

Local Fiscal Highlights

| LOCAL GOVERNMENT | FY 1999 | FY 2000 | FUTURE YEARS |
|-------------------------------|-------------------------------|-------------------------------|--------------------------------|
| Local Health Districts | | | |
| Revenues | - 0 - | - 0 - | - 0 - |
| Expenditures | Potential negligible decrease | Potential negligible decrease | Potential negligible increase* |

Note: For most local governments, the fiscal year is the calendar year. The school district fiscal year is July 1 through June 30.

*This assumes that the provisions being suspended in HB 200 are reinstated as currently existing in the Revised Code on July 1, 2000.

- Without the suspension of the section of Revised Code requiring the immunizations, local health districts might have faced a minimal increase in expenses in staff time for Hepatitis B immunization activities. The Ohio Department of Health purchases the vaccine and distributes it to local health districts. The added expense would occur if a child had previously received other standard childhood vaccines and needed to make an additional trip to a local health department clinic solely for the Hepatitis B vaccine.
- With the suspension of this provision, there will be a potential negligible decrease in expenditures for local health districts until Section 3313.671 of the Revised Code as currently exists is reenacted on July 1, 2000.

Detailed Fiscal Analysis

Prior to the enactment of Am. Sub. SB 153 of the 122nd G.A., children entering kindergarten had 14 days in which to prove immunization against mumps, rubeola, rubella, poliomyelitis, diphtheria, pertussis, and tetanus. SB 153 added Hepatitis B to that list for children entering kindergarten in the school year beginning in 1999. The Department of Health estimated that it would cost approximately \$500,000 to cover the unvaccinated population in Ohio covered by this bill. (ORC 3313.671)

In 1995, there were an estimated 160,000 children age 5 in Ohio, according to information provided by HCFA. Of this amount, about 70 to 80 percent have already been vaccinated against Hepatitis B. Of the non-vaccinated group, studies show that about half can either afford the vaccination or have private insurance that will cover the costs of the immunization. Of the remaining group, the majority is covered with funds from the federal government; either Medicaid or the Vaccine for Children program. The immunizations for the remaining group, underinsured children, are state financed.

This bill would suspend, until June 30, 2000, the provisions in Section 3313.671 of the Revised Code that cover Hepatitis B.

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