

December 2015

An Economic Assessment of the Cost of Cancer in Texas  
and the Benefits of the  
Cancer Prevention and Research Institute of Texas (CPRIT)  
and its Programs:  
**2015 Update**

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## Introduction

The human cost of cancer is tragically high, as the disease is among the leading causes of premature death and inflicts enormous suffering on those afflicted. It also takes an enormous financial toll on individuals, families, hospitals, state and local governments, insurance providers, and society as a whole. Cancer research and prevention/screening can reduce the severity of its effects, both in terms of human health and the economy. Treatment costs can be decreased through earlier detection, and improving treatment outcomes benefits society through enhancing productivity of those affected by cancer. In addition, research activity can serve as a catalyst for business development in related industries (such as biomedicine).

Since 2010, the Cancer Prevention and Research Institute of Texas (CPRIT) has served as a crucial aspect of improving cancer outcomes. CPRIT has helped attract leading cancer research scientists to Texas (including members of the prestigious National Academy of Sciences), funded research projects which have resulted in thousands of publications and a number of new patents, and provided grants for screening and related education which are improving access to lifesaving testing for some of the state's most vulnerable populations. The most recent cancer statistics indicate that incidence and outcomes in Texas are improving relative to those in the nation as a whole, due in part to CPRIT efforts.

**CPRIT is an Important Resource for Cancer Prevention, Screening, and Research**  
**In addition to their positive effect on health and wellbeing, these activities generate sizable economic benefits.** The Perryman Group (TPG) has quantified the cost of cancer in Texas and the economic benefits of CPRIT for several years. This report updates the findings from TPG's analysis utilizing the most recent data regarding cancer incidence and results to date from CPRIT grants.

- The **cost of cancer in Texas as traditionally measured is about \$31.3 billion in 2015 (about \$1.1 billion lower than in 2014), with total losses (including spinoff effects) of an estimated \$77.3 billion in output and over 818,000 jobs.**
- The current total annual impact of all CPRIT operations, prevention/screening and research programs (including initial outlays and multiplier effects) includes \$762.4 million in output (real gross product) in 2015 as well as 11,342 jobs. When all secondary benefits are considered, these values rise to \$5.4 billion in output and over 60,160 jobs.
- This incremental business activity generates taxes for the State and local governments. For **Texas, annual tax receipts associated with CPRIT grants and programs (including downstream effects) total \$257.5 million in 2015; local public entities receive \$119.8 million.** Over the ten-year life of the current commitment, these incremental taxes are expected to total \$3.6 billion for the State and \$1.7 billion for local governments.

- These benefits are explained more fully in subsequent sections and the Appendices to this report.

<b>Summary of Economic Benefits</b> <b>Every Dollar Invested Through CPRIT Returns:</b> (Including Initial Outlays and Secondary (Downstream) Effects)	
\$22.37	In Treatment Cost Savings and Resulting Economic Benefits through Earlier Detection from Prevention/Screening Activity in 2015
\$33.45	In Economic Activity (Total Expenditures) in 2015
\$16.44	In Output (Real Gross Product) in 2015
\$9.89	In Personal Income in 2015
\$4.63	In Retail Sales in 2015
\$1.90	In State Tax Receipts as of the 10 <sup>th</sup> Year of Operation (assuming stabilized levels of awards)
\$0.90	In Local Government Tax Receipts as of the 10 <sup>th</sup> Year of Operation (assuming stabilized levels of awards)
Source: The Perryman Group	

## Report Approach

An approach consistent to prior years was used where possible in this 2015 update along with some significant additions. At this time, the first CPRIT grants have been in place for more than five years. Recipients have reported progress, hiring, matching funds, and other key performance metrics. Firms have also located to Texas as a result of CPRIT efforts. This information was used in assessing the economic impacts related to research to the extent possible and, as in last year's update, were used to validate model results. The major components of The Perryman Group's analysis include the following:

The **economic cost of cancer** in terms of Texas business activity including losses stemming from treatment, morbidity, and mortality as well as the associated spillover effects are initially estimated. Data regarding the numbers of Texans with cancer and the associated costs for direct medical expenses, morbidity costs, and mortality are the subject of reports by entities such as the National Institutes of Health, the American Cancer Society, the National Cancer Institute (Centers for Disease Control (CDC)), and the Texas Cancer Registry (Texas Department of State Health Services). The projected costs of cancer treatment in 2020 and an estimated breakout of cancer expenditures by payer in 2014 are also given: both of these elements are new features of the current report.

The **overall effect of CPRIT operations** on business activity in Texas (including multiplier effects) is estimated using input data regarding direct expenditures and operations employment at the Institute.

The **positive economic benefits of CPRIT-supported cancer prevention and screening programs** are also assessed, including both the increase in business activity due to the screenings themselves and the associated benefits from improved health. The effects of matching funds generated by CPRIT programs were also included. This aspect of the analysis made use of extensive updates of prior underlying research on the rates of return to prevention and screening efforts, thus resulting in somewhat greater measured effects.

**Economic returns on research supported by the Institute** (including the effects related to the specific outlays, actual and anticipated recruitment efforts for high quality scholars in relevant areas, typical returns on medical research investments, and spinoff companies that surface from such endeavors) were also evaluated. Again, associated matching funds are also incorporated into the analysis.

Some illustrative scenarios related to **potential economic development and social gains** stemming from the Institute's role as a catalyst for incremental business activity are provided, as well as others demonstrating the economic value of increased quality of life, longevity, and productivity from improved outcomes.

The **economic impact** of continuing CPRIT operations and initiatives beyond its original ten-year period is also evaluated. This projection, which reveals notable potential benefits, was not offered in prior reports. The Appendices provide a detailed discussion of all aspects of the report, including methodology and disaggregated results.

## The Economic Cost of Cancer in Texas

Cancer affects the longevity, quality of life, and finances of individuals suffering with the illness. Costs associated with cancer include direct medical outlays for treatment and care as well as indirect costs such as disease-related work disability or premature mortality. Prevention, early detection, effective treatment, and medical advances to minimize the consequences of the disease are vital national and, indeed, global priorities.

### Millions of Americans are Dealing with Cancer

**Despite advances in many aspects of cancer prevention and treatment, the number of Americans diagnosed with the disease remains very high.** One factor in the recent upward trend is the aging of the US population, as cancer incidence increases among older age groups.

- The American Cancer Society estimates that there will be about 1,658,370 new cases of cancer (848,200 male and 810,170 female) and 589,430 deaths from cancer (312,150 male and 277,280 female) in the US in 2015. The number of new cases expected in 2015 is slightly lower than the number for 2014, while expected cancer deaths shows a modest increase over 2014.<sup>1</sup>
- In Texas, a total of 109,053 new cases of cancer are expected in 2015 (56,265 male and 52,788 female), with 42,255 cancer deaths projected.<sup>2</sup> The number of new cases and expected deaths show a marked reduction from 2014, with new cases about 10,000 fewer than in 2014 and deaths about 1,900 fewer. These significant reductions are likely the result of multiple factors and will be difficult to sustain in light of the emerging demographic patterns in the population of the state. It is likely, that some of this improvement is attributable to the CPRIT initiatives which have now been in place for several years and are beginning to have notable cumulative effects. As with the nation, cancer is the second leading cause of death in the state after cardiovascular disease.<sup>3</sup>

### Cancer Costs are also Rising

**Apart from the extremely high human cost, cancer causes economic harms to affected individuals, businesses, and society as a whole through shortened life spans, lost productivity, increased health care expenditures, and premature mortality.**

<sup>1</sup> *Cancer facts & figures 2015.* (2015). American Cancer Society.

<sup>2</sup> *Expected new cancer cases and deaths by primary site, Texas, 2015.* (December 2014). Cancer Epidemiology and Surveillance Branch, Texas Department of State Health Services.

<sup>3</sup> *Cancer facts & figures 2015.* (2015). American Cancer Society.

- Although incidence rates are modestly improving, **direct medical costs and morbidity and mortality losses (as traditionally measured) in the state totaled an estimated \$31.3 billion in 2015**, down modestly from \$32.4 billion in 2014 and up from \$30.4 billion two years ago (according to TPG's update of existing information from the National Institutes of Health<sup>4</sup> and a study of costs in Texas.<sup>5</sup> In 2010, cancer treatment costs in Texas were \$11.5 billion in current dollars and \$12.4 billion in constant 2015 dollars. By 2020, treatment costs are expected to be \$18.1 billion in current dollars (a 58.0 % rise) and \$16.4 billion in constant 2015 dollars (a 31.6% increase). The projected rates of increase at the national level are even higher.

## Cancer Treatment Costs Affect both the Private Sector and the Public Sector

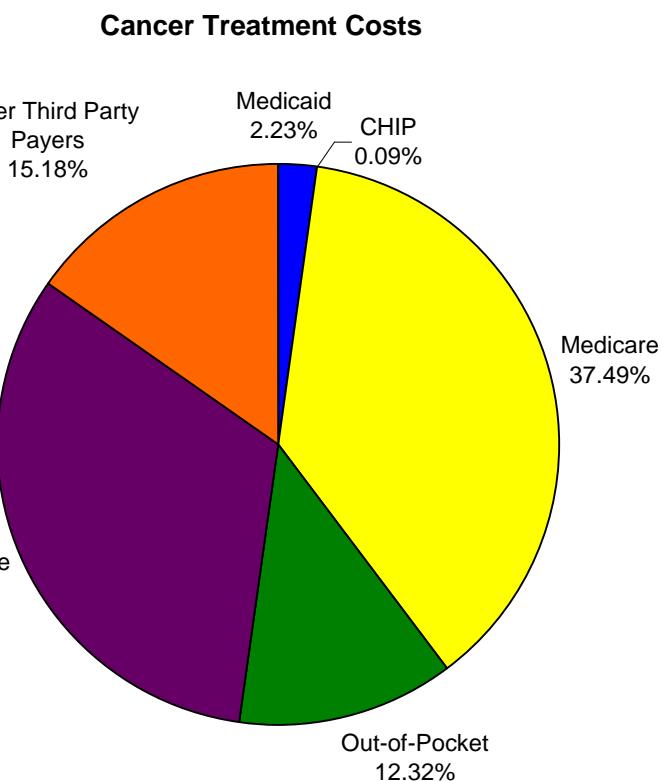
**Costs of cancer treatment are covered by private insurance companies, social programs such as Medicare and Medicaid, and by the patients themselves.**

- The Perryman Group estimates that the cost of cancer treatment to private insurance companies in 2014 was \$4.6 billion.
- The cost of treating cancer in Texas paid through Medicaid in 2014 was \$312.9 million.
- The CHIP program spent some \$13.3 million treating cancer in 2014.
- Costs of cancer treatment to Medicare totaled an estimated \$5.3 billion.
- The cost of treating cancer to other third party payers in 2014 was determined to be about \$2.1 billion.
- The out-of-pocket cost to cancer patients in 2014 was approximately \$1.7 billion.<sup>6</sup>

<sup>4</sup> The National Institutes of Health (NIH) estimated the total overall cost of cancer in 2010 (the latest year for which such information is available) to be \$263.8 billion including direct medical costs of \$102.8 billion (including the total of all health expenditures), indirect morbidity costs (the cost of lost productivity due to illness) of \$20.9 billion, and indirect mortality costs (the cost of lost productivity due to premature death) of \$140.1 billion. See *Cancer facts & figures 2011*. (2011). American Cancer Society.

<sup>5</sup> A study directed by the Texas Department of State Health Services (DSHS) and conducted by scholars at the University of Texas Medical Branch (UTMB) found that the total cost of cancer in the state was roughly \$21.9 billion in 2007, with \$10.0 billion in direct medical costs and \$11.8 billion in indirect costs from lost productivity due to cancer morbidity and mortality. See Philips, B.U., et al. (2009, March). *The cost of cancer in Texas 2007*. Department of Preventive Medicine and Community Health; Texas Medical Branch at Galveston.

<sup>6</sup> Medicaid and CHIP cancer expenditure data from AHQP Claims Universe, Texas Medicaid and Healthcare Partnership (TMHP); Enc\_Best Picture Universe, TMHP; prepared by Strategic Decision Support, Texas Health and Human Services Commission, December 2015. All other expenditures are approximations by The Perryman Group based on best available data.



Source: Medicaid and CHIP cancer expenditure data from AHQP Claims Universe, Texas Medicaid and Healthcare Partnership (TMHP); Enc\_Best Picture Universe, TMHP; prepared by Strategic Decision Support, Texas Health and Human Services Commission, December 2015. All other expenditures are approximations by The Perryman Group based on best available data.

## The Cost of Cancer Goes Beyond Initial Effects

**Several studies have clearly portrayed the very large economic losses associated with cancer. While many of these are excellent analyses, they fail to capture numerous “multiplier” effects associated with the disease and, thus, represent only a portion of the overall toll on business activity (only the initial effect of the various categories of cost).**

- Several years ago, The Perryman Group developed a more comprehensive measure of the cost of cancer which includes losses stemming from treatment, morbidity, and mortality as well as the associated foregone spillover effects.
- Most studies of cancer costs reflect only the initial effect of direct medical outlays for treatment and care and indirect costs such as disease-related work disability or premature mortality are not included. However, these losses, in turn, generate further reductions in business activity. This more comprehensive measure is quantified in the approach utilized by The Perryman Group.

## Measuring Economic Impacts

Any economic stimulus, whether positive (such as direct spending, investments, or corporate activity) or negative (such as lost productivity due to disease) generates multiplier effects throughout the economy. In this instance, economic costs of cancer include not only the initial incidence of costs, but also the subsequent rounds of economic activity which are forgone. Economic benefits of cancer research and prevention/screening activities include increased research spending, commercialization of discoveries, enhanced screening programs, higher productivity stemming from better health outcomes, and more. (These channels of benefits are described within the report and the accompanying Appendices.) Once the direct stimulus was quantified, the associated multiplier effects were measured.

The Perryman Group's input-output assessment model (the US Multi-Regional Impact Assessment System, which is described in further detail in the Appendices to this report) was developed by The Perryman Group some 30 years ago and has been consistently maintained and updated since that time; it has been used in hundreds of analyses for clients ranging from major corporations to government agencies. The system uses a variety of data (from surveys, industry information, and other sources) to describe the various goods and services (known as resources or inputs) required to produce another good/service. This process allows for estimation of the total economic impact (including multiplier effects) of CPRIT programs and related activity. An associated fiscal model allows for estimation of tax receipts to state and local entities. The submodels used in the current analysis reflect the specific industrial composition and characteristics of the Texas economy and its various counties, metropolitan areas, regions, and legislative districts.

These total economic effects are quantified for key measures of business activity:

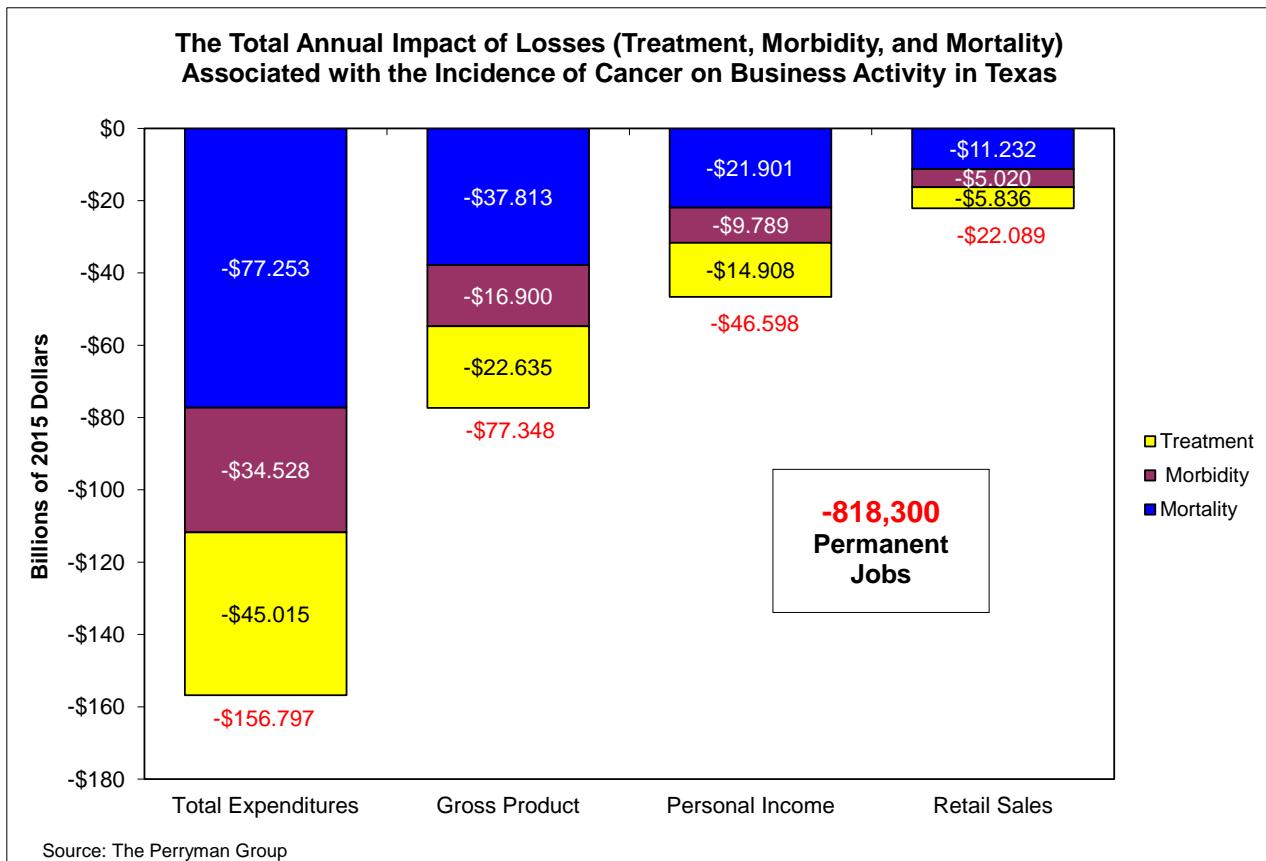
- **Total expenditures** (or total spending) measure the dollars changing hands as a result of the economic stimulus.
- **Gross product** (or output) is production of goods and services that will come about in each area as a result of the activity. This measure is parallel to the gross domestic product numbers commonly reported by various media outlets and is a subset of total expenditures.
- **Personal income** is dollars that end up in the hands of people in the area; the vast majority of this aggregate derives from the earnings of employees, but payments such as interest and rents are also included.
- **Job gains** are expressed as (1) person-years of employment (one person working for one year) for temporary projects (such as construction of a facility) or cumulative assessments over time or (2) permanent jobs when evaluating ongoing annual effects.

Dynamic State and local government revenue reflect tax receipts stemming from the increase in total economic activity. Monetary values were quantified on a constant (2015) basis, which eliminates inflationary effects and allows comparison across various time periods. See the Appendices to this report for additional information regarding the methods and assumptions used in this analysis.

## Cancer Costs the Texas Economy \$156.8 Billion per Year

The Perryman Group's analysis indicates a total cost to the Texas economy of almost \$156.8 billion in reduced annual spending, \$77.3 billion in output losses per annum, and 818,300 lost jobs from cancer treatment, morbidity, and mortality and the associated spillover effects.

- These amounts are down (with the exception of jobs) from last year's estimated total cost of \$161.7 billion in spending, \$79.7 billion in output, and 785,865 jobs. These totals represent **approximately 5% of the total Texas economy** (4.5% of output, 4.7% of income, and 5.0% of employment).
- **The yearly loss in State fiscal revenues is some \$5.9 billion** (down from \$6.1 billion last year), while losses to local governments include about **\$2.5 billion per annum**.
- **Losses are spread across all regions of Texas, and are concentrated in the state's most populous areas.**



## COST OF CANCER BY COUNCIL OF GOVERNMENTS REGION

ECONOMIC COST OF CANCER INCLUDING DIRECT MEDICAL EXPENSES AND PREMATURE MORBIDITY AND MORTALITY



ANNUAL EFFECT ON BUSINESS ACTIVITY		
	GROSS PRODUCT (Billions of 2015 Dollars)	EMPLOYMENT (Permanent Jobs)
Panhandle	(\$1,420)	(15,187)
South Plains	(\$1.322)	(14,795)
Nortex	(\$1.037)	(11,180)
North Central Texas	(\$19.021)	(196,190)
Ark-Tex	(\$1.130)	(13,355)
East Texas	(\$3.805)	(41,192)
West Central Texas	(\$1.466)	(15,889)
Rio Grande	(\$2.423)	(26,421)
Permian Basin	(\$1.339)	(13,738)
Concho Valley	(\$0.616)	(6,616)
Heart of Texas	(\$1.469)	(16,724)
Capital Area	(\$4.017)	(44,582)
Brazos Valley	(\$0.890)	(10,019)
Deep East Texas	(\$1.659)	(19,448)
South East Texas	(\$1.650)	(18,903)
Houston-Galveston Area	(\$18.315)	(176,645)
Golden Crescent	(\$0.766)	(8,336)
Alamo Area	(\$7.345)	(81,508)
South Texas	(\$0.560)	(6,274)
Coastal Bend	(\$2.154)	(22,778)
Lower Rio Grande Valley	(\$2.417)	(28,488)
Texoma	(\$0.847)	(9,917)
Central Texas	(\$1.241)	(14,904)
Middle Rio Grande	(\$0.439)	(5,212)
Border Region	(\$5.841)	(66,423)
<b>TOTAL STATE</b>	<b>(\$77.348)</b>	<b>(818,300)</b>
Note: Border Region includes Rio Grande, Terrell County, Middle Rio Grande, South Texas, and Lower Rio Grande Valley		
Source: The Perryman Group		

## Screening and Prevention Can Yield Substantial Savings

### It is far less expensive to screen for cancer and treat it in its early stages.

- Detecting and treating cancer in earlier stages not only improves outcomes, but can also cost less compared to treating cancer in its latter stages.
- Not only are treatment expenses likely to be lower for early-stage diagnoses, but also morbidity and mortality losses are reduced.
- The Perryman Group's analysis indicates that **every \$1 spent through CPRIT for screening/prevention leads to \$22.37 in treatment cost savings and resulting economic benefits through earlier detection.<sup>7</sup>**
- The Perryman Group's analysis also estimates that **every \$1 spent on screening/prevention saves \$1.86 in direct health spending.**

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<sup>7</sup> The reported benefits from screening and prevention are higher this year than in the past based on recent and more comprehensive research which illustrates greater rates of return on prevention and screening than prior evidence. See, for example, Boland, Mairin and Joan Murphy, The Economic Argument for Prevention of Ill-health at Population Level, For Working Group on Public Health Policy Framework, May 2012.

## The Economic Impact of CPRIT and its Programs

The overall effects of CPRIT and its various initiatives extend well beyond the initial stimulus and impacts business activity throughout the supply chain. Some of these benefits are quantified below.

### CPRIT Investments Generate Economic Activity as Well as Progress toward New Discoveries

Even beyond the potentially life-changing influence of spending to reduce the incidence and severity of the disease, this **investment in research, screening, and related activities generates substantial economic impacts**. Moreover, the investment has the potential to reduce the cost of cancer through improving outcomes.

- Returns on investments in medical research include jobs created in the private sector, health care costs saved, the value of increased longevity, the value of reduced morbidity and disability, and the benefits of newer medicines and therapies.
- Job creation occurs not only directly through the scientists and staff in the research facilities, but also indirectly through the provision of business services needed by those institutions and other multiplier effects.
- Many studies over an extended period of time support the conclusion that investing in medical and cancer research can yield returns far in excess of initial outlays. Texas is already beginning to see tangible job gains and other benefits such as attracting top-tier research talent.

### CPRIT Operations and Spending Were Linked to 11,342 Jobs in Texas in 2015

The direct outlays and related “multiplier” effects emanating from CPRIT operations and programs generated a sizable increase in business activity in Texas including \$762.4 million in output (gross product) and 11,342 jobs during fiscal year 2015.

- These economic benefits stem from operations, prevention and screening, and research programs. They are consistent with the results reported by grant recipients and other data now available regarding CPRIT initiatives.
- Fiscal benefits are also significant, as noted in the table below.

<b>The Current Impact of CPRIT Direct Operations, Prevention and Screening, and Research Programs on Texas Business Activity and Tax Receipts</b> <b>(Monetary Values in Millions of Constant 2015 Dollars)</b>				
<b>ECONOMIC BENEFITS</b>				
	<b>Operations</b>	<b>Prevention &amp; Screening</b>	<b>Research</b>	<b>TOTAL</b>
Total Expenditures	\$23.7	\$108.7	\$1,331.1	<b>\$1,463.5</b>
Gross Product	\$12.0	\$59.2	\$691.1	<b>\$762.4</b>
Personal Income	\$8.2	\$41.4	\$478.8	<b>\$528.4</b>
Retail Sales	\$3.1	\$15.5	\$182.1	<b>\$200.7</b>
Employment (Permanent Jobs)	113	776	10,452	<b>11,342</b>
<b>FISCAL BENEFITS</b>				
State (Texas)	\$0.6	\$2.9	\$35.3	\$38.8
Local Governmental Entities Throughout the State	\$0.3	\$1.7	\$21.6	\$23.5
Note: Columns may not add to total due to rounding. Source: The Perryman Group				

## Secondary Benefits Enhance the Positive Effect of the Institute

**Even beyond these substantial gains in business activity, CPRIT programs lead to secondary (downstream) benefits such as improved outcomes stemming from screening and prevention and research.**

- Screening can help reduce cancer incidence and severity. TPG estimated the total annual net outcomes-related benefits from screening and prevention supported by CPRIT to be \$308.8 million in output (gross product) and 3,266 jobs in 2015 (on a net present value basis assuming typical outcomes from available academic studies<sup>8</sup>). (Effects over 10 years are included in the Appendices to this report.)
- The economic benefits of CPRIT-funded research activity compound over time. Current estimates of these secondary effects stemming from research include \$4.3

<sup>8</sup> As noted above, these estimates are notably higher than in prior years as a result of more specific recent research. See, for example, Boland, Mairin and Joan Murphy, The Economic Argument for Prevention of Ill-health at Population Level, For Working Group on Public Health Policy Framework, May 2012.

billion in output and 45,555 jobs in 2015. These gains are expected to grow substantially in future years as programs continue and benefits cumulate (as indicated in the Appendices).

## The Overall Total Current Impact of CPRIT Operations (including Secondary Effects) Includes a Gain of Some 60,163 Jobs in Texas

**Adding the economic benefits of CPRIT operations, prevention/screening programs, research, outcomes-based prevention/screening, and secondary research effects yields a total gross impact of the Institute's operations of almost \$10.9 billion in annual spending.**

- The current total annual impact of all operations, prevention/screening, and research programs (including initial outlays and downstream effects) associated with CPRIT on Texas business activity was found to be \$5.4 billion in output and 60,163 jobs. Fiscal benefits are also substantial, as noted in the table below.
- Because of the cumulative nature of research gains, these benefits increase over time. Even when other potential uses for State funding of CPRIT are considered, the net economic benefits remain substantial (as indicated in the Appendices). Over an extended time horizon, CPRIT and the research funding it provides will likely generate fiscal receipts totaling a substantial multiple of the commitment of public resources (in addition to the notable economic and health benefits).

<b>The Overall Total Annual Impact of CPRIT Operations, Prevention/Screening, and Research Programs on Texas Business Activity and Tax Receipts (Including Direct Outlays with Multiplier Effects as Well as Secondary Effects)</b>	
<b>(Monetary Values in Millions of Constant 2015 Dollars)</b>	
<b>ECONOMIC BENEFITS*</b>	
Total Expenditures	\$10,917.8
Gross Product	\$5,408.8
Personal Income	\$3,322.8
Retail Sales	\$1,510.5
Employment (Permanent Jobs)	60,163
<b>FISCAL BENEFITS</b>	
State (Texas)	\$257.5
Local Governmental Entities Throughout the State	\$119.8

\*Based on budgeted operations and reported awards in fiscal year 2015.  
Source: The Perryman Group

## CPRIT's Benefits Extend Beyond these Economic Effects

The ultimate goal of CPRIT is reducing cancer incidence and the associated high human and economic costs, and a major reduction in incidence/severity would yield substantial economic benefits. In addition, the research activity supported by CPRIT can serve as a catalyst for economic development.

- If CPRIT's screening/prevention programs, research advances, and other initiatives reduce the incidence of cancer over time to equal the average of current levels observed in the five states with the lowest incidence and death rates, notable economic benefits would be realized. The Perryman Group estimates that **the gains in Texas stemming from a substantial reduction in cancer incidence by 2040 would include \$12.4 billion in gross product and about 131,380 permanent jobs.**<sup>9</sup> **Fiscal benefits of such a reduction in cancer incidence include an estimated \$696.5 million to the State each year and \$323.3 million to local government entities (in constant**

<sup>9</sup> Note the impacts are less than previously reported due to the fact that Texas incidence rates are improving relative to the other states, which is likely due in part to the efforts and successes of CPRIT.

**2015 dollars).** Moreover, these benefits do not include the obvious gains in quality of life and would not be restricted to Texas; they would bring better outcomes throughout the country and, indeed, the entire world.

- CPRIT programs and grants are helping attract key researchers and companies to Texas. During the last year, four companies who received grants relocated to Texas. They include Essa Pharma, Immatics Biotechnologies, Armada Pharmaceuticals, and Beta Cat Pharmaceuticals. Recipients of CPRIT grants also published over 1,000 articles and received or applied for over 100 patents in the last year. The Institute's role as a potential catalyst for development of Texas' biomedical industries can help establish the Lone Star State as a center for such development. The economic gains from such economic development would be significant. The Perryman Group estimates that **if Texas achieves a concentration in the biomedical industry (pharmaceuticals and medical equipment) by 2040 equivalent to that of the US, incremental gains would include \$18.1 billion in annual gross product and almost 167,690 jobs. If the state's concentration in the biomedical industry in 2040 reached a level equivalent to California, the incremental economic benefits would include \$24.2 billion in gross product each year and about 220,000 jobs.**<sup>10</sup>

## Economic Effects of Extending CPRIT and Its Programs an Additional Ten Years

**As has been illustrated, CPRIT plays a vital role in fighting cancer and generates substantial economic benefits to the state. The impact of continuing CPRIT's programs with sustainable levels of funding for another 10 years beyond its initial mission would be significant.**

(Conversely, should CPRIT and its programs not be extended these impacts would be viewed as negative impacts to the state.)

- The Perryman Group estimates the anticipated gross cumulative ten-year benefits of extending CPRIT and all of its programs include over **\$96.0 billion in gross product and some 1,045,500 person-years of employment**. Note that these gains do not include the residual effects of the initial decade of activity, as those will be enjoyed irrespective of whether the program is renewed.
- Even when other potential uses for State funding of CPRIT are considered, the net cumulative economic benefits over the additional 10 years remain substantial (as indicated in the Appendices).

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<sup>10</sup> Note the impacts are less than previously reported due to Texas improving in the biomedical production area relative to the US and California, which is likely due in part to the efforts and successes of CPRIT.

**The Anticipated Gross Cumulative Ten-Year Impact of Extending  
CPRIT and All of Its Programs at Sustainable Levels of Funding for  
Ten Years on Texas Business Activity and Tax Receipts (Including  
Direct Outlays with Multiplier Effects as Well as Secondary Effects)**  
**(Monetary Values in Billions of Constant 2015 Dollars)**

**ECONOMIC BENEFITS\***

Total Expenditures	\$194.4
Gross Product	\$96.0
Personal Income	\$58.5
Retail Sales	\$26.9
Employment (Person Years)	1,045,513

**FISCAL BENEFITS**

State (Texas)	\$4.9
Local Governmental Entities Throughout the State	\$2.3

\*Assumes CPRIT and all of its programs are continued for an additional ten years beyond the original authorization. All funding levels are sustained at the stabilized levels currently anticipated for the final year of the current program. Measured impacts do not include the residual benefits of the initial ten-year commitment, since those gains will accrue irrespective of whether or not the extension occurs.

Source: The Perryman Group

## Conclusion

### The Cancer Prevention and Research Institute of Texas Plays a Crucial Role in the War on Cancer

- Through its operations, screening/prevention efforts, and research programs, CPRIT is helping reduce the extremely high human and economic costs of cancer.
- CPRIT is also generating sizable economic stimulus including some \$5.4 billion in output (gross product) and more than 60,160 jobs in 2015 (when multiplier and secondary effects are included).
- Moreover, the Institute's efforts to improve outcomes related to cancer prevention and treatment can lead to a significant reduction in cancer incidence and severity over time and be a catalyst to biomedical development in Texas.

### The Institute's Positive Impact Represents an Excellent Return on Fiscal Resources

- Research enabled by grants funded through CPRIT is already bearing fruit, with leading researchers as well as companies coming to the state, matching funds being attracted, and findings being published in leading journals. Empirical evidence shows that medical research and prevention programs can reduce cancer incidence and enhance outcomes.
- Reductions in treatment expenses, morbidity, and mortality stand to bring notable economic benefits.
- The economic activity stemming from CPRIT operations and programs generates tax receipts over time which exceed the investment of resources. The significance of CPRIT activities continues to expand and will only accelerate in the future, particularly if its mission is extended beyond the original authorization period.