STORAGE NAME: h1003.hcc.doc

**DATE:** March 23, 2001

# HOUSE OF REPRESENTATIVES AS REVISED BY THE COUNCIL FOR HEALTHY COMMUNITIES ANALYSIS

**BILL #:** HB 1003

**RELATING TO:** Nursing Homes/Vaccinations

**SPONSOR(S):** Representative(s) Paul & others

TIED BILL(S):

# ORIGINATING COMMITTEE(S)/COUNCIL(S)/COMMITTEE(S) OF REFERENCE:

- (1) COMMITTEE ON ELDER AND LONG TERM CARE YEAS 11 NAYS 0
- (2) COUNCIL FOR HEALTHY COMMUNITIES YEAS 14 NAYS 0
- (3)
- (4)
- (5)

# I. SUMMARY:

This bill would add to Chapter 440.141 the requirement that all licensed nursing homes provide immunizations against the influenza virus to all of its consenting residents before November 30<sup>th</sup> of each year. Any person who becomes a resident after November 30<sup>th</sup> but before March 31, and consents to the procedure, requires immunization within five working days. The procedure is not provided for residents who provide documentation of prior immunization. If residents choose to receive the immunization from their personal physician, they must provide proof of the immunization to the facility.

The bill also requires an assessment for eligibility and vaccination, within 60 days of the effective date, of all residents for polysaccharide pneumococcal vaccination (PPV). There are exemptions for medical contraindications and religious or personal beliefs. Residents admitted after the effective date of the bill are required to be assessed within 5 days. As with the influenza vaccination, the procedure is not provided for residents who provide documentation of prior immunization. If residents choose to receive the immunization from their personal physician, they must provide proof of the procedure to the facility.

Lastly, the bill requires facilities to annually encourage and promote the benefits associated with immunization against influenza virus to its employees.

Amendment # 3 grants the Agency for Health Care Administration rule-making authority to implement the bills provisions.

The bill would take effect upon becoming law.

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# II. SUBSTANTIVE ANALYSIS:

# A. DOES THE BILL SUPPORT THE FOLLOWING PRINCIPLES:

1.	Less Government	Yes []	No []	N/A [x]
2.	Lower Taxes	Yes []	No []	N/A [x]
3.	Individual Freedom	Yes []	No []	N/A [x]
4.	Personal Responsibility	Yes []	No []	N/A [x]
5.	Family Empowerment	Yes []	No []	N/A [x]

For any principle that received a "no" above, please explain:

#### **B. PRESENT SITUATION:**

According to Florida Health Care Association, there are no current requirements for immunization. Some facilities voluntarily require their residents to prove immunization, but generally individuals and their physicians decide.

## C. EFFECT OF PROPOSED CHANGES:

All consenting nursing home residents would be immunized for influenza and PPV. All future consenting residents of nursing homes would be immunized against influenza and PPV.

## D. SECTION-BY-SECTION ANALYSIS:

N/A

# III. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT:

#### A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

N/A

# 2. Expenditures:

Florida Health Care Association states that both Medicare and Medicaid will directly cover the costs of the immunizations.

## B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

## 1. Revenues:

N/A

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# 2. Expenditures:

N/A

## C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

The costs for the small percentage of individuals who are under 65, do not qualify for Medicaid, and have no other insurance will be covered by the facility.

D. FISCAL COMMENTS:

## IV. CONSEQUENCES OF ARTICLE VII, SECTION 18 OF THE FLORIDA CONSTITUTION:

A. APPLICABILITY OF THE MANDATES PROVISION:

N/A

B. REDUCTION OF REVENUE RAISING AUTHORITY:

N/A

C. REDUCTION OF STATE TAX SHARED WITH COUNTIES AND MUNICIPALITIES:

N/A

## V. COMMENTS:

A. CONSTITUTIONAL ISSUES:

N/A

B. RULE-MAKING AUTHORITY:

Amendment # 3 grants the Agency for Health Care Administration rule-making authority to implement the bills provisions.

C. OTHER COMMENTS:

N/A

## VI. AMENDMENTS OR COMMITTEE SUBSTITUTE CHANGES:

Amendment # 1 clarifies that a new resident must consent in order to be immunized for the flu vaccine.

Amendment # 2 is a clarifying amendment to make consistent the administering of PPV vaccine changing time table from 5 days to 5 working days.

Amendment # 3 grants the Agency for Health Care Administration rule-making authority to implement the bills provisions.

Amendment # 4 is a technical amendment that changes the term "polysaccharide pneumcoccal" to "pneumcoccal polysaccharide."

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	Amendment # 5 is a technical amendment that changes "influenzae virus" to "influenza viruses."			
I.	SIGNATURES:			
	COMMITTEE ON ELDER & LONG TER	M CARE:		
	Prepared by:	Staff Director:		
	Quinn Henderson	Tom Batchelor, Ph. D.		
	AS REVISED BY THE COMMITTEE ON ELDER & LONG TERM CARE:			
	Prepared by:	Staff Director:		
	Melanie Meyer	Tom Batchelor, Ph.D.		

Council Director:

Mary Pat Moore

**STORAGE NAME**:

Prepared by:

Quinn Henderson

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