

LEGISLATIVE FISCAL OFFICE
Fiscal Note



Fiscal Note On: **HB 253** HLS 24RS 545
 Bill Text Version: **ENROLLED**
 Opp. Chamb. Action:
 Proposed Amd.:
 Sub. Bill For.:

Date: May 30, 2024	4:01 PM	Author: STAGNI
Dept./Agy.: Municipal and parish fire departments		Analyst: Tanesha Morgan
Subject: Cancer screenings		

FIRE PROTECT/FIREMEN EN INCREASE LF EX See Note Page 1 of 2
 Provides relative to cancer screenings for certain firefighters and fire service employees

Proposed law requires that classified firefighters employed as full-time paid employees of municipal or parish fire departments or fire protection districts, fire service employees employed by non profit corporations under contract with fire protection districts be provided cancer screening examinations. Proposed law requires that the cancer screenings examinations be conducted by a physician every three, four, or five years thereafter during the course of employment or service. Proposed law requires that the examination include, but not be limited to the following cancers: (1) Colon (2) Lung (3) Bladder (4) Oral (5) Thyroid. Proposed law requires that retired firefighters and fire service employees be provided cancer screening examinations by their former employers pursuant to proposed law. Additionally requires employers and former employers to pay for the costs of cancer screening examinations. Proposed law provides that no firefighter or fire service employee shall be required to participate in cancer screening examinations.

EXPENDITURES	2024-25	2025-26	2026-27	2027-28	2028-29	5 -YEAR TOTAL
State Gen. Fd.	\$0	\$0	\$0	\$0	\$0	\$0
Agy. Self-Gen.	\$0	\$0	\$0	\$0	\$0	\$0
Ded./Other	\$0	\$0	\$0	\$0	\$0	\$0
Federal Funds	\$0	\$0	\$0	\$0	\$0	\$0
Local Funds	INCREASE	INCREASE	INCREASE	INCREASE	INCREASE	
Annual Total						
REVENUES	2024-25	2025-26	2026-27	2027-28	2028-29	5 -YEAR TOTAL
State Gen. Fd.	\$0	\$0	\$0	\$0	\$0	\$0
Agy. Self-Gen.	\$0	\$0	\$0	\$0	\$0	\$0
Ded./Other	\$0	\$0	\$0	\$0	\$0	\$0
Federal Funds	\$0	\$0	\$0	\$0	\$0	\$0
Local Funds	\$0	\$0	\$0	\$0	\$0	\$0
Annual Total	\$0	\$0	\$0	\$0	\$0	\$0

EXPENDITURE EXPLANATION

The proposed bill is anticipated to have a significant ongoing expense for municipal and parish fire departments, fire protection districts, and non-profit corporations that employ firefighters and fire service employees in Louisiana associated with cancer screenings for certain firefighters and fire service services employees, and retirees.

The proposed bill mandates cancer screenings for an estimated 8,800 firefighters, fire service employees, and retirees in Louisiana. The associated costs, including the full cost of screenings for uninsured individuals and co-pays, deductibles, and increased insurance premiums for insured individuals, must be entirely covered by the employers (municipal and parish fire departments, fire protection districts, and non-profit corporations), with no out-of-pocket expenses for the employees. This is expected to result in significant ongoing costs for these employers. Participation in the screenings is voluntary for the employees.

According to the actuarial analysis prepared by LDI, the proposed law is expected to increase expenditures associated with private insurance for firefighters and fire service employees in Louisiana. The Aggregate Cost Determination section estimates the aggregate cost of the requirement in FY 25 to range from \$302,280 (low) to \$452,760 (high). The aggregate cost in FY 26-29 is projected to increase each year due to medical inflation, reaching \$377,921 (low) to \$566,056 (high) by FY 29. The Premium Increase Determination section calculates the aggregate extra premium for the review procedure in FY 25, which ranges from \$355,659 (low) to \$532,659 (high). The aggregate extra premium in FY 26-29 is projected to increase each year due to medical inflation, reaching \$444,613 (low) to \$665,949 (high) by FY 29.

On an individual policy level, the annual premium increase per policy in FY 25 ranges from \$64.66 (low) to \$96.85 (high). The annual premium increase per policy in FY 26-29 is projected to increase each year due to medical inflation, reaching \$80.84 (low) to \$121.08 (high) by FY 29. The percentage premium change is estimated to range from 0.38% (low) to 0.57% (high). The analysis is based on several assumptions, including approximately 5,500 firefighters and fire service employees of local entities, a range of per employee per month (PEPM) costs for cancer screenings, a monthly health insurance premium of \$1,200, a stationary insured population, medical inflation rates of 8% in the first year and 5% thereafter, and a premium loss ratio of 85%. **See details on page 2.**

REVENUE EXPLANATION

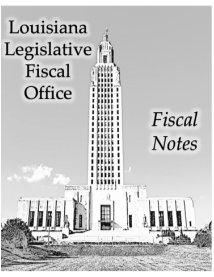
There is no anticipated direct material effect on governmental revenues as a result of this measure.

Senate Dual Referral Rules
 13.5.1 >= \$100,000 Annual Fiscal Cost {S & H}
 13.5.2 >= \$500,000 Annual Tax or Fee Change {S & H}

House
 6.8(F)(1) >= \$100,000 SGF Fiscal Cost {H & S}
 6.8(G) >= \$500,000 Tax or Fee Increase or a Net Fee Decrease {S}

Patrice Thomas
 Deputy Fiscal Officer

LEGISLATIVE FISCAL OFFICE
Fiscal Note



Fiscal Note On: **HB 253** HLS 24RS 545
 Bill Text Version: **ENROLLED**
 Opp. Chamb. Action:
 Proposed Amd.:
 Sub. Bill For.:

Date: May 30, 2024	4:01 PM	Author: STAGNI
Dept./Agy.: Municipal and parish fire departments		
Subject: Cancer screenings		Analyst: Tanesha Morgan

CONTINUED EXPLANATION from page one:

Aggregate Cost Determination

Aggregate cost of the requirement in FY 25
 Cost = insured population x PEPM cost x 12 months
 FY 25 (Low)=5,500 x \$4.58 x 12= \$302,280
 FY 25 (High)=5,500 x \$6.86 x 12=\$452,760
 Aggregate cost in FY 26-29
 Cost = insured population x PEPM cost x 12 months x medical inflation
 FY 26 (Low)=5,500x\$4.58x12x1.08=\$326,462
 FY 26 (High)=5,500x\$6.86x12x1.08=\$488,981
 FY 27 (Low)= \$703,339 x1.05= \$342,786
 FY 27 (High)= \$1,055,592 x1.05=\$513,430
 FY 28 (Low)= \$738,506 x1.05= \$359,925
 FY 28 (High)= \$1,108,372 x1.05=\$539,101
 FY 29 (Low)=\$775,431 x1.05=\$377,921
 FY 29 (High)= \$1,163,790x1.05)=\$566,056

Premium Increase Determination

Aggregate extra premium for the review procedure in FY 25
 Premium = (insured population x PEPM cost x 12 months) / loss ratio
 FY 25 (Low)=(5,500x\$4.58x12)/0.85=\$355,659
 FY 25 (High)=(5,500x\$6.86x12)/0.85=\$532,659
 Aggregate extra premium in FY 26-29
 Premium = (insured population x PEPM cost x 12 months x medical inflation) / loss ratio
 FY 26 (Low)=(5,500 x \$4.58 x 12 x 1.08)/0.85=\$384,073
 FY 26 (High)=(5,500x\$6.86 x 12 x 1.08)/0.85=\$575,272
 FY 27 (Low)= (\$827,458 x1.05)=\$403,277
 FY 27 (High)=(\$1,241,873 x1.05)=\$604,035
 FY 28 (Low)=\$868,831x1.05)=\$423,441
 FY 28 (High)=\$1,303,967 x1.05)=\$634,237
 FY 29 (Low)=\$912,272 x1.05)= \$444,613
 FY 29 (High)=\$1,369,165 x1.05)=\$665,949

Aggregate Extra Premium Determination

Annual premium increase per policy in FY 25
 Premium = (PEPM cost x 12 months) / loss ratio
 FY 25 (Low)=\$4.58x12)/0.85= \$64.66
 FY 25 (High)=\$6.86x12)/0.85=\$96.85
 Annual premium increase per policy in FY 26-29
 Premium = (PEPM cost x 12 months x medical inflation) / loss ratio
 FY 26 (Low)=\$4.58x12x1.08)/0.85=\$69.83
 FY 26 (High)=\$6.86x12x1.08)/0.85=\$104.59
 FY 27 (Low)=\$92 x1.05)= \$73.32
 FY 27 (High)=\$138x1.05)=\$109.82
 FY 28 (Low)= (\$97x1.05)= \$76.99
 FY 28 (High)=\$145x1.05)=\$115.32
 FY 29 (Low)= (\$101x1.05)=\$80.84
 FY 29 (High)=\$152x1.05)=\$121.08
 Percentage premium change caused by the passage of this bill
 Percent = PEPM cost/average monthly premium
 Low=\$4.58/\$1,200=0.38%
 High=\$6.86/\$1,200=0.57%

Assumptions:

The calculations are assumed to apply on a fiscal year basis
 The bill is not expected to have any effect on the general Louisiana population
 Louisiana's insured population of firefighters and fire service employees is approximately 5,500
 Cost of cancer screening for PEPM - Low=\$4.58 (Internet Research)
 Cost of cancer screening for PEPM - High=\$6.86 (Internet Research)
 The assumed monthly health insurance premium is \$1,200
 The total insured population is assumed to be stationary (entries equal exits)
 Medical inflation is assumed to be 8%, then 5% thereafter
 The assumed premium loss ratio is 85%

<u>Senate</u>	<u>Dual Referral Rules</u>	<u>House</u>
<input checked="" type="checkbox"/> 13.5.1 >= \$100,000 Annual Fiscal Cost {S & H}		<input type="checkbox"/> 6.8(F)(1) >= \$100,000 SGF Fiscal Cost {H & S}
<input type="checkbox"/> 13.5.2 >= \$500,000 Annual Tax or Fee Change {S & H}		<input type="checkbox"/> 6.8(G) >= \$500,000 Tax or Fee Increase or a Net Fee Decrease {S}


Patrice Thomas
Deputy Fiscal Officer