
OLR Bill Analysis**sHB 6610*****AN ACT CONCERNING VACCINES.*****SUMMARY:**

This bill expands the choice of childhood immunizations that health care providers may administer if certain conditions are met.

EFFECTIVE DATE: October 1, 2011

CHILDHOOD VACCINES

By law, the Department of Public Health (DPH) commissioner determines the standard of care for childhood immunizations in Connecticut based on the recommended schedules of the (1) National Centers for Disease Control and Prevention (CDC) Advisory Committee on Immunization Practices, (2) American Academy of Pediatrics, and (3) American Academy of Family Physicians. Currently, DPH operates a federal "Vaccine for Children" (VFC) program and its own immunization program funded by an assessment on health insurers.

Federal Vaccine for Children Program

Under the bill, a health care provider administering childhood vaccines under the VFC program (operated by DPH under federal authority, 42 USC § 1396s) may choose, and DPH must provide, any vaccine licensed by the federal Food and Drug Administration, including any combination vaccine and dosage form if it is (1) recommended by the CDC Advisory Committee, and (2) made available to DPH by the CDC.

The VFC is a federally funded program that provides vaccines at no cost to children who might not otherwise be vaccinated because of inability to pay. VFC was created by the Omnibus Budget Reconciliation Act of 1993 as a new entitlement program required as

part of each state's Medicaid plan. VFC pays for any brand of vaccine that the CDC has recommended.

DPH Vaccine Program

By law, the DPH commissioner must establish, within available appropriations, a childhood immunization program that:

1. provides vaccine at no cost to state health care providers so that cost is not a barrier to vaccination;
2. with the assistance of hospital maternity programs, provides all parents with the recommended immunization schedule and a list of immunization sites;
3. informs providers of changes in the immunization schedule in a timely way;
4. assists hospitals, local health providers, and local health departments develop and implement record-keeping and outreach programs to identify and immunize children who have fallen behind in their immunizations;
5. assists in developing a program to assess the vaccination status of children who are clients of state and federal programs serving children and provide for vaccination for those behind schedule;
6. obtains available state and federal funds and solicits and spend funds from any public or private source; and
7. provides parents and providers with educational materials about timely immunizations.

By law, each year the Office of Policy and Management (OPM) secretary must determine the amount appropriated for the purchase, storing, and distribution of vaccines under this program, as well as for other vaccine, biologic, and antibiotic purchase and distribution. Each domestic insurer or health care center (i.e., an HMO) conducting life or health insurance business in the state must annually pay a "health and welfare fee" to the Insurance Department. The fee is deposited in the

General Fund.

This bill provides more vaccine choice to providers in the childhood immunization program. Under the bill, a health care provider administering childhood vaccines may choose, and DPH must provide, any vaccine licensed by the FDA, including any combination vaccine and dosage form that is (1) recommended by CDC's Advisory Committee, (2) made available to DPH by CDC, and (3) identified by DPH as a vaccine funded from the "health and welfare" fee, or an equivalent vaccine.

DPH must provide an equivalent vaccine selected by a provider only if the cost does not exceed the cost of providing the vaccine funded by DPH. "Equivalent vaccine" means two or more vaccines that (1) protect a vaccine recipient against the same infection, (2) have similar safety and efficacy, (3) are recommended by the CDC, and (4) require the same number of doses.

PUBLIC HEALTH EMERGENCIES AND DISASTERS

The bill specifies that these provisions expanding vaccine choices do not apply in the event of a public health emergency or an attack, major disaster, emergency, or disaster emergency as defined in law.

COMMITTEE ACTION

Public Health Committee

Joint Favorable Substitute

Yea 28 Nay 0 (03/30/2011)