

# Fiscal Note & Local Impact Statement

127<sup>th</sup> General Assembly of Ohio

Ohio Legislative Service Commission  
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BILL: **Am. S.B. 58** DATE: **March 13, 2007**  
STATUS: **As Reported by Senate Health, Human Services, and Aging** SPONSOR: **Sen. Coughlin**  
LOCAL IMPACT STATEMENT REQUIRED: **No — No local cost**  
CONTENTS: **Pharmacist immunizations**

## State Fiscal Highlights

| STATE FUND   | FY 2007                                | FY 2008                                | FUTURE YEARS                           |
|--|--|--|--|
| <b>Occupational Licensing and Regulatory Fund (Fund 4K9)</b> |  |  |  |
| Revenues   | - 0 -                                  | - 0 -                                  | - 0 -                                  |
| Expenditures   | Potential increase,<br>minimal at most | Potential increase,<br>minimal at most | Potential increase,<br>minimal at most |

Note: The state fiscal year is July 1 through June 30. For example, FY 2007 is July 1, 2006 – June 30, 2007.

- **Fund 4K9 expenditures.** The State Board of Pharmacy's annual operating expenses are supported almost entirely by moneys appropriated from Fund 4K9. Based on a discussion with several of the Board's staff, it seems likely that the bill's provisions related to pharmacist immunizations will not create a significant and costly new administrative burden. In fact, it is arguable that incorporating this bill's provisions into its ongoing day-to-day business will be relatively easy. That said, the Board clearly will incur some ongoing annual cost, but the magnitude of that cost is difficult to precisely quantify. Legislative Service Commission fiscal staff, however, has not gathered any evidence suggesting that those annual operating costs could exceed minimal. The bill also appears to provide members of the Board with more flexibility in making certain decisions, which theoretically at least may make its operations more efficient.
- **State revenues.** The bill does not appear to have any direct effect on state revenues.

## Local Fiscal Highlights

| LOCAL GOVERNMENT                             | FY 2007           | FY 2008           | FUTURE YEARS      |
|--|-------------------|-------------------|-------------------|
| <b>Health Districts and Public Hospitals</b> |                   |                   |                   |
| Revenues                                     | - 0 -             | - 0 -             | - 0 -             |
| Expenditures                                 | Potential savings | Potential savings | Potential savings |

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

- **Local health districts and public hospitals.** It is plausible that local governmental entities, in particular health districts and public hospitals, could realize some efficiencies and resulting expenditure savings by expanding the



scope of permissible conduct by a pharmacist or pharmacy intern. Legislative Service Commission fiscal staff is unable to quantify the magnitude of that potential savings for any affected local governmental entity. That said, from the perspective of State Board of Pharmacy staff, under current law permitting administration of certain immunizations by pharmacists, there has been no discernible local expenditure savings.

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## ***Detailed Fiscal Analysis***

### **Overview**

For the purposes of this fiscal analysis, the bill most notably:

- Permits pharmacists to administer certain additional immunizations to adults and to administer certain medications to individuals in emergency situations resulting from adverse reactions to immunizations.
- Lowers the minimum age to 14 years (from 18 years of age or older) for individuals to receive influenza immunizations from pharmacists.
- Permits pharmacy interns working under the direct supervision of a pharmacist to administer influenza immunizations to adults.
- Places additional training, procedural, and certification requirements on pharmacy interns and modifies the immunization administration protocol.
- Requires the State Board of Pharmacy to adopt certain rules.
- Changes the requirements by which the Board votes to approve and confirm findings and orders.

### **Immunization provisions**

Amended Substitute Senate Bill 248 of the 123rd General Assembly, effective March 12, 2001, first established immunization standards and protocol for pharmacists. Under current law, pharmacists are permitted to administer adult immunizations for influenza, pneumonia, tetanus, hepatitis A, and hepatitis B.

### **State fiscal effects**

#### **State Board of Pharmacy**

To the degree that the bill affects state expenditures, it will most likely be in the licensing and regulatory activities performed by the State Board of Pharmacy.

**Regulatory activity.** Based on a discussion with staff of the State Board of Pharmacy, it seems unlikely that the bill will require the Board to perform a significant and costly new regulatory activity. In fact, it is arguable that incorporating this bill's provisions into the Board's ongoing day-to-day business will be relatively easy. That said, the Board clearly will incur some ongoing annual cost to monitor compliance with the bill's provisions, but the magnitude of that cost is rather difficult to precisely

quantify. Legislative Service Commission fiscal staff, however, has not gathered any evidence suggesting that those annual operating costs could exceed minimal.

The Board's day-to-day business is supported almost entirely by moneys appropriated from Fund 4K9, the occupational licensing and regulatory board fund that receives fees and other assessments collected by certain independent professional and occupational state licensing boards and in turn finances the annual operating expenses of those state boards. The fund's revenues consist of license fees and other assessments collected by those boards, as well as various fines and forfeitures collected by the State Board of Pharmacy.

**Orders and findings.** The bill changes the requirement by which the Board votes to approve and confirm a finding or order resulting from an investigation or hearing undertaken by one or more of the Board members. Under current law, a majority of the Board's members must confirm in the majority any order of the Board. The Board consists of nine members, with five members constituting a quorum. The bill changes this requirement to a majority of the members present and voting at a meeting at which there is a quorum. This provision appears to provide members of the Board with more flexibility in making certain decisions, which theoretically at least may make its operations more efficient.

#### **State revenues**

The bill does not appear to have any direct effect on state revenues.

#### **Local fiscal effects**

##### **Local health districts and public hospitals**

As a result of the bill, it is plausible that local governmental entities, in particular health districts and public hospitals, could realize some efficiencies and resulting expenditure savings by expanding the scope of permissible conduct by a pharmacist or pharmacy intern. Legislative Service Commission fiscal staff is unable to quantify the magnitude of that potential savings for any affected local governmental entity. That said, from the perspective of State Board of Pharmacy staff, under current law permitting administration of certain immunizations by pharmacists, there has been no discernible local expenditure savings.

#### **Civil actions**

One could plausibly argue that a potential indirect effect of the bill is that, by expanding the types of immunizations that can be administered by a pharmacist and permitting pharmacy interns to administer certain immunizations, there is an increased risk that a person or persons will file a civil action alleging harm. Such a matter would be filed in the appropriate court of common pleas, municipal court, or county court for adjudication. Based on a discussion with several of the State Board of Pharmacy's staff members, it appears that no civil actions have been filed alleging harm under current law and that was unlikely to change as a result of the bill.

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