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COMMUNICABLE DISEASE OUTBREAKS

House Bill 4021 (Substitute H-1) First Analysis (11-10-99)

Sponsor: Rep. Paul Wojno
Committee: Health Policy

THE APPARENT PROBLEM:

In March of 1997, Calhoun County experienced an outbreak of hepatitis A from tainted strawberries served to school children as part of the hot-lunch program. According to a representative from the Calhoun County Health Department, the county on average sees only between one to five cases of hepatitis A a year. By time the outbreak ran its course at the end of December, there had been 328 confirmed cases of the disease, and 11,750 inoculations had been administered of immune globulin (an immunizing agent that gives short-term protection for both pre- and post-exposure from the virus). The medical community's response to the outbreak was a collaborative effort between the Department of Community Health (DCH), the Calhoun County Health Department, local hospitals, and community volunteers. Without such a coordinated response, it is believed that the incidents of infection could have been much higher.

Though the medical community successfully met the challenges that the outbreak created, the situation did underscore the need to have guidelines in place in the advent of another outbreak, whether from hepatitis A or another communicable disease. Some believe that it would be helpful to place language in statute that could act as a framework for the DCH to develop policies or procedures to deal with future communicable disease outbreaks.

THE CONTENT OF THE BILL:

The bill would amend the Public Health Code to add a provision regarding the response of the Department of Community Health to an outbreak of a communicable disease in the Public Health Code. Under the bill, if the director of the department determined that there was an outbreak of a communicable disease in a community that warranted the targeted or widespread use of an immunizing agent, the director could, but would not be obligated to, make a sufficient amount of the appropriate immunizing agent available to the affected community, if available. Action taken under

this provision would be pending the receipt or commitment of adequate funding for the immunizing agent from the federal Centers for Disease Control and Prevention or other funding sources, or both. "Communicable disease" is currently defined in the code as an illness caused by a specific infectious agent that resulted from direct or indirect transmission from an infected individual, animal, or the environment. (Under R 325.172 of the Michigan Administrative Code, communicable diseases include hepatitis infections, listeriosis and salmonellosis, Lyme disease, mumps, rubella, and influenza.) Further, the director would be required under the bill to work in cooperation with local health departments in conducting the immunization program described in the bill.

MCL 333.9216 and 333.9217

FISCAL IMPLICATIONS:

According to the House Fiscal Agency, the bill has no fiscal implications. (11-9-99)

ARGUMENTS:

For:

The bill would not place any new mandates on the Department of Community Health, but would provide a framework for the development of policies and procedures to address future outbreaks of communicable diseases. The outbreak of hepatitis A in Calhoun County two years ago underscores the need to have such a plan in effect. A sudden outbreak of a communicable disease requires a quick and organized response. Local communities may need help from the state in acquiring, distributing, and funding immunizing agents to stem the disease. In addition, responses to an outbreak of a disease would depend on which disease was involved. For example, an immunizing agent may not exist for all diseases classified as a communicable disease. Therefore, any statutory language should be flexible enough for the department to design

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appropriate responses to fit disease outbreaks. Further, though permissive in nature, it is hoped that the bill would bring attention to the need for coordinated efforts between the department, local health departments, and the local medical community in stemming the progression of an outbreak of a communicable disease and thus spur the development of a workable policy.

POSITIONS:

The Michigan Association for Local Public Health supports the bill. (11-8-99)

Analyst: S. Stutzky

■ This analysis was prepared by nonpartisan House staff for use by House members in their deliberations, and does not constitute an official statement of legislative intent.