

Fiscal impact reports (FIRs) are prepared by the Legislative Finance Committee (LFC) for standing finance committees of the NM Legislature. The LFC does not assume responsibility for the accuracy of these reports if they are used for other purposes.

Current FIRs (in HTML & Adobe PDF formats) are available on the NM Legislative Website (legis.state.nm.us). Adobe PDF versions include all attachments, whereas HTML versions may not. Previously issued FIRs and attachments may be obtained from the LFC in Suite 101 of the State Capitol Building North.

FISCAL IMPACT REPORT

ORIGINAL DATE 01/27/09

SPONSOR Trujillo LAST UPDATED _____ HB 90

SHORT TITLE UNM Cavernous Angioma Care & Research SB _____

ANALYST Haug

APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Non-Rec	Fund Affected
FY09	FY10		
	\$375.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From

Department of Health (DOH)
 University of New Mexico (UNM)
 Health Policy Commission (HPC)
 Higher Education Department (HED)

SUMMARY

Synopsis of Bill

House Bill 90 appropriates \$375.0 from the general fund to the Board of Regents of the University of New Mexico for the Health Sciences Center to establish a center for excellence and a site for a national angioma organization to study cavernous angioma by focusing on clinical care through early diagnosis and access to genetic testing and counseling; on research by seeking ways to decrease hemorrhage or lesion growth; and on teaching by helping primary care providers, emergency room physicians and radiologists throughout the state to recognize cavernous angioma or familial cerebral cavernous malformations.

FISCAL IMPLICATIONS

The appropriation of \$375.0 contained in this bill is a recurring expense to the general fund. Any unexpended or unencumbered balance remaining at the end of Fiscal Year 2010 shall revert to the general fund.

SIGNIFICANT ISSUES

The HED states that this request was not submitted by the UNM to the HED for review and is not included in the Department's funding recommendation for FY10.

The LFC Appropriation Recommendations, Volume II, pages 364-365 states:

The committee has concerns about the growth of research and public service projects within the higher education budget, as well as the alignment of these projects with state goals and strategic plans. The committee also continues to have significant concerns about accountability and performance outcomes for these projects.

The committee recommendation reduces funding included in the HED request by varying levels from FY09 funding amounts for research projects, public service projects and P-20 pipeline projects focusing on students.

According to the December 2008 revenue estimate, FY10 recurring revenue will only support a base expenditure level that is \$293 million, or 2.6 percent, less than the FY09 appropriation. All appropriations outside of the general appropriation act will be viewed in this declining revenue context.

The Executive Budget in Brief notes that over the years more than 300 RPSPs have been created, accounting for a large portion of institution budgets. The current RPSPs were reviewed while considering the relevance of the project to the core mission of the institution, the community benefit and the outcomes associated with each project. (Budget in Brief and Policy Highlights, P 9-10.)

UNM states that the appropriation contained within this bill was not presented to the University of New Mexico Regents as this program expansion did not go through the UNM 2009 Legislative Request process.

UNM notes that Cavernous angiomas of the Central Nervous System cause bleeding into the brain and spinal cord that results in seizures, headaches, and sudden loss of neurological function that may be permanent or result in death. This bill provides families and patients of all ages who are affected by cavernous angiomas (or cerebral cavernous malformations) with 1) improved health care, 2) education of health care providers, patients and families, and 3) research to prevent the serious and sometimes fatal growth and hemorrhage of hereditary cavernous angiomas.

The HPC comments:

There are familial (inherited) and sporadic (occurring for no clear reason) cases of CCM. Researchers have discovered three different genes associated with CCM. Studies are currently underway to understand the relationship between the mutations of each of these genes and their corresponding symptoms. In New Mexico, there is specific mutation on the CCM1 gene among thousands of descendants of the original Hispanic settlers, identified as a genetic founder effect. It is likely that this Common Hispanic Mutation has been passed through at least 17 generations since 1598, resulting in New Mexico having the highest population density of the illness in the world.

A study is ongoing through the Department of Health exploring the needs of affected individuals in the state; a report will be submitted to the State legislature in late 2009. Also in 2008, Congressman Tom Udall introduced legislation into the U.S. House of Representatives calling for increased cavernous angioma research, awareness, and education.

The Angioma Alliance works closely with the University of New Mexico, where more cavernous angioma patients are seen than anywhere in the world.

The DOH notes that Dr. Leslie Morrison, a pediatric neurologist and CCM researcher at UNM Hospital, provides clinical care for most patients diagnosed with CCM and their families in NM. Dr. Morrison estimates that there are at least 10,000 people affected with CCM in New Mexico. She estimates that 5-10% have serious initial clinical presentations such as hemorrhage that result in about 25 neurosurgeries in New Mexico per year. In addition, CCM causes an estimated dozens of cases of major disability in New Mexico annually, and in rare cases, can even cause death. Delay in diagnosis is not uncommon and has been very frustrating for many patients. The only definitive therapy currently available is surgery, but it cannot always be done (due to the location of the angioma) and research could result in improved medical management and quality of life.

GH/mc