

COMMITTEE ON LEGISLATIVE RESEARCH  
OVERSIGHT DIVISION

**FISCAL NOTE**

L.R. NO.: 3178-02  
BILL NO.: HB 1488  
SUBJECT: Employees - Employers; Health Department; Health, Public  
TYPE: Original  
DATE: February 3, 2000

**FISCAL SUMMARY**

<b>ESTIMATED NET EFFECT ON STATE FUNDS</b>			
FUND AFFECTED	FY 2001	FY 2002	FY 2003
General Revenue	\$70,269	\$87,731	\$91,241
<b>Total Estimated Net Effect on <u>All</u> State Funds</b>	<b>\$70,269</b>	<b>\$87,731</b>	<b>\$91,241</b>

<b>ESTIMATED NET EFFECT ON FEDERAL FUNDS</b>			
FUND AFFECTED	FY 2001	FY 2002	FY 2003
None			
<b>Total Estimated Net Effect on <u>All</u> Federal Funds</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

<b>ESTIMATED NET EFFECT ON LOCAL FUNDS</b>			
FUND AFFECTED	FY 2001	FY 2002	FY 2003
<b>Local Government</b>	<b>\$35,296</b>	<b>\$35,296</b>	<b>\$35,296</b>

Numbers within parentheses: ( ) indicate costs or losses.

This fiscal note contains 3 pages.

**FISCAL ANALYSIS**

**ASSUMPTION**

Officials from the **Department of Health (DOH)** assume no staff would provide direct medical treatment and any costs for Immune Globulin (IG) or its administration by local public health agencies would be reimbursed by the establishment with the infected employee. DOH also assumes that establishments requiring employees to be immunized against hepatitis A and implementing safe food-handling practices would not have outbreaks of hepatitis A. In addition, DOH assumes they would be reimbursed for the cost of the IG. DOH states the average cost for IG has increased from \$7.28 in 1996 to \$19.12 in 1999. DOH states the annual average number of persons requiring IG from 1996 through 1999 was 4,412. DOH estimates a cost savings to the department of \$84,357 (4,412 (persons treated) x \$19.12 (cost of vaccine per treatment)) annually as a result of this proposal. DOH states there would be a savings to local public health agencies who administer vaccine of reimbursed for their cost. Local public health agencies have maintained their cost to respond and administer vaccine for \$8.00 per person. DOH estimates cost saving per year using the same assumptions used for vaccine would be \$35,296 for local public health agencies.

<b><u>FISCAL IMPACT - State Government</u></b>	FY 2001 (10 Mo.)	FY 2002	FY 2003
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**GENERAL REVENUE FUND**

<b><u>Savings - Department of Health</u></b>			
Hepatitis A vaccine	<u>\$70,269</u>	<u>\$87,731</u>	<u>\$91,241</u>

<b>ESTIMATED NET EFFECT ON GENERAL REVENUE FUND</b>	<b><u>\$70,269</u></b>	<b><u>\$87,731</u></b>	<b><u>\$91,241</u></b>
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<b><u>FISCAL IMPACT - Local Government</u></b>	FY 2001 (10 Mo.)	FY 2002	FY 2003
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**LOCAL PUBLIC HEALTH  
AGENCIES**

<b><u>Savings - Local Public Health Agencies</u></b>			
Administration of vaccine	<u>\$35,296</u>	<u>\$35,296</u>	<u>\$35,296</u>

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<u>FISCAL IMPACT - Local Government</u>	FY 2001 (10 Mo.)	FY 2002	FY 2003
<b>ESTIMATED NET EFFECT ON LOCAL PUBLIC HEALTH AGENCIES</b>	<b><u>\$35,296</u></b>	<b><u>\$35,296</u></b>	<b><u>\$35,296</u></b>

FISCAL IMPACT - Small Business

Small businesses would be expected to be fiscally impacted to the extent that they would possibly incur additional costs as a result of this proposal.

DESCRIPTION

This proposal would require establishments listed in Section 196.190 RSMo, with an employee who has contracted hepatitis A, to pay the cost of treating co-workers or customers for hepatitis A who are treated through the Department of Health or a local public health agency. The cost of treating co-workers or customers would be waived if such establishments voluntarily require employees to be immunized for hepatitis A as a condition of employment and implement safe food handling practices.

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

SOURCES OF INFORMATION

Department of Health



Jeanne Jarrett, CPA  
Director  
February 3, 2000