

Department of Planning and Budget 2012 Fiscal Impact Statement

1. Bill Number: HB829

House of Origin ☐ Introduced ☐ Substitute ☒ Engrossed
Second House ☐ In Committee ☐ Substitute ☐ Enrolled

2. Patron: Farrell

3. Committee: House, Welfare, and Institutions

4. Title: Virginia Immunization Information System; linkages to other VDH databases

5. Summary: Allows the Commissioner of Health to provide health care providers authorized to access the Virginia Immunization Information System to also access other information maintained by the Department of Health, including newborn screening records, newborn hearing screening records, and blood-lead level records.

6. Budget Amendment Necessary: No.

7. Fiscal Impact Estimates: Preliminary. See item #8.

Expenditure Impact: Virginia Department of Health

<i>Fiscal Year</i>	<i>Dollars</i>	<i>Positions</i>	<i>Fund</i>
FY 2012	\$0	0.00	NGF
FY 2013	\$248,160	0.00	NGF
FY 2014	\$224,396	0.00	NGF
FY 2015	\$136,992	0.00	NGF
FY 2016	\$136,992	0.00	NGF
FY 2017	\$136,992	0.00	NGF
FY 2018	\$136,992	0.00	NGF

8. Fiscal Implications: The fiscal impact of this legislation is uncertain due to the fact that the legislative language is permissive in nature, not mandatory. The linkages described in the legislation would be phased-in over a multi-year period, and would be developed and implemented only if and when adequate resources are available. For example, VDH can implement the envisioned linkages between VIIS and the blood lead and newborn hearing screening systems independently. However, during Phase II of the project, VDH would require the assistance and support of the Department of General Services (DGS) to implement linkages between VIIS and the newborn screening system.

The nongeneral funds to be allocated for this initiative include several existing federal grant awards from the U.S. Department of Health and Human Services and Centers for Disease Control and Prevention, including Childhood Immunization and Vaccines for Children; Development, Maintenance, and Enhancement of Early Hearing Detection and Intervention Information System Surveillance Programs; and the Maternal and Child Health Title V Block

Grant. These grant funds are existing awards that will be obligated to this initiative should the legislation pass. VDH will use these nongeneral funds to fully cover the cost, including DGS costs, contingent upon the establishment of a Memorandum of Agreement describing the development, implementation, and sustainment of all phases of the newborn screening interface project.

The estimates have been revised to reflect the multi phase approach and incorporate the costs associated with the DGS portion of the project. The estimates are based on historical costs for information technology projects and include programming and server costs. Server costs from the Virginia Information Technologies Agency are anticipated to be approximately \$40,000 per year beginning in FY 2014, with the remainder of expenditures devoted to programming hours. The first year start-up costs include the application development, installation, setup, and initiation.

9. Specific Agency or Political Subdivisions Affected: Virginia Department of Health and Department of General Services

10. Technical Amendment Necessary: No.

11. Other Comments: None.

Date: 1/24/2012

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c: Secretary of Health and Human Resources
Secretary of Administration