



Senate Fiscal Agency  
P. O. Box 30036  
Lansing, Michigan 48909-7536

## BILL ANALYSIS



Telephone: (517) 373-5383  
Fax: (517) 373-1986  
TDD: (517) 373-0543

Senate Bill 800 (as introduced 9-23-07)  
Sponsor: Senator John J. Gleason  
Committee: Health Policy

Date Completed: 9-9-08

**CONTENT**

**The bill would amend the Public Health Code to require a hospital to establish a strategic plan for managing its supply of the influenza vaccine, beginning October 1, 2008; and require the hospital to offer the vaccine to all patients at least 65 years old, under certain circumstances.**

A hospital's strategic plan would have to be consistent with guidelines or recommendations issued by the Federal Centers for Disease Control and Prevention (CDC) or by the Advisory Committee on Immunization Practices of the CDC.

During the influenza season (i.e., the period between October 1 and March 1), if the hospital had the influenza vaccine available and supply were consistent with the hospital's strategic plan, the hospital would have to inform each person who was at least 65 years old who was admitted for at least 24 hours that the vaccine was available, and offer to provide it to those people for whom it was not contraindicative.

If the person consented to be vaccinated against influenza and a physician, nurse, pharmacist, or other independent practicing licensed health care professional determined that there was not a relative or absolute contraindication to giving the vaccine, he or she would have to administer the vaccination before the patient was discharged from the hospital and document it in the patient's medical record. The documentation could be in the form of a written notice included in the patient's medical record indicating that he or she had received the vaccine on a previous occasion, received it, or refused it or that the vaccine was not administered because a contraindication rendered its administration inadvisable.

The section added by the bill would be repealed on April 1, 2011.

Proposed MCL 333.21529

Legislative Analyst: Julie Cassidy

**FISCAL IMPACT**

The bill would have no fiscal impact on State or local government except in regard to government-owned hospitals. Hospitals would be likely to incur costs related to the development and implementation of a strategic influenza vaccination plan. Additional staff and vaccination supplies could be required in order for hospitals to comply with the legislative mandate.

Fiscal Analyst: Matthew Grabowski

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.