BILL ANALYSIS

Senate Research Center

S.B. 811 By: Janek Health & Human Services 10/19/2007 Enrolled

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

The federal Vaccines for Children Program (program) was developed to support efforts to increase childhood immunization levels by providing publicly purchased vaccines, including influenza vaccines, to eligible children. A large number of Texas children qualify for influenza vaccines through the program. The majority of the vaccines provided through the program are administered in the offices of private physicians who are program providers. The physicians receive the vaccines at no cost in exchange for abiding by federal laws concerning the use of the influenza vaccine. The Department of State Health Services (DSHS) selects which brand of influenza vaccine on the federal list will be provided and used in the program. Currently, DSHS uses only the least expensive available influenza vaccine without considering the administration method or efficacy of the vaccine. Thus, physicians are limited to a single brand of influenza vaccine provided by DSHS. If physicians were allowed to select the brand of influenza vaccine to use, they could exercise their professional judgment in selecting the appropriate influenza vaccine for patients and would have greater flexibility in the face of flu vaccine shortages or supply issues. In addition, by allowing physicians to use both the trivalent influenza virus and live attenuated influenza vaccines, the number of physicians participating in the program would increase.

S.B. 811 requires DSHS to allow physicians in the program to select any influenza vaccine from the federal list.

RULEMAKING AUTHORITY

This bill does not expressly grant any additional rulemaking authority to any state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

[While the statutory reference in this bill is to the Texas Department of Health (TDH), the following amendments affect the Department of State Health Services, as the successor agency to TDH.]

SECTION 1. Amends Subchapter A, Chapter 161, Health and Safety Code, by adding Section 161.0102, as follows:

Sec. 161.0102. VACCINES FOR CHILDREN PROGRAM. (a) Defines "vaccines for children program."

(b) Requires TDH to allow each health care provider participating in the vaccines for children program to select certain influenza vaccines and to use both inactivated influenza vaccines and live, attenuated influenza vaccines.

SECTION 2. Amends Subchapter A, Chapter 161, Health and Safety Code, by adding Section 161.0103, as follows:

Sec. 161.0103. VACCINES FOR CHILDREN PROGRAM; EQUIVALENT VACCINES. (a) Defines "vaccines for children program" and "equivalent vaccines."

- (b) Requires TDH to procure an equal supply of the vaccine from each manufacturer except as provided by Subsection (d), where two or more manufacturers produce equivalent vaccines.
- (c) Requires an equivalent vaccine to be approved by the United States (U.S.) Food and Drug Administration, recommended by the federal Advisory Committee on Immunization Practices, and made available to TDI by the Centers for Disease Control and Prevention of the U.S. Public Health Service.
- (d) Requires TDI to procure an equal supply of each equivalent vaccine under Subsection (b) only if the cost to TDI of providing each equivalent vaccine is not more than 110 percent of the lowest-priced equivalent vaccine.

SECTION 3. Effective date: upon passage or September 1, 2007.