

**SB 213-FN-A – VERSION ADOPTED BY BOTH BODIES**

03/22/07 0603s

04/12/07 1172s

06Jun2007... 1962h

06/27/07 2221eba

2007 SESSION

07-1283

08/05

SENATE BILL ***213-FN-A***

AN ACT establishing a comprehensive cancer plan fund, requiring master settlement agreement strategic contribution fund payments to be deposited in such fund, and establishing a comprehensive cancer plan oversight board.

SPONSORS: Sen. Fuller Clark, Dist 24; Sen. Burling, Dist 5; Sen. DeVries, Dist 18; Sen. Gottesman, Dist 12; Rep. Bridgham, Carr 2

COMMITTEE: Health and Human Services

ANALYSIS

This bill establishes a comprehensive cancer plan fund, requires master settlement contribution fund payments to be deposited in such fund, and establishes a comprehensive cancer plan oversight board.

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Explanation: Matter added to current law appears in ***bold italics***.

Matter removed from current law appears [~~in brackets and struck through.~~]

Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

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STATE OF NEW HAMPSHIRE

*In the Year of Our Lord Two Thousand Seven*

AN ACT establishing a comprehensive cancer plan fund, requiring master settlement agreement strategic contribution fund payments to be deposited in such fund, and establishing a comprehensive cancer plan oversight board.

*Be it Enacted by the Senate and House of Representatives in General Court convened:*

1 New Subdivision; New Hampshire Comprehensive Cancer Plan. Amend RSA 126-A by inserting after section 62 the following new subdivision:

New Hampshire Comprehensive Cancer Plan

126-A:63 Comprehensive Cancer Plan Fund.

I. There is established in the office of the state treasurer the comprehensive cancer plan fund, to be administered by the department of health and human services. This fund shall be nonlapsing and appropriated as designated in paragraph II of this section.

II. Strategic contribution fund payments as agreed to in the master settlement agreement shall be deposited into the comprehensive cancer plan fund for the fiscal years ending June 30, 2008, June 30, 2009, June 30, 2010, and June 30, 2011. No sums shall be deposited into the comprehensive cancer plan fund if such strategic contribution fund payments are not received. The fund shall be expended annually for the following purposes:

(a) 67.4 percent towards the state tobacco use prevention program which shall be expended by the department for tobacco use prevention and cessation programs as provided in RSA 126-K:15.

(b) 2.5 percent towards diet and exercise programs.

(c) 5.9 percent towards early detection and screening programs for breast and cervical cancer.

(d) 17.6 percent towards early detection and screening programs for colorectal cancer.

(e) 1.2 percent towards survivorship and cancer support for those affected by prostate cancer.

(f) 2.2 percent to identify and promote treatment and support services for survivors.

(g) 3.2 percent to minority oversampling data for information on behavioral risk and cancer rates.

126-A:64 Comprehensive Cancer Plan Oversight Board. There is established a comprehensive cancer plan oversight board to oversee the department of health and human services' allocation of moneys from the comprehensive cancer fund.

I. The members of the board of directors of the comprehensive cancer plan oversight board shall be as follows:

(a) Two members of the senate, appointed by the president of the senate.

- (b) Two members of the house of representatives, appointed by the speaker of the house of representatives.
- (c) Two members from the department of health and human services, appointed by the commissioner.
- (d) Two members from the American Cancer Society, appointed by that organization.
- (e) Two members from the Dartmouth Hitchcock Healthcare System, appointed by that organization.
- (f) Two members from the New Hampshire Hospital Association.
- (g) Two members of the public who are cancer survivors, appointed by the American Cancer Society.

II. The board of directors may appoint other members to the comprehensive cancer plan oversight board.

III. Legislative members of the board shall receive mileage at the legislative rate when attending to the duties of the board.

IV. The board shall report to the president of the senate, the speaker of the house of representatives, the senate clerk, the house clerk, the governor, and the state library on or before November 1 of each year of the appropriation.

2 New Subparagraph; Application of Receipts; Comprehensive Cancer Plan Fund. Amend RSA 6:12, I(b) by inserting after subparagraph (252) the following new subparagraph:

(253) Moneys deposited in the comprehensive cancer plan fund under RSA 126-A:63.

3 Repeal. The following are repealed:

I. RSA 126-A:63, relative to the comprehensive cancer plan fund.

II. RSA 6:12, II (b)(253), relative to the comprehensive cancer plan fund.

4 Effective Date.

I. Section 3 of this act shall take effect June 30, 2011.

II. The remainder of this act shall take effect July 1, 2007.

LBAO

07-1283

Amended 04/06/07

#### **SB 213 FISCAL NOTE**

AN ACT establishing a comprehensive cancer plan fund and making an appropriation therefor, and establishing a comprehensive cancer plan oversight board.

**FISCAL IMPACT:**

The Department of Health and Human Services states this bill, **as amended by the Senate (Amendment #2007-0603s)**, will increase state expenditures by \$4,041,000 in FY 2008, FY 2009, FY 2010, and FY 2011. This bill will have no fiscal impact on state, county and local revenue or county and local expenditures.

This bill appropriates \$4,041,000 from strategic contribution fund payments as agreed to in the master settlement agreement to the comprehensive cancer plan fund in FY 2008, FY 2009, FY 2010, and FY 2011 for the purposes of this bill.

#### **METHODOLOGY:**

The Department of Health and Human Services states this establishes the comprehensive cancer plan fund, and appropriates \$4,041,000 to the fund from the strategic contribution fund payments as agreed to in the tobacco master settlement agreement in FY 2008, FY 2009, FY 2010, and FY 2011. The bill allocates the appropriation to the fund as follows:

- \$2,722,000 towards the state tobacco use prevention program (which would be deposited into the tobacco use prevention fund);
- \$100,000 towards diet and exercise programs;
- \$240,000 towards early detection and screening programs for breast and cervical cancer;
- \$710,000 towards early detection and screening programs for colorectal cancer;
- \$50,000 to survivorship and cancer support for those affected by prostate cancer;
- \$89,000 to identify and promote treatment and support services for survivors; and
- \$130,000 to minority oversampling data for information on behavioral risk and cancer rates.

The Division of Public Health Services (DPHS) states although the bill does not establish new positions, new staff would be needed to provide technical expertise and contracts management for the services outlined in the bill. The Department assumes funds would be used for positions as follows:

For tobacco use prevention programs –

- Fund 50% of the current Administrator I position (LG 27, Step 6) who oversees the tobacco prevention and control program;
- Two new Health Promotion Advisors (LG 23) to coordinate state program objectives and manage contracts;
- One new Assistant State Epidemiologist (LG 23) to conduct surveillance and evaluation using evidence-based survey tools;
- One Program Specialist III position (LG 23) dedicated to assisting communities and business and industry to comply with the state Indoor Smoking Act;
- One Program Specialist II (LG 21) position dedicated to financial and management reporting; and

- One Program Assistant II (LG 15) position to provide support to all program activities.

For diet and exercise programs –

- Fund 50% of a Health Promotion Advisor (LG 23) to coordinate state program objectives and manage contracts.

For early detection and screening programs for breast and cervical cancer –

- One new Health Promotion Advisor (LG 23) for program recruitment and marketing.

For early detection and screening programs for colorectal cancer –

- One new Health Promotion Advisor (LG 23) for program recruitment and marketing.
- One new Public Health Nurse (LG 25) for quality assurance and care management; and
- One Claims Processor II (LG 12) for billing data entry and record keeping.

The Department states no new positions would be required to administer funds for the other programs contained in the bill. Funds would be used to contract for services as well as to defray any additional administrative costs associated with these services. Funds would also be used for other current expenses related to program expenditures, such as education materials and performance management systems. Assuming annual steps, and benefits at 48.3% of salary, the Department estimates the fiscal impact as follows:

	FY 2009	FY 2010	FY 2011	FY 2012
Salaries	\$ 388,452	\$ 404,240	\$ 422,332	\$ 439,798
Benefits	\$ 187,622	\$ 195,248	\$ 203,986	\$ 212,422
Current Expense	\$ 102,500	\$ 102,500	\$ 102,500	\$ 102,500
Rent	\$ 45,716	\$ 49,093	\$ 52,775	\$ 56,733
In-State Travel	\$ 11,250	\$ 11,250	\$ 11,250	\$ 11,250
Out-of-State Travel	\$ 19,500	\$ 19,500	\$ 19,500	\$ 19,500
Equipment	\$ 38,500	\$ 0	\$ 0	\$ 0
Contracts	<u>\$3,247,460</u>	<u>\$3,259,169</u>	<u>\$3,228,657</u>	<u>\$3,198,797</u>
Total	\$4,041,000	\$4,041,000	\$4,041,000	\$4,041,000