



# House of Representatives

General Assembly

**File No. 457**

January Session, 2005

Substitute House Bill No. 5802

*House of Representatives, April 20, 2005*

The Committee on Public Health reported through REP. SAYERS of the 60th Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

## **AN ACT CONCERNING VACCINATIONS FOR FIRST RESPONDERS.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective October 1, 2005*) (a) As used in this  
2 section:

3 (1) "Department" means the Department of Public Health;

4 (2) "Commissioner" means the Commissioner of Public Health;

5 (3) "Bioterrorism" means the intentional use of any microorganism,  
6 virus, infectious substance or biological product that may be  
7 engineered as a result of biotechnology, or any naturally occurring or  
8 bioengineered component of any such microorganism, virus, infectious  
9 substance or biological product, to cause or attempt to cause death,  
10 disease or other biological malfunction in any living organism;

11 (4) "Disaster location" means any geographical location where a  
12 bioterrorism attack, terrorist attack, catastrophic or natural disaster or

13 emergency occurs; and

14 (5) "First responders" means state and local law enforcement  
15 personnel, fire department personnel, emergency medical personnel,  
16 emergency management personnel and public works personnel who  
17 may be deployed to a disaster location.

18 (b) The department shall offer a vaccination program for first  
19 responders who may be exposed to infectious diseases when deployed  
20 to a disaster location, which shall include, but not be limited to,  
21 hepatitis A vaccination, hepatitis B vaccination, diphtheria-tetanus  
22 vaccination, influenza vaccination, pneumococcal vaccination, other  
23 vaccinations recommended by the United States Public Health Service  
24 and immune globulins, as recommended by the Federal Emergency  
25 Management Agency.

26 (c) Participation by first responders in the vaccination program shall  
27 be voluntary, except as otherwise required by federal or state law.

28 (d) A first responder who volunteers to participate in the program  
29 may refuse an individual vaccination. Such first responder shall be  
30 exempt from such vaccination if (A) a written statement from a  
31 licensed physician is presented indicating that the vaccine is medically  
32 contraindicated for the first responder, or (B) the first responder signs  
33 a written statement that the administration of the vaccination conflicts  
34 with his or her religious tenets.

35 (e) If there is a vaccine shortage, the commissioner, in consultation  
36 with the Governor and the National Centers for Disease Control, shall  
37 establish a priority list for administration of such vaccination.

38 (f) The department shall notify first responders of the availability of  
39 the vaccination program and shall provide educational materials to  
40 first responders on ways to prevent exposure to infectious diseases.

41 (g) The department may, within available appropriations, contract  
42 with local health departments, district departments of health, not-for-  
43 profit home health care agencies, hospitals and physicians to

44 administer vaccinations under the program.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2005</i>	New section

**PH**      *Joint Favorable Subst.*

The following fiscal impact statement and bill analysis are prepared for the benefit of members of the General Assembly, solely for the purpose of information, summarization, and explanation, and do not represent the intent of the General Assembly or either House thereof for any purpose:

## OFA Fiscal Note

### State Impact:

Agency Affected	Fund-Effect	FY 06 \$	FY 07 \$
Public Health, Dept.	GF - Cost	Significant	Significant
Public Health, Dept.	GF - Revenue Gain	Potential Significant	Potential Significant
Public Safety, Dept.	GF - Savings	Potential	Potential
Legislative Mgmt.	GF - Savings	Potential Minimal	Potential Minimal

Note: GF=General Fund

### Municipal Impact:

Municipalities	Effect	FY 06 \$	FY 07 \$
Various Municipalities	Savings	Potential	Potential

## Explanation

### Department of Public Health

The Department of Public Health will incur a significant cost to provide hepatitis A, hepatitis B, diphtheria-tetanus, influenza, pneumococcal, immune globulin and other vaccines recommended by the United States Public Health Services on a voluntary basis to all of Connecticut's first responders.

The exact cost will depend upon the number of individuals availing themselves of the new program and the types of vaccines they request, which cannot be determined in advance. However, for comparison purposes, if ten percent of the estimated 35,000 first responders in the state seek DPH-funded vaccines, the cost to the department would be approximately \$565,000<sup>1</sup> annually.

<sup>1</sup> Based on average costs of: \$35.00 hepatitis A, \$90.00 hepatitis B, \$15.90 diphtheria-tetanus, \$6.90 influenza, \$13.65 pneumococcal. These costs would be supplemented

These costs would be supplemented by \$45,300 in FY 06 to support the salary of one Health Program Assistant needed to establish and manage the vaccine distribution process. In FY 07 and subsequent fiscal years this position would be required on a half-time basis, at an annual cost of \$22,650. (Associated fringe benefit costs of \$10,260 in FY 06 and \$12,210 in following years would result.<sup>2</sup>)

Additional costs of \$5,000 - \$10,000 would be incurred to provide educational materials to first responders on ways to prevent exposure to infectious diseases and notify them about the availability of the vaccination program.

No funding has been included within sHB 6671 (the FY 06-07 Appropriations Act, as favorably reported by the Appropriations Committee) to implement provisions in the bill. However, if additional funds are appropriated for this purpose, a partially offsetting revenue gain to the state would result. Section 19a-7j CGS establishes a health and welfare fee, to be assessed on each domestic insurer or health care center doing life or health insurance business in Connecticut that is equivalent to the amount appropriated for childhood and adult immunizations, antibiotics related to tuberculosis and other communicable diseases and data collection efforts concerning the immunization status of certain children enrolled in the Medicaid program.

### **State and Local Agencies Employing First Responders**

Under federal Occupational, Safety and Health Administration (OSHA) regulations, hepatitis B vaccinations must be provided to first

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on a case specific basis by expenses associated with providing immune globulin serums.

<sup>2</sup> The fringe benefit costs for state employees are budgeted centrally in the Miscellaneous Accounts administered by the Comptroller. The estimated fringe benefit reimbursement rate as a percentage of payroll is 53.91%, effective July 1, 2004. However, first year fringe benefit costs for new positions do not include pension costs lowering the rate to 22.65%. The state's pension contribution is based upon the prior year's certification by the actuary for the State Employees Retirement System.

responders by their employers. State and local agencies that currently do so may potentially incur savings as a result of the establishment of the new vaccination program. The Department of Public Safety currently pays approximately \$150 for the required series of three hepatitis B doses per state trooper. Therefore, the agency may experience a potential savings of up to \$7,500 annually, based on an estimated 50 new individuals being inoculated each year. Similarly, the Office of Legislative Management may incur minimal savings as it also provides hepatitis B vaccinations for new police officers.

Additional state or local savings may result to the extent that other vaccines or serums identified in the bill would otherwise be provided at employer expense. To the extent that the percentage of first responders that are immunized against the stated diseases increases as a result of passage of this bill, a potential future savings to employer health or worker's compensation claims costs may also ensue.

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**OLR Bill Analysis**

sHB 5802

**AN ACT CONCERNING VACCINATIONS FOR FIRST RESPONDERS**

**SUMMARY:**

This bill establishes a voluntary vaccination program for first responders, except where required by state or federal law, who may be exposed to infectious diseases when sent to a disaster location. Vaccinations include those for hepatitis A, hepatitis B, diphtheria-tetanus, influenza, pneumococcal, others recommended by the United States Public Health Service, and immune globulins, as recommended by the Federal Emergency Management Agency. Under the bill, "first responders" mean personnel of state and local law enforcement, fire departments, emergency medical, emergency management, and public works who may be sent to a disaster location. A "disaster location" is any geographical location where a bioterrorism attack, terrorist attack, or catastrophic or natural disaster or emergency occurs.

The bill directs the Department of Public Health (DPH) to notify first responders of the vaccination program, including providing educational materials to them on ways to prevent exposure to infectious diseases. DPH, within available appropriations, can contract with local health departments, not-for-profit home health care agencies, hospitals, and physicians to administer the vaccinations. If there is a vaccine shortage, the health commissioner, in consultation with the governor and the National Centers for Disease Control must establish a priority list for administration of the vaccines.

The bill exempts participating first responders from a vaccination if (1) there is a written statement from a physician indicating that the vaccination is medically contraindicated or (2) the first responder signs a written statement that receiving the vaccine conflicts with his religion.

EFFECTIVE DATE: October 1, 2005

**BIOTERRORISM**

The bill defines “bioterrorism” as the intentional use of any microorganism, virus, infectious substance, or biological product that may be engineered as a result of biotechnology, or any naturally occurring or bioengineered component of any such microorganism, virus, infectious substance, or biologic product, to cause or attempt to cause death, disease, or other biological malfunction in any living organism.

**COMMITTEE ACTION**

Public Health Committee

Joint Favorable Substitute

Yea 26    Nay 0