

# LEGISLATIVE FISCAL ESTIMATE

[First Reprint]

## ASSEMBLY, No. 3212

### STATE OF NEW JERSEY 220th LEGISLATURE

DATED: NOVEMBER 15, 2022

#### SUMMARY

**Synopsis:** Establishes Women's Menstrual Health Screening Program and requirements to screen appropriate patients for endometriosis and polycystic ovary syndrome.

**Type of Impact:** State expenditure and revenue increases.

**Agencies Affected:** Department of Health.

#### Office of Legislative Services Estimate

<b>Fiscal Impact</b>	<b><u>Annual</u></b>
<b>State Cost Increase</b>	Indeterminate
<b>State Revenue Increase</b>	Indeterminate

- The Office of Legislative Services (OLS) concludes that Department of Health (DOH) expenditures will increase by an indeterminate amount to establish a Women's Menstrual Health Screening Program, which will screen certain patients, who have reported symptoms of menstrual disorders, for endometriosis and polycystic ovary syndrome (PCOS). Since screening and treatment protocols for endometriosis and PCOS vary by patient, the OLS is unable to determine the amount by which State costs will increase under the bill.
- State revenues will also increase due to a provision in the bill that authorizes the DOH to charge a fee to cover costs related to the screening program, including patient screening, follow-up, and treatment; electronic access to screening results by physicians; and educational initiatives for the public and health professionals. The OLS assumes that the Department of Health will set the fee at an amount sufficient to cover higher State costs related to the screening program activities required pursuant to the bill.

## **BILL DESCRIPTION**

The bill establishes a Women's Menstrual Health Screening Program, which is tasked with screening patients, who have displayed symptoms related to menstrual disorders, for endometriosis and PCOS. The screening program will be housed within the DOH. Pursuant to the bill, the Commissioner of Health is required to use information gathered through the screening process to provide appropriate follow-up and referrals to patients of the screening program who have been diagnosed with endometriosis or PCOS. The bill additionally requires the department to provide education on the screening program to physicians, hospital staff, nurses, and the public.

The bill authorizes the DOH to charge patients who undergo endometriosis and PCOS screening a fee, in an amount sufficient to cover costs for patient screening, follow-up, and treatment; electronic access to screening results for physicians; infrastructure upgrades; and educational outreach regarding the screening program for health professionals and the public.

## **FISCAL ANALYSIS**

### ***EXECUTIVE BRANCH***

None received.

### ***OFFICE OF LEGISLATIVE SERVICES***

The OLS concludes that DOH costs will rise by an indeterminate amount in order to establish a Women's Menstrual Health Screening Program, screen referred patients for endometriosis and PCOS, and provide follow-up care, treatment, or referral to patients, as necessary. The OLS is unable to determine the amount by which State costs will increase under the bill, since screening and treatment protocols for both endometriosis and PCOS vary, depending upon the extent to which a patient's reproductive and other biological systems have been affected.

For context, researchers estimated that annual medical costs for a woman living with endometriosis are \$12,118 higher than for a woman who does not have the condition. According to the Office on Women's Health in the United States Department of Health and Human Services, 11 percent of women ages 15 to 44 years live with endometriosis. The OLS, therefore, anticipates that approximately 184,100 New Jersey residents currently live with endometriosis. Because not every individual living with endometriosis is symptomatic, not all of these individuals would necessarily seek medical treatment, or be referred to the department for screening.

According to the United States Centers on Disease Control and Prevention (CDC), between five and 12 percent of U.S. women live with PCOS, which translates to between 87,000 and 200,800 New Jersey women. As with endometriosis, treatment for PCOS varies with the individual's age, the severity of the condition, and the individual's fertility goals. In 2021, researchers estimated the annual cost in the U.S. to diagnose and treat the immediate and long-term repercussions of PCOS was \$8 billion annually; of this total cost, the researchers estimate that the initial diagnosis of the condition accounted for less than two percent, or \$160 million.

The OLS assumes that the department will set the fee required under the bill in an amount that will support the department's ongoing costs to identify and adopt a standardized screening protocol for endometriosis and PCOS; provide any requisite patient follow-up care, treatment, or referrals, as necessary; support electronic access to screening results by physicians; support routine infrastructure upgrades, as needed; and conduct the public and professional education and training as required pursuant to the bill.

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This legislative fiscal estimate has been produced by the Office of Legislative Services due to the failure of the Executive Branch to respond to our request for a fiscal note.

This fiscal estimate has been prepared pursuant to P.L.1980, c.67 (C.52:13B-6 et seq.).