



## Legislative Fiscal Bureau

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August 4, 2009

TO: Members  
Joint Committee on Finance

FROM: Bob Lang, Director

SUBJECT: Health Services: Governor's Section 13.10 Requests for the Use of Federal Economic Stimulus Funding for Immunization Activities -- Agenda Item III

### REQUEST

The Governor requests that the Joint Committee on Finance approve the allocation and expenditure of \$2,114,145 (\$1,009,334 in 2009-10 and \$1,104,811 in 2010-11), from moneys received under the federal American Recovery and Reinvestment Act (ARRA) of 2009, to support immunization activities conducted by the state.

### BACKGROUND

The Department of Health Services (DHS) is required to carry out a statewide immunization program, addressing diphtheria, measles, mumps, whooping cough, polio, rubella, chickenpox, and other specified diseases. Any person who immunizes an individual is required to maintain records identifying the manufacturer and lot number of the vaccine used, the date of immunization and the name and title of the person who administered the immunization. Children entering school or day care must obtain certain immunizations within 30 days of enrollment.

Current law also requires DHS to provide the vaccines without charge, if federal or state funds are available for the vaccines, upon request of a school district or a local health department. Persons immunized may not be charged for vaccines furnished by DHS.

The immunization program is supported by federal funds, with a sum sufficient state GPR appropriation for the purchase of vaccines if federal funds are insufficient. The state has never expended any moneys from this sum sufficient appropriation since it was created in 1997 Act 27 (the 1997-99 biennial budget act). Federal funding comes from two sources: the vaccines for children (VFC) program, and funding distributed by the Centers for Disease Control and

Prevention (CDC) under section 317 of the Public Health Service Act.

The Department also maintains the Wisconsin immunization registry (WIR), an online automated system that tracks immunization of children in Wisconsin. This system is linked to the vital records program, and can link electronically to public and private immunization providers. Currently, the WIR has over 9,400 users, and over 2,700 schools with "look-up" access to the system.

## **ANALYSIS**

The state has applied for three separate immunization-related allocations under the stimulus bill: (a) \$1,773,600 for ARRA-funded immunization of children and adults (referred to as the "supplemental allocation" in this paper); (b) \$150,500 for sentinel site project regions; and (c) \$190,000 for the evaluation of the effectiveness of meningococcal and other vaccines. In addition, Wisconsin is eligible to receive \$3,115,400 through ARRA for the purchase of vaccines. However, this funding is not allocated through state appropriations and is not part of this request.

For each of the following allocations, the administration has submitted grant applications to the federal government. The deadline for submission of applications was June 26, 2009, for the meningococcal vaccine allocation, and July 2, 2009, for the supplemental and sentinel site allocations. DHS has not received notices regarding these awards, but staff indicates that modifications to the submitted grants would not be possible at this time.

### *A. Supplemental Allocation (\$1,773,600)*

The administration is requesting the authority to allocate and expend \$1,773,600 (\$886,800 in each year of the biennium) for the supplemental allocation to support state immunization operations. The administration plans to use this supplemental funding for several activities: (a) \$1,324,900 for expanded activities by local health departments; (b) \$253,700 to develop interface capacity between the WIR and the special supplemental nutrition program for women, infants and children (WIC) information system; and (c) \$195,000 to develop interface capacity between WIR and electronic medical records.

The Department plans to establish contracts with local health departments by December 31, 2009, to fund any of the immunization activities listed below.

- a. Provision of vaccines to students through school-based clinics;
- b. Administration of vaccines at WIC program sites;
- c. Improvements to equipment for vaccine storage, monitoring or transport;
- d. Assistance to private providers with data entry to promote utilization of the WIR;

- e. Adult vaccination initiatives for uninsured or underinsured individuals, and human papillomavirus (HPV) vaccines for uninsured or underinsured women under 27 years of age;
- f. Immunization initiatives in day care centers; and
- g. Development of public education materials or media campaigns.

In addition to these activities conducted by local health departments, DHS plans to conduct activities to improve the capacity of the WIR to exchange information with other electronic records or data systems. Specifically, DHS will allocate \$253,700 to the WIC program for immunization record assessments and referrals, data entry into the WIR, the administration of immunization at WIC project sites, and the creation of a data interchange between the WIR and the WIC data system (the real-time online statewide information exchange (ROSIE)). In addition, DHS will allocate \$195,000 to Electronic Data Systems, Inc. (EDS) to allow for data exchange between the WIR and electronic medical records.

The amount provided to each local health department will be allocated according to the same formula that non-ARRA funding is distributed. The attachment to this paper lists these estimated allocations, by county. In some cases the total county amount reflects separate allocations made to local agencies within that county.

#### *B. Sentinel Site Funding*

Wisconsin is one of eight states that receive federal grant funding for an immunization information systems (IIS) sentinel site project, designated by CDC. The Wisconsin sentinel site project covers Rock, Jefferson, Walworth, and Waukesha Counties, and is intended to maintain a vaccine surveillance system for all vaccines administered in that area, improve the quality of the data collected of the IIS, and improve the ability to use IIS for evaluative and epidemiologic activities.

Only states that currently receive IIS Sentinel Site grants are eligible for this funding allocation under ARRA. The activities supported by these funds must meet at least one of the following requirements: (a) improve IIS and conduct outreach to providers to ensure correct data entry; (b) incorporate certain recommendations into IIS data processing; (c) incorporate IIS into community-based coverage assessment strategies (for example, school-based activities); or (d) improve participation in current Sentinel Site areas, or expand sentinel site areas.

DHS plans to spend \$150,500 to improve the tracking of immunizations received by school children. This funding would be used to improve the quality of data entered into the WIR to ensure that data is entered in the correct format, and to facilitate entry of immunization data into the WIR by schools. While the sentinel site project is designated in specific counties, DHS indicates that these improvements will benefit the Department's ability to track immunizations state-wide

C. *Meningococcal and Other Vaccines (\$190,000)*

ARRA provides a competitive grant to evaluate effectiveness of meningococcal vaccination, and increase public health surveillance for other diseases that can be prevented by vaccines. The CDC will distribute approximately \$5.9 million for these grants, which are intended to supplement existing epidemiology and laboratory capacity for infectious disease projects.

DHS plans to use this funding to support 1.0 vaccine preventable disease surveillance coordinator, as a two-year project position. The \$190,000 includes salary, fringe benefits, travel, supplies, and other costs of hiring and training this position. The position would be responsible for a range of surveillance activities related to meningococcal vaccine, tracking of meningococcal disease in the state, and the investigation of other vaccine preventable diseases.

**ALTERNATIVES**

1. Approve the Governor's request to increase expenditure authority in the Department of Health Services by \$2,114,145 (\$1,009,334 in 2009-10 and \$1,104,811 in 2010-11), to support immunization activities.
2. Deny the request.

Prepared by: Sam Austin  
Attachment

## ATTACHMENT

### Planned Distribution of ARRA Immunization Funds to Local Health Departments

<u>County*</u>	<u>Allocation</u>	<u>County*</u>	<u>Allocation</u>
Adams	\$5,660	Milwaukee	315,361
Ashland	7,845	Monroe	11,940
Barron	9,712	Oconto	8,178
Bayfield	5,924	Oneida	8,712
Brown	54,984	Outagamie	38,093
Buffalo	3,848	Ozaukee	11,967
Burnett	5,338	Pepin	3,557
Calumet	7,394	Pierce	8,645
Chippewa	13,108	Polk	10,804
Clark	9,086	Portage	14,387
Columbia	10,773	Price	5,307
Crawford	4,875	Racine	50,006
Dane	88,333	Richland	5,393
Dodge	14,139	Rock	34,799
Door	6,067	Rusk	5,346
Douglas	11,421	Sauk	13,586
Dunn	10,681	Sawyer	7,083
Eau Claire	18,789	Shawano	9,979
Florence	3,268	Sheboygan	23,354
Fond du Lac	18,129	St. Croix	15,607
Forest	5,072	Taylor	6,549
Grant	10,480	Trempealeau	7,580
Green	8,312	Vernon	8,081
Green Lake	5,396	Vilas	6,253
Iowa	6,596	Walworth	19,250
Iron	4,700	Washburn	5,679
Jackson	6,673	Washington	20,039
Jefferson	18,952	Waukesha	49,927
Juneau	7,521	Waupaca	11,432
Kenosha	37,039	Waushara	7,584
Kewaunee	5,071	Winnebago	37,309
La Crosse	21,017	Wood	<u>16,251</u>
Lafayette	5,361		
Langlade	6,213	Total	\$1,324,920
Lincoln	8,279		
Manitowoc	16,036		
Marathon	26,228		
Marinette	9,093		
Marquette	4,897		
Menominee	4,570		

\*Total allocation to a county may reflect multiple allocations to local agencies within that county.