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FISCAL IMPACT REPORT

ORIGINAL DATE 02/18/09

SPONSOR Egolf LAST UPDATED _____ HB 735

SHORT TITLE Annual Firefighter Pathogen Screening SB _____

ANALYST Chabot

ESTIMATED ADDITIONAL OPERATING BUDGET IMPACT (dollars in thousands)

	FY09	FY10	FY11	3 Year Total Cost	Recurring or Non-Rec	Fund Affected
Total		\$621.0	\$621.0	\$1,242.0	Recurring	General Fund

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

LFC Files

Responses Received From

Department of Finance and Administration (DFA)
 Department of Health (DOH)
 Energy, Minerals and Natural Resources (EMNRD)
 Medical Board (MB)
 Public Regulation Commission (PRC)

SUMMARY

Synopsis of Bill

House Bill 735, Annual Fire Fighter Pathogen Screening, provides for annual blood tests for firefighters defined as full- or part-time member or a volunteer of a fire department administered by the state or any political subdivision and any red-carded firefighter trained in wild land firefighting and hired by the state. The blood test is to screen for human immunodeficiency virus (HIV), Hepatitis B and Hepatitis C. Exception is provided for inactive firefighters and those not having any contact with the public.

FISCAL IMPLICATIONS

There is no appropriation; however, there will be costs to DOH to administer the program. DOH estimates the cost of each test to be \$69. PRC's State Fire Marshal estimates there are 9,000 fire fighters in New Mexico so the estimated annual cost is \$621 thousand not including DOH staff time, or lost fire fighter time in obtaining the blood draw.

The LFC submitted a balanced general fund appropriation recommendation for fiscal year 2010. Any additional general fund expenditures appropriated by the Legislature must be off-set by an equal amount from the appropriation recommendation.

According to the February 2008 revenue estimate, FY10 recurring revenue will only support a base expenditure level that is \$575 million less than the FY09 appropriations before the 2009 solvency reductions. All appropriations outside of the general appropriation act will be viewed in this declining revenue context.

SIGNIFICANT ISSUES

DOH assesses the bill would allow for early diagnosis of infection among firefighters which in turn could allow for more effective treatment. However, it states there is some question whether firefighters should be considered at greater risk than the general population. In addition, the bill does not include other first responders, such as Emergency Medical Service Technicians who are not firefighters but have equal or greater risk for the identified infections. The department recommends professionals at risk should receive the full series of immunizations.

The Medical Board recommends testing for Hepatitis A.

EMNRD employs approximately 200 red-carded firefighters during fire season.

ADMINISTRATIVE IMPLICATIONS

DFA assess DOH “would face a considerable workload increase in drawing blood, processing samples and providing results to all firefighters annually.

ALTERNATIVES

DOH and DFA state the federal Centers for Disease Control and Prevention and the National Fire Protection Agency recommend screening for blood-borne pathogens upon initial employment and in response to specific exposures.

DOH could provide occupational exposure education to fire department and firefighters at annual meetings or organized trainings and support fire departments in the event of occupational exposures.

POSSIBLE QUESTIONS

1. Is screening after an exposure a possible method for protecting fire fighters from certain pathogens?
2. How many departments or volunteer fire departments already provide this testing?
3. What is the documented exposure rate in New Mexico?
4. Should other occupational types be included in this testing?