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TESTIMONY
TRACI FILIPPI
NEVADA OFFICE OF TRAFFIC SAFETY
BEFORE THE NEVADA ASSEMBLY TRANSPORTATION COMMITTEE
RE: AB 161
PRIMARY SEAT BELT LAW
MARCH 6, 2003

Overview

The current NRS provides for the issuance of a citation for not wearing a seat belt; however, our law is secondary, in that motorists must be stopped for another reason in order to receive a seat belt citation. Nevada's secondary policy is not adequately protecting our citizens' safety.

Nevada is also no longer eligible for certain federal highway funds based on its seat belt usage rate. Along with this, Nevada is paying out unnecessary additional dollars as a result of the high medical and economic costs of unrestrained occupants in motor vehicle crashes (MVC's).

Background Data

Thank you, Madame Chairwoman, for allowing me to testify today.

The National Center for Statistics and Analysis (NCSA) reports that belt use was estimated to be 78% for primary law states and 67% for secondary states in 2001. Currently, there are 19 states with primary enforcement of seat belt laws in passenger vehicles. It is estimated that if all 50 states had had primary seat belt laws in 2001, an additional 2,000 lives would have been saved on our nation's roadways.¹

NCSA reports that the best measure of improvement in belt usage is the conversion rate. The conversion rate is defined as the percentage of non-seat belt users that convert to seat belt users. There has historically been a better conversion rate for states with a primary law rather than secondary laws simply because enforcement has been proven to make more of an impact in raising the usage rate than other efforts such as public service announcements and educational campaigns.

The table below shows the difference between the primary and secondary states in both usage and conversion rates for 2000 and 2001.

¹ NCSA/NHTSA Research Note, October 2002, DOT HS 809 501

Primary States				Secondary States			
State	2000 Use Rate	2001 Use Rate	Conversion Rate	State	2000 Use Rate	2001 Use Rate	Conversion Rate
Alabama	70.6	79.4	30%	Alaska	61	62.6	4%
California	88.9	91.1	20%	Arizona	75.2	74.4	-3%
Connecticut	76.3	78	7%	Arkansas	52.4	54.5	4%
Washington DC	82.6	83.6	6%	Colorado	65.1	72.1	20%
Georgia	73.6	79	20%	Delaware	66.1	67.3	4%
Hawaii	80.4	82.5	11%	Florida	64.8	68.5	13%
Indiana	62.1	67.4	14%	Idaho	58.6	60.4	4%
Iowa	78	80.9	13%	Illinois	70.2	71.4	4%
Louisiana	68.2	68.1	0%	Kansas	61.6	60.8	-2%
Maryland	85	82.9	-14%	Kentucky	60	61.9	5%
Michigan	83.5	82.3	-7%	Maine	*	*	*
New Jersey	74.2	77.6	13%	Massachusetts	50	56	12%
New Mexico	86.6	87.8	9%	Minnesota	73.4	73.9	2%
New York	77.3	80.3	13%	Mississippi	50.4	61.6	23%
North Carolina	80.5	82.7	11%	Missouri	67.7	67.9	1%
Oklahoma	67.5	67.9	1%	Montana	75.6	76.3	3%
Oregon	83.6	87.5	24%	Nebraska	70.5	70.2	-1%
Texas	76.6	76.1	-2%	Nevada	78.5	74.5	-19%
Puerto Rico	87	83.1	-30%	New Hampshire	*	*	*
Primary Average	78.03	79.91	9%	North Dakota	47.7	57.9	20%
				Ohio	65.3	66.9	5%
				Pennsylvania	70.7	70.5	-1%
				Rhode Island	64.4	63.2	-3%
				South Carolina	73.9	69.6	-16%
				South Dakota	53.4	63.3	21%
				Tennessee	59	68.3	23%
				Utah	75.7	77.8	9%
				Vermont	61.6	67.4	15%
				Virginia	69.9	72.3	8%
				Washington	81.6	82.6	5%
				West Virginia	49.8	52.3	5%
				Wisconsin	65.4	68.7	10%
				Wyoming	66.8	*	*
				Secondary Average	64.72	67.17	6.90%

Note: The Conversion Rate measures the percentage of nonusers converted to users.

Nevada experienced a negative 19% conversion rate from calendar year 2000 to 2001. This means that in 2000 Nevada had approximately 22 non-users of belts out of every 100 motorists. In 2001 this increased to about 26 non-users for every 100. All non-users are at an increased risk of death or injury from a motor vehicle crash. In 2001, Nevada had 156 motor vehicle occupant fatalities that were not buckled in. NHTSA has estimated that 45% of these would have survived had they been wearing their seat belt. Seventy (70) of these people would have survived if they'd been wearing a seat belt.

During Nevada's "No Exceptions, No Excuses" traffic safety campaign in May 2002, highly visible traffic enforcement and media messages were used to educate the public on the value of wearing a seat belt. Pre-campaign survey results showed a 70% seat belt usage rate; at the end of the campaign, this had increased 6 percentage points to 76%, resulting in an estimated 10 lives saved. Ten lives equates to over \$9.7 million in economic cost savings.

During this major seat belt campaign, the Office of Traffic Safety established a toll free phone number, a web site contact, and conducted telephone surveys seeking citizen input about the seat belt effort. Not one negative comment was received from the public through these devices that solicited comment on the campaign.

However, despite these continued traffic enforcement campaigns, and increased awareness of the value of buckling up through education, Nevada is still struggling to increase its seat belt use rates. Nevada's growth rate is such that it is in a continual education mode; however, it's a mixed message to say "wear your seat belt, . . . but we cannot stop you if you don't."

The argument for enactment of a primary seatbelt law is validated, when considering conversion rates and their translation into number of lives that were not lost, . . . thousands of injuries requiring hospitalization avoided, . . . and millions of dollars saved in economic impact.

Economic Cost Impact

The National Highway Traffic Safety Administration, or NHTSA, estimates the U.S. economic costs of an average roadway fatality at \$977,000, and the cost for a critical injury crash survivor at \$1.1 million (as of calendar year 2000). For just one year, NHTSA has reported that the increased use of seat belts can prevent an estimated 11,900 fatalities, 325,000 serious injuries, and a savings in medical care, lost productivity, and other injury related costs of \$50 billion nationally.

Based on these cost estimates, if Nevada became a primary law state, it would increase its seat belt usage rate by 6%. With this increase in usage, Nevada would save 13 lives, 287 non-fatal injuries, resulting in \$34.8 million in economic cost savings (annualized).

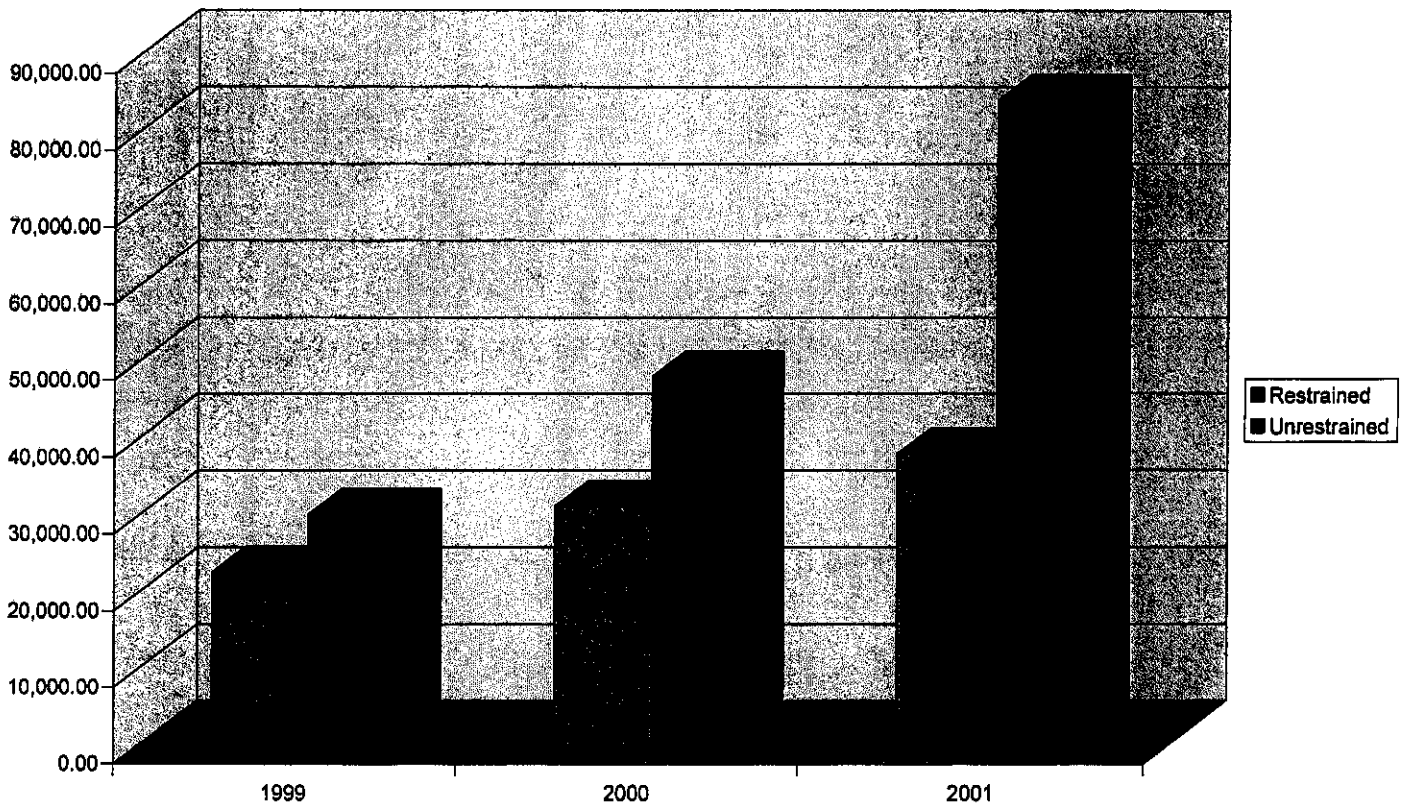
Data obtained from the State of Nevada Health Division, Bureau of Health Planning and Statistics, Trauma Registry shows that from 1999-2001, the *average* health care cost of a *Medicaid or County Pay Only* insured who was an unrestrained occupant involved in a motor vehicle crash was \$52,575.00. The *average* health care cost of a patient who was a restrained occupant involved in a motor vehicle crash was \$30,318.00; the *additional* cost for an unrestrained passenger was \$22,257--73% higher than that of a crash victim in a seat belt.

From 1999 through 2001, the total difference in average amounts billed for restrained vs unrestrained occupants in the *Medicaid or County Pay* insured category was \$3,690,560.00. It should be noted that this data *only* refers to those patients who met Trauma Criteria reporting requirements as outlined in NAC 450B.770, per Appendix A.

Billed Amounts for MVC Trauma Patients, Medicaid & County Pay ONLY

Year	MVC Unrestrained occupants average cost	MVC Restrained occupants average cost	Difference in average cost of unrestrained vs. restrained	Number of MVC unrestrained occupants	Additional Cost to all Insurers, unrestrained occupants
1999	\$30,086	\$22,526	\$ 7,560	60	\$ 453,600
2000	\$47,993	\$31,071	\$ 16,922	55	\$ 930,710
2001	\$84,060	\$37,935	\$ 46,125	50	\$2,306,250

**Average Billed Amounts Trauma Patients Medicaid & County Pay Only
Nevada: 1999, 2000, 2001**



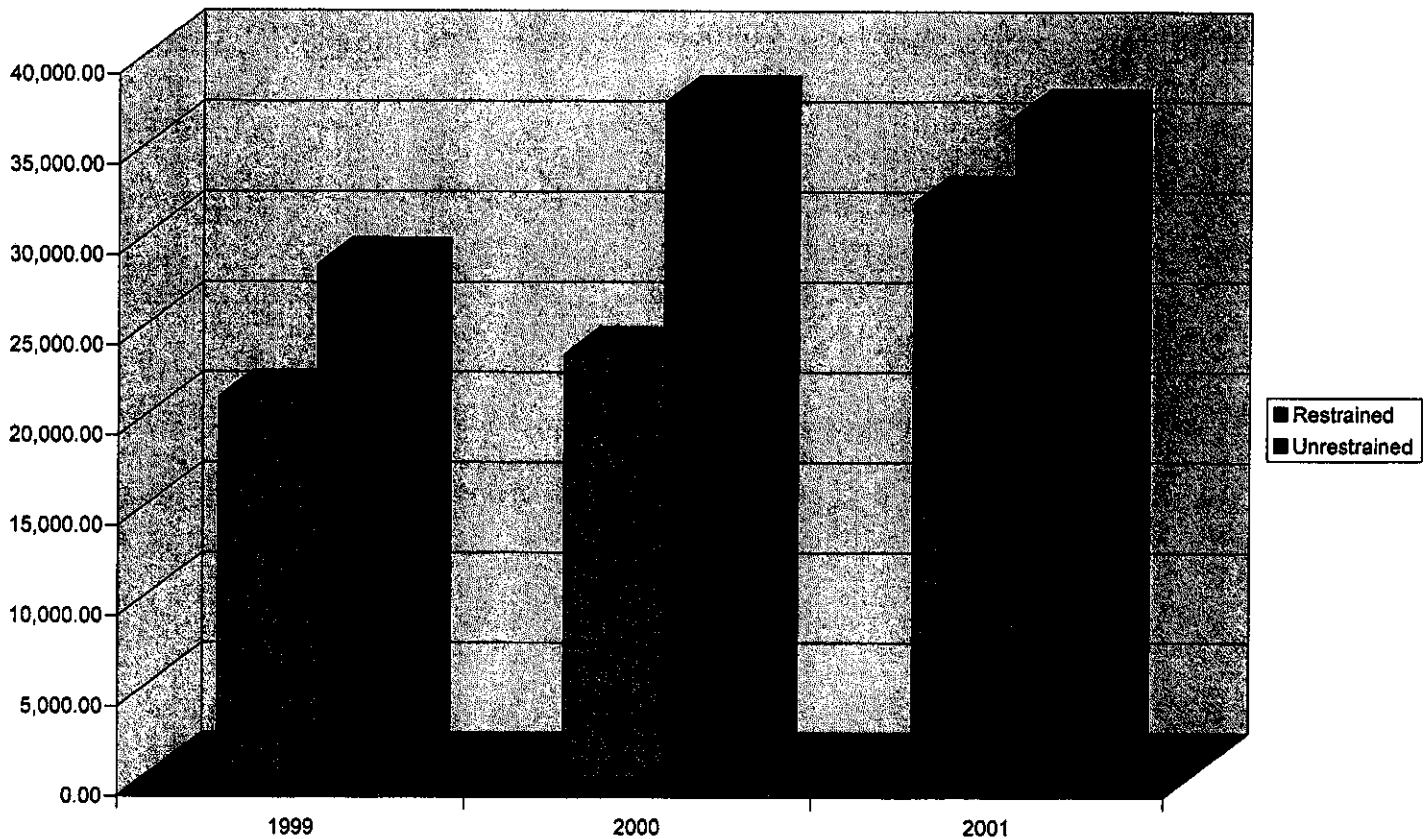
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This data shows the millions of unnecessary *additional* dollars spent on health care every year for unrestrained occupants in MVC's, and that unrestrained occupant costs are significantly and consistently higher than restrained occupants in MVC's.

Billed Amounts for MVC Trauma Patients, All Insurers

Year	MVC Unrestrained occupants average cost	MVC Restrained occupants average cost	Difference in average cost of unrestrained vs. restrained	Number of MVC unrestrained occupants	Additional Cost to all Insurers, unrestrained occupants
1999	\$28,460	\$21,119	\$ 7,341	1209	\$ 8,875,269
2000	\$37,436	\$23,499	\$13,937	1116	\$15,553,692
2001	\$36,775	\$31,932	\$ 4,843	1118	\$ 5,414,474

Average Billed Amounts for MVC Trauma Patients All Forms of Payment: 1999, 2000, 2001



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Please note that the \$3.7 million of additional costs for unrestrained occupants of the *Medicaid and County Pay Only* category represented 165 crash victims; the \$29.8 million of additional costs for unrestrained occupants for *All Insurers* combined represented over 3000 crash victims.

The total difference in average amounts billed between unrestrained and restrained occupants from 1999-2001 was \$29,843,435.00. This astounding sum displays how unrestrained occupants place a significant and direct fiscal burden on all Nevadans and their insurers. Much of this sum is directly proportional to uninsured and/or those patients covered under Medicare. The reimbursement for Medicare has dramatically decreased over the last decade. It is estimated that the U.S. Government will again decrease Medicare reimbursement for this and future fiscal years. This will significantly affect reimbursement to health care professionals, which also has a direct effect on Nevada and its current budget allocations.

Unrestrained occupants with insurance affect the remainder of the population. With medical care for unrestrained occupants involved in MVC's being proportionally higher than those that are restrained, the rest of the population covered by insurance will consequently pay higher insurance rates. We are already seeing the affects of higher rate costs in the State of Nevada.

Nationally nearly 75 percent of the costs of the nation's roadway crashes are paid by those not primarily involved in them, through insurance premiums, taxes and travel delay. In calendar year 2000 these costs, borne by society rather than individual crash victims, totaled \$171 billion.

Loss of funding

This year the state of Nevada dropped below the national weighted seat belt usage rate as required to obtain the 157 Incentive Grant from Federal Highway Funds as received in past fiscal years. These funds were earmarked for occupant protection traffic safety programs. This resulted in a loss to the state of \$440,000 for FY03. The loss of these funds directly affected both internal and local agency traffic safety programs (below).

Nevada does not qualify for additional 405 highway grant funds due to not having a primary seat belt law; this equates to \$209,207 each for the last six fiscal years since reauthorization, or \$1.3 million.

**Nevada Traffic Safety Grant Programs FY2003
Examples of the Effect of Lost Federal Highway Funds:**

State of Nevada - OTS (\$25,000.00 Request) Postponed

Alcohol and Occupant Protection Assessments
-Review and Assessment by NHTSA

	Request	Reduced to
Henderson Police Department Every 15 Minutes Program	\$47,000.00	\$24,000.00

Traffic Records Projects – NCATS	Request	Reduced to
Carson City SO	\$179,000.00	\$45,000.00
Elko County SO	\$69,600.00	\$35,000.00
Mesquite PD	\$61,600.00	\$35,000.00
Washoe County SO	\$64,400.00	\$35,000.00

Thirty (30) additional grants were only partially funded: The combined reductions (from amount requested to amount awarded) equaled \$584,000.00.

An additional seventeen (17) Grant Applications with a combined requested amount of \$1,008,000.00 did not receive any funding.

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APPENDIX A

**TRAUMA REGISTRY REPORTING CRITERIA
REFERENCE: NAC 450B.770
DATA REPORTED IN RELATION TO THIS SUMMARY**

Motor Vehicle Crashes: Includes any mechanically or electrically powered device, not operated on rails, upon which any person or property may be transported or drawn upon a highway. All data provided in this report excludes motorcycles.

For the purpose of the data in **this summation**, MVC includes:

Automobiles (on and off road vehicles)
Bus
Farm and industrial machinery (farm trucks, tractors, highway grader)
Fire engine
Truck
Van

The Trauma Registry report includes cases of drivers and passengers who have been involved in a MVC and who have been transported to a hospital and whom have met Trauma Criteria as outline in NAC 450B.770.

The report also provides information on the following insurance groups/types and the data represents the primary insurance type at the time of discharge from the hospital, however payor source may have changed since reporting:

- ◆HMO/PPO/Commercial- all Health Maintenance Organizations, Preferred Provider Organizations and Commercial Insurances.
- ◆Medicaid/County Pay- all Medicaid and County Pay
County Pay = non-insured or maxed out on current insurance, so county serves as a back up; county then looks at patient's eligibility for Medicaid. Transition to Medicaid payor is the most common result; or, they're insured thru Medicare, and they then usually qualify for Medicaid as a secondary insurer (supplemental).
- ◆Medi-Cal- State of California's Medicaid program. Broken out separately since the State dollars would be from California.
- ◆VOVC- Victims of Violent Crimes, funding source unclear, but may have state dollars associated.
- ◆Medicare- Federal Medicare program, some cases may have Medicaid as a secondary insurance.
- ◆Military/Champus- Federal Military Insurance

APPENDIX A (CON)

- ◆None/Unknown- no data on type of insurance or case was uninsured
Private Pay- case will pay privately for services

This report also provides information on restraint use in MVC's;

- ◆Restrained - total number of cases who had a 2 point belt, 3 point belt, car seat, or air bag and belt.
- ◆Unrestrained- total number of cases that were documented as unrestrained when a restraint was available
- ◆Unknown/Not Applicable- total number of cases that a restraint was not applicable, such as bus or taxi or where no documentation was provided of use or non use of a restraint.