

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 79TH LEGISLATIVE REGULAR SESSION

April 13, 2005

TO: Honorable Dianne White Delisi, Chair, House Committee on Public Health

FROM: John S. O'Brien, Deputy Director, Legislative Budget Board

IN RE: HB1316 by Zedler (Relating to immunization requirements for children in regulated child-care facilities.), **Committee Report 1st House, Substituted**

Estimated Two-year Net Impact to General Revenue Related Funds for HB1316, Committee Report 1st House, Substituted: a negative impact of (\$5,452,237) through the biennium ending August 31, 2007.

The bill would make no appropriation but could provide the legal basis for an appropriation of funds to implement the provisions of the bill.

General Revenue-Related Funds, Five-Year Impact:

Fiscal Year	Probable Net Positive/(Negative) Impact to General Revenue Related Funds
2006	(\$2,680,055)
2007	(\$2,772,182)
2008	(\$3,267,350)
2009	(\$3,267,350)
2010	(\$3,267,350)

All Funds, Five-Year Impact:

Fiscal Year	Probable (Cost) from GENERAL REVENUE FUND 1
2006	(\$2,680,055)
2007	(\$2,772,182)
2008	(\$3,267,350)
2009	(\$3,267,350)
2010	(\$3,267,350)

Fiscal Analysis

The bill would require all children in a regulated child care facility be immunized against invasive pneumococcal disease and hepatitis A.

Methodology

According to the Department of Family and Protective Services (DFPS) and the Department of State Health Services (DSHS), 750,000 children in regulated child care facilities would need to be immunized with three vaccines: PCV-7, pneumococcal polysaccharide, and hepatitis A. Each vaccine has specific age and dosage requirements, and PCV-7 and Hepatitis A vaccines require multiple doses per child. Assumptions, per DSHS, are as follows:

1. PCV-7 will cost \$51.58 per dose and a four dose series is recommended. Pneumococcal polysaccharide will cost \$17.58 per dose and is only recommended for a specific high-risk groups of children (estimated at 2.1 percent). Only one dose is recommended. Hepatitis A vaccine will cost \$11.15 per dose, and two doses are recommended. Hepatitis A vaccine is only provided for children over age two.

2. Of the children needing vaccination, 30 percent are already paid for by Medicaid, 5 percent are already paid for by CHIP, 21 percent will be paid for by the federal Vaccines for Children program at no cost to the state, 40 percent will be paid for by insurance or another private source, and 4 percent will be paid for by DSHS. For Hepatitis A, some children live in counties that already require the hepatitis A vaccine in order to attend child care and therefore will not be included in the fiscal estimate.

3. The existing vaccine delivery system operated by DSHS will absorb the cost of distributing vaccines to clinics, so the only new costs to the state will be for the vaccinations paid for DSHS.

PCV-7 costs:

In fiscal year 2006, it is assumed that 30,000 children will need 45,000 doses of PCV-7 paid for through DSHS (\$2.3 million GR).

In fiscal year 2007, it is assumed that 14,600 children will need 48,800 doses paid for through DSHS (\$2.5 million GR).

In fiscal years 2008 through 2010, it is assumed that 14,600 children each year will need 58,400 doses paid for through DSHS (\$3.0 million GR).

Pneumococcal Polysaccharide costs:

In fiscal year 2006, it is assumed that doses for 630 children will be paid for through DSHS (\$11,075 GR).

In fiscal years 2007 through 2010, it is assumed that doses for 64 children will be paid for through DSHS (\$1,125 GR).

Hepatitis A costs:

In fiscal year 2006, it is assumed that 15,600 children will need 31,200 doses of hepatitis A vaccine paid for through DSHS (\$347,880 GR).

In fiscal years 2007 through 2010, it is assumed that 11,388 children each year will need 22,776 doses paid for through DSHS (\$253,952 GR).

Local Government Impact

No fiscal implication to units of local government is anticipated.

Source Agencies: 530 Department of Family and Protective Services, 537 Department of State Health Services

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