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Prime Sponsors: Rep. Buescher, D- Mesa
Sen. Williams, D-Denver

Bill Status: House Health & Human Services
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Title: Concerning increasing availability of cervical cancer immunizations.

This bill represents an opportunity gain for Colorado by expanding access to the cervical cancer vaccine for low-income and uninsured women and girls. Research shows that this vaccine is effective at protecting women from four strands of human papilloma virus (HPV) that can cause cervical cancer and genital warts. This proposal will improve the health of these women and reduce their likelihood of developing cervical cancer.

Background

In June 2006, the U.S. Food and Drug Administration licensed a vaccine against human papilloma virus (HPV). This vaccine protects against two of the 10 HPV types that can lead to the development of cervical cancer. The American Cancer Society estimates that 11,000 new cases of cervical cancer were diagnosed nationwide in 2006 and 3,700 women died from the disease.¹ The Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention recommends that girls and women between the ages of 11-26 receive the vaccination series.² The cost of the three-dose series is about \$360 plus administration costs.

Summary of Legislation

This bill will establish the Cervical Cancer Immunization Program to immunize girls and women against cervical cancer. The Department of Public Health and Environment is directed to investigate ways to make the vaccine available and economical. It encourages federally qualified health centers and local public health agencies to cooperate to provide under-insured girls and women access to the vaccination. CDPHE is directed to pay the local health agency's cost for administering cervical cancer vaccines to under-insured girls.

The Vaccines for Children program will cover the cost for Medicaid-eligible and uninsured girls. As of Jan. 19, 2007, Medicaid benefits covered the vaccine for girls ages 11-20.

The bill adds the cervical cancer vaccine as an optional benefit under Medicaid for women ages 21-26, and mandates individual and group health insurance plans to cover the vaccine by Jan. 1, 2008.

Research and Evidence for Effectiveness

The prescription vaccine Gardasil, produced by Merck and now on the market, is shown to be 100 percent effective in vaccinating against the two HPV types that are responsible for 70 percent of cervical cancer and the two HPV types that cause 90 percent of genital warts.³ Gardasil is a recombinant (non-live virus) vaccine that contains no mercury or thimerosal, a risky additive used in some vaccines.

This bill also establishes the Cervical Cancer Immunization Fund and transfers \$1.5 million from the Prevention, Early Detection and Treatment Fund to this fund. Furthermore, the bill establishes the Cervical Cancer Immunization Awareness Campaign Fund and allows the department to solicit and accept gifts, grants and donations to pay for the public awareness campaign.

Adverse effects include redness and swelling at the injection site (found in one in four patients), soreness or pain at the injection site (eight in 10), low-grade fever (one in 10), and itching (one in 30).⁴ Recent reports of adverse effects such as fainting have not concerned government health officials, who

The Bell Policy Center believes a top priority of the General Assembly should be to expand opportunities for Coloradans to achieve the American Dream. In that spirit, we offer Opportunity Notes on selected bills. Similar to Fiscal Notes, Opportunity Notes reflect our best analysis of whether a bill, if implemented, will expand opportunities for Coloradans.

A POSITIVE analysis means our research suggests a bill will expand opportunity in a cost effective manner.

A NEGATIVE analysis means our research suggests the measure will restrict opportunities or will not cost-effectively achieve its goals.

determined that no additional warning labels are needed.⁵

A second HPV vaccine, Cervarix, is under development by GlaxoSmithKline and is in phase III of clinical trials. In phase II trials, Cervarix was shown to be 100 percent effective in vaccinating against the same two cancer-causing HPV strands as Gardasil.⁶ GlaxoSmithKline is expected to file a new drug application shortly.

While the CDC recommends vaccination, it also reminds women that regular pap tests are important. The agency found that most women who develop invasive cervical cancer failed to have routine pap exams.

Estimate of Impact and Benefits

The National Cancer Institute estimates the total costs nationwide in 2004 for treating cervical cancer was \$1.7 billion. The average Medicare payment per individual in the first year of treatment is \$20,100.⁷ In 2006, 100 Colorado women were diagnosed with new cases of cervical cancer.⁸ By preventing cervical cancer, Colorado could save millions in Medicaid payments over the long term.

At present, 20 million men and women in the United States are infected with HPV. By age 50, at least 80 percent of women will have an HPV infection. More than half of all sexually active men will have HPV at some time in their lives.⁹ Vaccinating young girls and women against HPV can significantly reduce their risks of developing cervical cancer or genital warts.

HB07-1301 expands access to a potentially life-saving vaccine to low-income and uninsured women and girls who may not be able to otherwise afford the vaccine. Expanding coverage of the cervical cancer vaccine can save lives.

End notes

Note: Underscored titles indicate links to the documents online. To get an electronic version of this Opportunity Note with active hyperlinks, please visit our website, www.thebell.org.

¹ American Cancer Society, [Cancer Facts and Figures 2006](#).

www.cancer.org/downloads/STT/CAFF2006PW_Secured.pdf

² Centers for Disease Control and Prevention, [HPV Vaccine Questions and Answers](#).

www.cdc.gov/std/hpv/hpv-vaccine.pdf

³ Ibid.

⁴ Moore, S. L., & Seybold, V. K. (January 2007). HPV Vaccine. *Clinicians Review*, Vol 17, No.1.

⁵ CNN News, Feb. 21, 2007.

www.cnn.com/2007/HEALTH/02/21/cancer.vaccine.ap/index.html

⁶ Moore, S. L., endnote No. 4.

⁷ National Cancer Institute, Cancer Trends Progress Report – 2005 Update.

⁸ American Cancer Society, end note No. 1.

⁹ Centers for Disease Control and Prevention, [Genital HPV Infection – CDC Fact Sheet](#)

www.cdc.gov/std/hpv/STDFact-HPV-and-men.htm