

COMMITTEE ON LEGISLATIVE RESEARCH
OVERSIGHT DIVISION

FISCAL NOTE

L.R. No.: 1485-01
Bill No.: HB 507
Subject: Emergencies; Health Care; Health Care Professionals; Health, Public
Type: Original
Date: March 19, 2003

FISCAL SUMMARY

ESTIMATED NET EFFECT ON GENERAL REVENUE FUND			
FUND AFFECTED	FY 2004	FY 2005	FY 2006
Total Estimated Net Effect on General Revenue Fund	\$0	\$0	\$0

ESTIMATED NET EFFECT ON OTHER STATE FUNDS			
FUND AFFECTED	FY 2004	FY 2005	FY 2006
Total Estimated Net Effect on Other State Funds	\$0	\$0	\$0

Numbers within parentheses: () indicate costs or losses.
This fiscal note contains 5 pages.

ESTIMATED NET EFFECT ON FEDERAL FUNDS			
FUND AFFECTED	FY 2004	FY 2005	FY 2006
Federal	\$0	\$0	\$0
Total Estimated Net Effect on All Federal Funds	\$0	\$0	\$0

Income and expenses of approximately \$20,000,000 in FY 04 and \$8,000,000 annually would net to \$0.

ESTIMATED NET EFFECT ON LOCAL FUNDS			
FUND AFFECTED	FY 2004	FY 2005	FY 2006
Local Government	\$0	\$0	\$0

FISCAL ANALYSIS

ASSUMPTION

Officials from the **Department of Public Safety**, the **Springfield Police Department**, and the **Missouri State Highway Patrol**, assume this proposal would not fiscally impact their agencies.

Officials from the **Department of Health and Senior Services (DOH)** assume this proposal requires a vaccination program for first responders would be implemented to include, but not limited to: hepatitis A, hepatitis B, diphtheria-tetanus, influenza, pneumococcal and other vaccinations as recommended by the United Public Health Service. The DOH states implementation of this proposal would have an impact on the DOH's immunization program, the Center for Emergency Response and Terrorism (CERT), and would affect some operations of the Division of Health Standard and Licensure. Given experience with other vaccination programs, the DOH states a program such as this would have a substantial impact on DOH resources and manpower on a permanent basis.

The DOH states there are 114 local public health agencies (LPHA) in Missouri that the DOH would contract with the actually do the immunizations. The DOH assumes that the contracts with the LPHAs would be \$50 for each person being vaccinated. Of the 150,000 first responders it is estimated that 100,000 of them would consent/be able to take the vaccinations. Costs of contracts would be: 100,000 people × \$50/person for the LPHAs = \$5,000,000 annual.

ASSUMPTION (continued)

The DOH assumes the costs of the vaccinations would be:

Hep A: 2 doses @ \$17.75 each = \$35.50/vac × 100,000 people = \$3,550,000

Hep B: 3 doses @ \$24.25 each = \$72.75/vac × 100,000 people = \$7,275,000

Pneumococcal: \$13.08/vac × 100,000 = \$1,308,000 (assuming only one dose would be required during working years)

First year costs of "one-time" vaccinations = 3,550,000+7,275,000+1,308,000=\$12,133,000

The DOH states assuming a 10% turnover rate would mean the ongoing costs would be \$1,213,300 (\$12,133,000 x 10%) per year

Additional Costs of Annual Vaccinations:

Influenza: \$5.25/dose × 100,000 = \$525,000 annually

Costs of Vaccination needed every 10 years:

Tetanus-Diphtheria, assume that 10% of the first responders need to get the booster every year:

Year 1: \$6.41 x 100,000 = \$641,000

Every year after: \$6.41 × 10,000 = \$64,100

Costs of Vaccination needed every 5 years:

Smallpox, assume that 10% of the first responders need to get the booster every year.

Year 1: \$15 × 100,000 = \$1,500,000

Every year after: \$15 × 10,000 = \$150,000

Personnel Costs—The DOH assumes it would need 1 FTE Clerk Typist III, 3 FTE CHN IVs, 6 FTE Health Program Representatives II, 2 FTE Data Entry Operators, and 1 FTE Program Coordinator.

Oversight has, for fiscal note purposes only, changed the starting salary for the above mentioned personnel to correspond to the second step above minimum for comparable positions in the state's merit system pay grid. This decision reflects a study of actual starting salaries for new state employees for a six month period and the policy of the Oversight Subcommittee of the Joint Committee on Legislative Research.

Oversight assumes that this program will not become effective unless the DOH receives federal funds.

<u>FISCAL IMPACT - State Government</u>	FY 2004 (10 Mo.)	FY 2005	FY 2006
FEDERAL			
<u>Income</u> - Department of Health and Senior Services			
Federal assistance	\$19,722,790	\$7,859,655	\$8,136,566
<u>Costs</u> - Department of Health and Senior Services			
Personal Service (14 FTE)	(\$400,586)	(\$410,601)	(\$420,866)
Fringe Benefits	(\$162,117)	(\$166,170)	(\$170,324)
Expense and Equipment	(\$19,160,087)	(\$7,282,884)	(\$7,545,376)
Total <u>Costs</u> - Department of Health and Senior Services	<u>(\$19,722,790)</u>	<u>(\$7,859,655)</u>	<u>(\$8,136,566)</u>
ESTIMATED NET EFFECT ON FEDERAL FUNDS	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
<u>FISCAL IMPACT - Local Government</u>	FY 2004 (10 Mo.)	FY 2005	FY 2006
	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>

FISCAL IMPACT - Small Business

No direct fiscal impact to small businesses would be expected as a result of this proposal.

DESCRIPTION

This proposal requires the Department of Health and Senior Services to offer a vaccination program for first responders. Participation in most cases is voluntary, and authorized exceptions exist. The program will become effective upon receipt of federal funds

This legislation is not federally mandated, would not duplicate any other program and would not require additional capital improvements or rental space.

L.R. No. 1485-01
Bill No. HB 507
Page 5 of 5
March 19, 2003

SOURCES OF INFORMATION

Department of Health and Senior Services
Department of Public Safety
Springfield Police Department

NOT RESPONDING: Cooper County Hospital, Kansas City Police Department, Greene County Sheriff, Pemiscot Hospital, St. Louis County Police Department, and Taney County Ambulance District



MICKEY WILSON, CPA
DIRECTOR
MARCH 19, 2003