

FISCAL NOTE
Requested by Legislative Council
05/03/2011

REVISION

Amendment to: Reengrossed
SB 2276

1A. State fiscal effect: *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

	2009-2011 Biennium		2011-2013 Biennium		2013-2015 Biennium	
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds
Revenues						
Expenditures			\$1,500,000		\$2,980,000	
Appropriations			\$1,500,000		\$2,980,000	

1B. County, city, and school district fiscal effect: *Identify the fiscal effect on the appropriate political subdivision.*

2009-2011 Biennium			2011-2013 Biennium			2013-2015 Biennium		
Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts

2A. Bill and fiscal impact summary: *Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).*

This bill creates a new section of the century code relating to the immunization program, and provides for collection of immunization data.

B. Fiscal impact sections: *Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.*

The federal government provides an allotment of vaccines through the Vaccines for Children Program (VFC) and Section 317 Program to the North Dakota Department of Health (NDDoH). They do not provide funding to purchase the vaccines. Consequently, the revenue and expense for use of the federal vaccines is \$0 and no appropriation is necessary. However, the Section 317 vaccines which may currently be used for the non VFC or insured children are not sufficient to vaccinate all of the insured children who are currently vaccinated at local public health units. The language in SB 2276 provides for \$1.5 million in general fund appropriation to purchase vaccines for insured children beyond the availability of the Section 317 vaccine allotment. If there will be inadequate funds to fund this purchasing program the department shall petition the emergency commission for a transfer from the state contingency fund in order to fund this purchasing program. The Section 317 vaccine allotment is expected to decline and may be unavailable in future years.

3. State fiscal effect detail: *For information shown under state fiscal effect in 1A, please:*

A. Revenues: *Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.*

B. Expenditures: *Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.*

Vaccines will be received through the federal vaccine purchasing contract at the federal Centers for Disease Control and Prevention vaccine contract on behalf of the local public health units in ND. Vaccine is estimated to cost approximately \$1.28 million for the first year of the biennium and \$1.35 million for year two which includes a 5% increase. Total vaccine purchases of \$2.63 million for the 2011-13 biennium will be funded using the Section 317

allotment of vaccine and \$1.5 million of general funds.

Vaccine costs for the 2013-15 biennium have been inflated 5% each year for a total cost of \$2.98 million. The Section 317 vaccine allotment is expected to decline and may be unavailable in future years to fund vaccine purchases.

C. Appropriations: *Explain the appropriation amounts. Provide detail, when appropriate, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation is also included in the executive budget or relates to a continuing appropriation.*

Included in section 3 is an appropriation of \$1,500,000 from the general fund to the department. The funding or the appropriation for this project is not included in the Health Department's appropriation bill (HB 1004).

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