropriation for each agency and fund affected and any amounts included in the executive budget. Indicate the relationship between the amounts shown for expenditures and appropriations.*

The appropriation amount reflects the required additional premiums that will need to be paid by participating employers to support this provision.

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