

OFFICE OF FISCAL ANALYSIS

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HB-6919

AN ACT REQUIRING NEWBORN SCREENING FOR DUCHENNE
MUSCULAR DYSTROPHY.

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 26 \$	FY 27 \$	FY 28 \$
Public Health, Dept.	GF - Cost	None	337,000	319,000
State Comptroller - Fringe Benefits ¹	GF - Cost	None	56,000	56,000
Public Health, Dept.	GF - Potential Revenue Gain	None	See Below	See Below

Note: GF=General Fund

Municipal Impact: None

Explanation

The bill adds Duchenne Muscular Dystrophy (DMD) to the state's newborn screening panel. This will result in a cost to the Department of Public Health's (DPH's) existing Newborn Screening Program of approximately \$337,000 in FY 27 and \$319,000 in FY 28 (and annually thereafter), and an estimated annual cost to the Office of State Comptroller for associated fringe benefits of \$56,000 beginning in FY 27. It is anticipated that DPH will initiate implementation of the programmatic expansion during FY 27, to validate testing methods and prepare for universal testing starting July 1, 2027.

¹The fringe benefit costs for most state employees are budgeted centrally in accounts administered by the Comptroller. The estimated active employee fringe benefit cost associated with most personnel changes is 40.71% of payroll in FY 26.

The costs to DPH reflect the need for two new positions, with a total Personal Services annual cost of \$137,000: (1) a Chemist 2 to perform this new laboratory screening on each year's birth cohort, at an annual salary of \$73,000, and (2) a Health Program Assistant 1 to facilitate the new screening process, at an annual salary of \$64,000. Fringe benefits costs for these positions are \$30,000 and \$26,000, respectively.

Additional costs to DPH are anticipated to total \$200,000 in FY 27 and \$182,000 in FY 28 (and annually thereafter).² The expected FY 27 costs, which continue with inflation into the out years (except where noted), are: (1) DMD testing kits (\$150,000), (2) ancillary laboratory supplies and reagents (\$18,000), (3) education materials regarding DMD symptoms, diagnosis and treatment to be distributed to every gynecologist, obstetrician and pediatrician in the state for provision to their pregnant and postpartum patients (\$7,000), and (4) a one-time FY 27 expense for Laboratory Information Management System software upgrades (\$25,000).

It is uncertain at this time whether any offsetting revenue will be generated due to passage of this bill. DPH is currently authorized to collect a fee of at least \$98 per child from hospitals submitting samples for newborn testing. The exact fee (currently \$113) is set at the discretion of the commissioner, subject to the Secretary of the Office of Policy and Management's approval. If the agency elects to increase the fee to cover the costs of DMD testing, a corresponding General Fund revenue gain, which may be significant in magnitude, would occur.

The Out Years

The DMD program is nominated for inclusion on the federal Recommended Uniform Screening Panel (RUSP), which is a list of disorders that the Secretary of Health and Human Services recommends for states to screen as part of their Newborn Screening Program. If added, future DMD screening costs may be eligible for a federal NBS

²FY 28 other expenses cost reflects an estimated 4% increase in product prices annually, resulting in increased costs for DMD testing kits (\$6,000) and ancillary supplies and reagents (\$1,000).

Propel grant from the Health Resources and Services Administration.

If DMD screening is not added to the RUSP, the annualized ongoing fiscal impact identified above would continue into the future subject to inflation.