

SENATE STAFF ANALYSIS AND ECONOMIC IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

BILL: CS/CS/ SB 1628

SPONSOR: Committees on Education and Health, Aging, and Long-Term Care and Senator Pruitt

SUBJECT: Immunizations

DATE: March 6, 2002 REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	<u>Harkey</u>	<u>Wilson</u>	<u>HC</u>	<u>Favorable/CS</u>
2.	<u>deMarsh-Mathues</u>	<u>O'Farrell</u>	<u>ED</u>	<u>Favorable/CS</u>
3.	_____	_____	<u>AEP</u>	_____
4.	_____	_____	<u>AP</u>	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

I. Summary:

The bill requires a postsecondary education institution to provide every student who has been accepted for admission detailed information about the risks associated with meningococcal meningitis and hepatitis B. A student who lives in on-campus housing must provide documentation of vaccination against the diseases or sign a waiver acknowledging receipt of the information. A separate waiver must be signed for each disease. Postsecondary institutions are not required to provide or pay for vaccinations against meningitis and hepatitis B.

This bill creates s. 381.0421, F.S., and provides an effective date of July 1, 2002.

II. Present Situation:

Meningitis

According to the U.S. Centers for Disease Control and Prevention (CDC), "Meningitis is an infection of the fluid of a person's spinal cord and the fluid that surrounds the brain. People sometimes refer to it as spinal meningitis. Meningitis is usually caused by a viral or bacterial infection. Knowing whether meningitis is caused by a virus or bacterium is important because the severity of illness and the treatment differ. Viral meningitis is generally less severe and resolves without specific treatment, while bacterial meningitis can be quite severe and may result in brain damage, hearing loss, or learning disability. For bacterial meningitis, it is also important to know which type of bacteria is causing the meningitis because antibiotics can prevent some types from spreading and infecting other people. Before the 1990s, *Haemophilus influenzae* type b (Hib) was the leading cause of bacterial meningitis, but new vaccines being given to all children as part of their routine immunizations have reduced the occurrence of invasive disease due to *H. influenzae*. Today, *Streptococcus pneumoniae* and *Neisseria meningitidis* are the leading causes of bacterial meningitis."

Approximately 3,000 cases of meningococcal disease occur each year in the United States. Even with antibiotic treatment, 10-13 percent of patients die. For approximately 10 percent of those who survive, severe impairment follows the disease, which could include mental retardation, hearing loss and loss of limbs.

In a press release from the CDC, dated October 20, 1999, the Advisory Committee on Immunization Practices (ACIP) announced modified guidelines for use of the polysaccharide meningococcal vaccine to prevent bacterial meningitis, particularly for college freshmen who live in dormitories. The press release contained the following statement:

At its October 20, 1999 meeting, the ACIP, citing results of two CDC studies done in 1998 which identified the slightly higher risk among freshman dormitory residents, recommended that those who provide medical care to this group give information to students and their parents about meningococcal disease and the benefits of vaccination. Vaccination should be provided or made easily available to those freshmen who wish to reduce their risk of disease. Other undergraduate students wishing to reduce their risk of meningococcal disease can also choose to be vaccinated.

The currently available vaccine protects against some types (serogroups) of the bacterium *Neisseria meningitidis* (also called meningococcus), an important cause of bacterial meningitis and sepsis in children and young adults in the United States. A single dose of the vaccine is recommended, and vaccination will decrease the risk of disease caused by *N. meningitidis* serogroups A, C, Y, and W-135. However, vaccination will not totally eliminate risk of the disease because the vaccine does not protect against serogroup B and because, although it is highly effective against serogroups C and Y, it still does not confer 100 percent protection against these serogroups. In 1998-1999, serogroups C and Y caused about 70 percent of cases among college students.

A vaccine, like any medicine, is capable of causing serious problems, such as severe allergic reactions. The CDC states that the risk of the meningococcal vaccine causing serious harm, or death, is extremely small and getting meningococcal vaccine is much safer than getting the disease. Some people who get meningococcal vaccine have mild side effects, such as redness or pain where the shot was given. These symptoms usually last for 1-2 days. A small percentage of people who receive the vaccine develop a fever. If a serious allergic reaction occurred, it would happen within a few minutes to a few hours after the shot. Signs of a serious allergic reaction can include difficulty breathing, weakness, hoarseness or wheezing, a fast heart beat, hives, dizziness, paleness, or swelling of the throat. A person experiencing a severe allergic reaction should call or see a doctor right away.

Hepatitis B

According to the CDC, "Hepatitis B is a serious disease caused by a virus that attacks the liver. The virus, which is called hepatitis B virus (HBV), can cause lifelong infection, cirrhosis (scarring) of the liver, liver cancer, liver failure, and death. Hepatitis B vaccine is available for all age groups to prevent hepatitis B virus infection."

Immunization Requirements for Middle and High School Students

Under Rule 64D-3.011, F.A.C., prior to admittance to a public or nonpublic school, grades preschool through grade 12, a student must present a certificate of immunization for prevention of diphtheria, pertussis, tetanus, poliomyelitis, rubeola, rubella, and mumps. Prior to entering 7th grade, students must present evidence of completion of the hepatitis B series, a second dose of measles vaccine, and a tetanus-diphtheria booster.

Immunization Requirements for Public Colleges and Universities

Students of public universities and colleges are required to provide proof of immunization for measles and rubella before acceptance into an institution. This requirement is established in Rule 6C-6.001(5), Florida Administrative Code (FAC). Many private universities and community colleges that are located in Florida, which are not governed by the State Board of Education, have also adopted policies requiring proof of measles and rubella immunization prior to admission. However, there are no requirements for vaccination against meningococcal meningitis prior to acceptance into a postsecondary educational institution.

The population of students in colleges and private universities who live in dormitories is not known. The dormitory capacity of state universities is given below:

Dormitory capacity at state universities, 1999-2000

University of Florida	6,638
Florida State University	4,081
Florida A&M University	2,973
University of South Florida	2,965
Florida Atlantic University	1,336
University of West Florida	1,048
University of Central Florida	2,091
Florida International University	1,796
University of North Florida	1,530
Florida Gulf Coast University	520
Total	24,978

III. Effect of Proposed Changes:

The bill requires a postsecondary education institution to provide every student who has been accepted for admission detailed information about the risks associated with meningococcal meningitis and hepatitis B. The student must also be provided with information related to the availability, effectiveness, and known contraindications of any required or recommended vaccine. A student who lives in on-campus housing must provide documentation of vaccination against the diseases or provide a signed waiver acknowledging receipt of the information. If the student is 18 years of age or older, he or she must sign the waiver; if the student is a minor, his or her parent or guardian signs a waiver. A separate waiver must be signed for each disease.

The bill states that the postsecondary education institutions are not required to provide or pay for the vaccinations.

The bill takes effect July 1, 2002.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

The provisions of this bill have no impact on municipalities and the counties under the requirements of Art. VII, s. 18 of the Florida Constitution.

B. Public Records/Open Meetings Issues:

The provisions of this bill have no impact on public records or open meetings issues under the requirements of Art. I, s. 24(a) and (b) of the Florida Constitution.

C. Trust Funds Restrictions:

The provisions of this bill have no impact on public records or open meetings issues under the requirements of Art. I, s. 24(a) and (b) of the Florida Constitution.

V. Economic Impact and Fiscal Note:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

Private universities and colleges would incur the cost of providing information to individuals residing in on-campus housing.

Students would incur the cost of the vaccinations for meningitis and hepatitis B.

The Department of Health estimates that each student's meningitis vaccination would cost \$88.00.

The market price of a single dose of the hepatitis B vaccine is approximately \$24.24, and three doses are required to complete the series.

C. Government Sector Impact:

State universities, colleges, and community colleges would incur the cost of providing information to all students and providing waiver forms to individuals residing in on-campus housing.

VI. Technical Deficiencies:

The bill requires a postsecondary institution to inform every student who has been accepted for admission of the risks associated with the specified diseases. It is not clear whether the institution would have to inform every student on campus or only first-time-in-college students.

VII. Related Issues:

None.

VIII. Amendments:

None.

This Senate staff analysis does not reflect the intent or official position of the bill's sponsor or the Florida Senate.
