LEGISLATIVE BUDGET BOARD Austin, Texas

FISCAL NOTE, 81ST LEGISLATIVE REGULAR SESSION

March 16, 2009

TO: Honorable Jane Nelson, Chair, Senate Committee on Health & Human Services

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

IN RE: SB424 by Van de Putte (Relating to the establishment and implementation of a school-based influenza vaccination pilot program.), **As Introduced**

Estimated Two-year Net Impact to General Revenue Related Funds for SB424, As Introduced: a negative impact of (\$1,777,473) through the biennium ending August 31, 2011.

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
2010	(\$1,777,473)
2011	\$0
2012	\$0
2013	\$0
2014	\$0

All Funds, Five-Year Impact:

Fiscal Year	Probable Savings/(Cost) from General Revenue Fund 1	Probable Savings/(Cost) from Federal Funds 555
2010	(\$1,777,473)	(\$1,034,739)
2011	\$0	\$0
2012	\$0	\$0
2013	\$0	\$0
2014	\$0	\$0

Fiscal Analysis

The bill would require the Department of State Health Services (DSHS) and the Texas Education Agency (TEA) to jointly establish and implement in the 2009-2010 school year a school-based influenza vaccination pilot.

The pilot would select four school districts that meet certain requirements. One must have a student population of 50,000 or more, be at least 85 percent economically disadvantaged, and located in a municipality with a population of more than 1,100,000. The second must have a student population of less than 5 percent economically disadvantaged and located in a municipality with a population of more than 600,000 and less than 1,000,000. The third is to have a student population that is at least 90 percent economically disadvantaged and in a county population of 50,000 or less. The fourth is to have a student population of at least 90 percent economically disadvantaged and located in a county

on the international border.

The Texas Immunization Stakeholder Working Group shall establish a subcommittee to implement the pilot, collect all relevant data, submit a report that analyzes the cost and benefits of the program, identify the barriers, and project the fiscal impact of a statewide school-based influenza vaccination program. The Act would expire September 1, 2011.

The Act would take effect immediately if it receives a two-thirds vote of all members in each house; otherwise it takes effect September 1, 2009.

Methodology

The Texas Education Agency assumes any cost can be absorbed within existing resources.

The Department of State Health Services estimates there will be 113,245 students in the pilot, based on the largest districts meeting the criteria for each of the four sets of parameters. DSHS assumes 5% of the total population will not participate in the pilot leaving 107,583 students who will participate. Of the 107,583 students, 15,932 will rely on state funding for vaccinations. The estimated vaccine cost for this group is \$179,869 in General Revenue. The other students are expected to be eligible for the Texas Vaccinations for Children program at an expected cost of \$1,034,739 in Federal Funds. The cost to administer each vaccine is \$14.85; the total cost to administer the vaccines for the pilot is estimated to be \$1,597,604 in General Revenue. The projected total cost for administration and vaccines is \$1,777,473 in General Revenue and \$1,034,739 in Federal Funds.

Local Government Impact

The bill would require the Department of State Health Services and the Texas Education Agency to establish and implement a school-based influenza vaccination pilot program in school districts as defined by the provisions of the bill. The Texas Immunization Stakeholder Working Group would establish a subcommittee comprised of members from participating school districts and local health departments to collect data relevant to the program during the 2009-2010 school year. The program would be discontinued September 1, 2011. The costs associated with implementing the provisions of the bill are not anticipated to be significant.

Source Agencies: 537 State Health Services, Department of, 701 Central Education Agency

LBB Staff: JOB, CL, BM, MB, JF, TP