

SB

194

REQUEST: FISCAL NOTE

Revision Date: _____ Agency Affect: Health & Social Services
 Title: An Act Relating to Hepatitis B BRU: State Health Services
 Sponsor: Menard, Collins Components: Epidemiology
 Requester: Senate HES

EXPENDITURES/REVENUES: (Thousands of Dollars)

OPERATING	FY 92	FY 93	FY 94	FY 95	FY 96	FY 97
Personal Services						
Travel						
Contractual						
Supplies	29.0	19.4	19.4	19.4	19.4	19.4
Equipment						
Land & Structures						
Grants, Claims						
Miscellaneous						
TOTAL OPERATING	29.0	19.4	19.4	19.4	19.4	19.4

CAPITAL	0.0	0.0	0.0	0.0	0.0	0.0
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REVENUE	0.0	0.0	0.0	0.0	0.0	0.0
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FUNDING: (Thousands of Dollars)

General Funds	29.0	19.4	19.4	19.4	19.4	19.4
Federal Funds						
Other						
TOTAL	29.0	19.4	19.4	19.4	19.4	19.4

POSITIONS

Full-Time	0	0	0	0	0	0
Part-Time	0	0	0	0	0	0
Temporary	0	0	0	0	0	0

ANALYSIS: (attach a separate page if necessary)

SUPPLIES

Laboratory screening of 300 persons for FY 92 and 200 persons for each subsequent years @ \$8.04/person. As a result of the screening 5% will only receive the initial Hepatitis vaccine @ \$30.64/shot. The remaining individuals will receive the series of three shots @ \$91.92/series.

Prepared By: Peter N. Nakamura, M.D., MPH *PNN*
 Division: PUBLIC HEALTH
 Approved By Commissioner: Theodore Mala, M.D., MPH *Jay Mala*
 Agency: HEALTH & SOCIAL SERVICES

Phone: 465-3090
 Date: 04/24/91
 Date: 04/24/91

Distribution (by preparer):

Legislative Finance, Legislative Sponsor, Requestor,
 Office of Management & Budget, Impacted Agency(ies)

REQUEST: FISCAL NOTE

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 Title: An Act Relating to Hepatitis B BRU: State Health Services
 Sponsor: Menard, Collins Components: Epidemiology
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EXPENDITURES/REVENUES: (Thousands of Dollars)

OPERATING	FY 91	FY 92	FY 93	FY 94	FY 95	FY 96
Personal Services						
Travel						
Contractual						
Supplies	115.3	115.3	115.3	115.3	115.3	115.3
Equipment						
Land & Structures						
Grants, Claims						
Miscellaneous						
TOTAL OPERATING	115.3	115.3	115.3	115.3	115.3	115.3
CAPITAL	0.0	0.0	0.0	0.0	0.0	0.0
REVENUE	0.0	0.0	0.0	0.0	0.0	0.0

FUNDING: (Thousands of Dollars)

General Funds	115.3	115.3	115.3	115.3	115.3	115.3
Federal Funds						
Other						
TOTAL	115.3	115.3	115.3	115.3	115.3	115.3

POSITIONS

Full-Time	0	0	0	0	0	0
Part-Time	0	0	0	0	0	0
Temporary	0	0	0	0	0	0

ANALYSIS: (attach a separate page if necessary)

See Attached

Prepared By: Peter N. Nakamura, MD, MPH
 Division: PUBLIC HEALTH
 Approved By Commissioner: Theodore Mala, MD, MPH
 Agency: HEALTH & SOCIAL SERVICES

Phone: 465-3090
 Date: 04/17/91
 Date: _____

Distribution (by preparer):
 Legislative Finance, Legislative Sponsor, Requestor,
 Office of Management & Budget, Impacted Agency(ies)

SS Senate Bill 194

Estimating the cost of screening and vaccinating emergency medical services providers and law enforcement officers, who do not reside in a municipality that has the power to establish a program of hepatitis B testing and vaccination, is difficult. According to the Alaska Department of Public Safety, there are 258 uniformed State Troopers, plus another 32 uniformed court officers, and 125 village public safety officers (VPSO's). Under recent OSHA requirements, if these people come into contact with blood or other body fluids in the emergency patient care setting at least once a month, then their employer would be required to provide hepatitis B testing and vaccination. We also estimate that there are about 175 volunteer EMT's outside incorporated cities and boroughs in Alaska, but this bill is not limited to volunteers as currently written. We do not know exactly how many paid EMT's or EMT's, such as those that may work as a Community Health Aide, or others in remote communities, may live outside incorporated cities and boroughs, but we estimate the number to be approximately 600. However, Community Health Aides already are provided hepatitis B screening and vaccinations through the Alaska Area Native Health Service, or Native Regional Health Corporations. Therefore, as currently written, this legislation may require the state to provide hepatitis B screening and vaccinations to about 1000 to 1200 law enforcement officers and emergency medical services providers. At a cost of about \$100 per person, the cost of implementing this bill could be up to \$115,000 for the first year, and probably the same per year in subsequent years to provide hepatitis B testing and vaccinations to newly trained law enforcement officers and emergency medical service providers entering the system. Also, without doing a statewide survey, we cannot estimate how many of these people already have been vaccinated.

FISCAL NOTE

STATE OF ALASKA
1991 LEGISLATIVE SESSION

BILL NO. SSSB 194

Revision Date: _____
Title: "An Act relating to Hepatitis B
vaccinations. . ."
Sponsor: Senator Menard
Requestor: Senate HESS

Department Affected: Public Safety
BRU: Alaska State Troopers
Component: Detachments

COMPONENT SERIAL NO.

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EXPENDITURES/REVENUES: (Thousands of Dollars) (Inflation not Included)

OPERATING	FY 92	FY 93	FY 94	FY 95	FY 96	FY 97
PERSONAL SERVICES						
TRAVEL						
CONTRACTUAL						
SUPPLIES						
EQUIPMENT						
LAND & STRUCTURES						
GRANTS, CLAIMS						
MISCELLANEOUS						
TOTAL OPERATING	-0-	-0-	-0-	-0-	-0-	-0-

CAPITAL	-0-	-0-	-0-	-0-	-0-	-0-
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REVENUE	-0-	-0-	-0-	-0-	-0-	-0-
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FUNDING: (Thousands of Dollars)

GENERAL FUND						
FEDERAL FUNDS						
OTHER/PROG RCPT						
TOTAL	-0-	-0-	-0-	-0-	-0-	-0-

POSITIONS:

FULL-TIME	0	0	0	0	0	0
PART-TIME	0	0	0	0	0	0
TEMPORARY	0	0	0	0	0	0

Estimate of current year impact None

ANALYSIS: (Attach a separate page if necessary)

No fiscal impact upon the Alaska State Troopers is anticipated.

Prepared by: Lt. Patrick Kasnick Phone: 269-5641
Division: Alaska State Troopers Date: 4/18/91

Approved by Commissioner: *Richard L. Burton* for Richard L. Burton
Agency: Department of Public Safety Date: 4/18/91

Distribution (by preparer): Legislative Finance, Legislative Sponsor, Requestor, OMB, & Impacted Agency(ies).



Alaska State Legislature

SENATE

Official Business

P.O. Box V
State Capitol
Juneau, Alaska 99811

Senator Curt Menard

SPONSOR STATEMENT:

SB194 (Finance): "An Act relating to hepatitis B vaccinations for Law enforcement officers and emergency medical services providers."

Hepatitis B is second in importance only to tobacco as a known human carcinogen. Hundreds of millions of people are chronically infected with the virus and face an elevated risk of acquiring liver cancer. Many chronic carriers appear healthy but can still transmit the virus through close contact and start the cycle of disease anew.

The Journal of Infectious Diseases reports "Yupik Eskimos of southwestern Alaska have the highest known prevalence of hepatitis B virus infection of any general population in the United States."

The high cost of the vaccine (approximately \$100 each) prevents universal vaccination but we can, and must, protect those at highest risk of infection. Those are the individuals that will benefit from the provisions of the bill before you.

A recent directive from OSHA mandates testing and vaccination programs for health care employees "at substantial risk." Currently that OSHA directive is being interpreted as paid employees only.

SB 194 puts into law the OSHA mandate and extends coverage to volunteers. Clearly all emergency responders are at the same risk independent of their paid or volunteer status.

Section (a): The Department of Health and Social Services is to provide the testing and vaccination program for all volunteers outside of municipalities who have assumed health powers.

Section (b): Municipalities with health powers will provide the program for all law enforcement officers and volunteer or paid emergency medical and rescue personnel.

Section (c): The Department of Public Safety will make the same testing and vaccination program available to all state troopers.

I appreciate your support of this legislation.

EMERGENCY MEDICAL SERVICES

LEGISLATIVE FACT SHEET for FY'92

Emergency Medical Services (EMS) is a system designed to respond to the needs of the general public when they are suddenly and unexpectedly taken ill or injured. Since these events are relatively rare in the life of an individual, it is easy, but mistaken to believe that these events are rare in a given community. In Alaska's larger communities, the range of calls fluctuates between 5 and 30 every day of the year. In our smaller communities it ranges from 2 to 30 per month. Although this may seem small, emergency situations in rural communities are frequently complicated with inadequate medical facilities, insufficient equipment and logistical problems.

The ultimate goal of the EMS system is the reduction of mortality and morbidity. Injury is the leading cause of death for Americans between 1 and 44 years of age. Virtually half of all children's deaths are accidental. Injuries cause the loss of more working years of life than all forms of cancer and heart disease combined. Clearly those of us interested in the quality of life in our communities must have at least a passing acquaintance with how we are addressing this public health problem.

The major components of the EMS system include citizen access, communications systems, adequate numbers of trained pre-hospital technicians, equipped ground and air transportation, hospital emergency departments and critical care centers, disaster planning and an informed general public. ***IN ALASKA, THE MAJORITY OF EMS RESPONSE IS ACCOMPLISHED BY COMMUNITY VOLUNTEERS.*** Because of legislative assistance and the support of the Department of Health and Social Services, more residents now have access to qualified emergency care in their time of need. At the same time, keeping volunteer support programs viable has become an even greater challenge. Currently, Alaska's EMS has over 2500 volunteer care providers, affiliated with 91 ambulance services and 56 first responder services.

As managers and volunteer coordinators, it is eminently clear that what worked yesterday, seldom works today. Recruitment based on an emotional commitment to do one's part following a community tragedy, or to provide a helping hand to one's neighbor no longer competes with the fear associated with individual liability, exposure to communicable diseases, scarce availability of funds and lack of State support.

For every state ems dollar invested there is a \$10 return in benefit. This benefit comes through reduction in mortality and morbidity as well as over \$4.5 Million dollars in uncompensated volunteer services to the state by 2,500 dedicated volunteers. This return is further enhanced through the fact that each regional office generates nearly 30% of its total budget.

EMERGENCY MEDICAL SERVICES SUMMARY SHEET

PRE-HOSPITAL RESOURCES

91 Certified Services
57 First Responder Services

118 Volunteer
17 Municipal
3 Commercial
0 Hospital based

41 Advanced Life Support

107 Basic Life Support

- Over 43,000 Ambulance calls answered annually
- Over 140,00 Emergency room visits annually

HOSPITAL RESOURCES

10 24-hr Emergency Rooms
0 Trauma Centers

10 Military
44 Operational Medical Director (VOL)

ADDITIONAL RESOURCES

60 Ambulances

10 Hazardous Materials Response teams
9 Critical Incident Stress Debriefing Teams

3 Regional EMS Councils

2500 Volunteer Emergency Medical Responders
150 Career Emergency Medical Responders

OSHA

Mandates Infection Control For EMS and Fire Service

by Gordon M. Sachs

Infection control is a growing concern throughout emergency services. While EMS and fire service managers recognize the need to protect their employees from the risks of communicable diseases, there has been little information available on the subject specific to their profession.

On Feb. 27, 1990, the U.S. Department of Labor's Occupational Safety and Health Administration (OSHA) released OSHA Instruction CPL 2-2.44B, "Enforcement Procedures for Occupational Exposure to Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV)." This document clarifies the requirements of those who employ health-care workers who may be occupationally exposed to HBV and HIV. Thus, the mandate is of vital importance to fire and emergency medical services throughout the nation.

OSHA released this instruction after concluding that the risk of emergency workers contracting HBV and HIV required an immediate response and that documentation existed to define

guidelines for such a response. Specifically, the U.S. Department of Health and Human Services/Centers for Disease Control (CDC) infection control guidelines formed the basis for "an appropriate and widely recognized and accepted standard of protection to be followed by health-care employers in carrying out their responsibilities," which could be carried out under the auspices of the Occupational Safety and Health (OSH) Act.

The "general duty clause" of the OSH Act provides that, "Each employer shall furnish to each of his employees employment and a place of employment which are free from recognized hazards that are causing or are likely to cause death or serious physical harm to his employees." This clause allows for the creation of standards, such as OSHA Instruction CPL 2-2.44B.

The OSHA instruction's definition of "health-care worker" includes paramedics, EMTs and other personnel, such as firefighters, whose work

involves direct contact with bodily fluids. Similarly, the document mandates that each state with an existing state OSHA plan "extend coverage under its procedures for addressing occupational exposure to HBV and HIV in the public sector, such as police, fire, ambulance and other emergency response workers" (see Table 1).

While the OSHA instruction is intended as an enforcement guideline, it is also an effective tool for identifying critical components of an infection control program. The document mandates that an infection control program address the following personal protective measures:

- Using disposable gloves whenever there is potential for contact with bodily fluids
- Using gowns, aprons or lab coats when splashes to skin or clothing with bodily fluids are likely to occur
- Using masks and protective eye-wear when contamination of mucous membranes (eyes, mouth or nose) with bodily fluids is likely to occur

- Placing pocket masks, resuscitation bags and other ventilation equipment in strategic locations where the need for resuscitation is likely, and providing such equipment to key personnel to minimize the need for mouth-to-mouth contact
- The mandatory use of the aforementioned personal protective equipment when performing invasive procedures or when the worker's skin or mucous membranes may come in contact with bodily fluids

The OSHA-mandated infection control program must also address the proper precautions to take while cleaning patient-care areas, equipment and blood spills, as well as procedures for disinfecting these areas. Additionally, the program must address the handling and disposal of potentially contaminated items, such as sharp instruments, disposable items and linens. Needles cannot be recapped or broken, and puncture-resistant containers must be easily accessible and located in any areas in which needles, syringes and other sharp instruments are commonly used. Bags and receptacles containing items contaminated with bodily fluids must be tagged or otherwise identified.

Based on the CDC infection control guidelines and the general duty clause of the OSH Act, the OSHA instruction identifies seven specific items that must be implemented. According to the instruction, "The non-use of any of these methods is likely to result in the continued existence of a serious hazard and may, therefore, allow for citation." These items are:

- All employees at substantial risk of directly contacting bodily fluids shall be offered HBV vaccinations free of charge.
- There shall be specific procedures for dealing with soiled linen.
- Reusable equipment shall be disinfected according to standard procedures.
- Objects contaminated with bodily fluids shall be placed in an impervious bag; if outside contamination of the bag is likely, a second bag shall be added.
- After removing gloves, hands and other skin surfaces shall be washed thoroughly and immediately after contact with bodily fluids.
- Specific follow-up procedures shall be followed after a possible exposure to bodily fluids:
 - a) The source patient shall be

informed of the incident and, on consent, be tested for HIV and HBV infections.

b) If consent is refused or the source patient tests positive for HIV, the health-care worker shall be evaluated clinically and by HIV antibody testing (and retesting after six weeks, 12 weeks and six months).

c) If consent is refused or the source

The significance
of the OSHA
initiative is
that emergency
services managers
will now be held
accountable for
the protection of
their workers.

patient tests positive for HBV, follow-up procedures for HBV exposure will depend on the immunization status of the worker.

- All high-risk health-care workers shall receive education on precautionary measures, epidemiology, modes of transmission and prevention of HIV/HBV. In addition, these workers must receive training regarding the location and proper use of personal protective equip-

ment, proper work practices and the concept of universal precautions.

Perhaps the most controversial of these provisions, due to the costs involved, are the requirements for hepatitis vaccination at no charge to the employee; mandatory education and training for all firefighters, EMTs and paramedics; and handwashing capabilities at all emergency scenes where there is potential for bodily fluid contact.

Prior to the release of the OSHA instruction, there was some confusion in the industry as to the meaning of the term "mandated by OSHA." The U.S. Fire Administration (USFA), considered by many to be the source for infection control information for fire services and EMS agencies, recognized the ties between the OSH Act's general duty clause and the CDC infection control guidelines. In December 1989, USFA distributed an open letter to all emergency response agencies, identifying hepatitis vaccines as an OSHA mandate and recommending that all emergency response personnel be immunized against all vaccine-preventable diseases. Until the release of the OSHA instruction, however, there were no widely known OSHA documents that specifically discussed those requirements (other than the proposed 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens.")

At OSHA public hearings on the proposed regulation in the fall of 1989, former U.S. Fire Administrator, Clyde Bragdon, testified on the need for such protection for firefighters, EMTs, and paramedics, citing examples of circumstances unique to these occupations in which the risk of exposure to communicable diseases is high. His testimony was supported and substantiated by representatives from the National Association of EMTs, the International Association of Fire Chiefs and the International Association of Fire Fighters, among others.

Testimony at the public hearings seemed to alert OSHA officials to the severity of the problems, which are affecting all aspects of the emergency services. When promulgated, 1910.1030 will stipulate even more specifically the requirements of health-care agencies in the protection of their employees. However, OSHA officials realized that the present risk is too severe to wait until the proposed rule is revised—possibly not until early 1991—to delineate and enforce the pro-

Infection Control Resources

The following resources can provide fire and emergency medical service managers with additional information to assist in meeting the requirements of the OSHA compliance directive. These can be obtained free of charge from the listed agency or from the U.S. Fire Administration's Office of Firefighter Health and Safety.

U.S. Fire Administration:

- *Second Forum on Communicable Diseases*, 1989.
- *Testimony on Occupational Exposure to Bloodborne Pathogens*, Sept. 14, 1989.
- *Open letter to All Emergency Response Agencies*. December 1989.
- *Model Infection Control Program* (under development). Available early 1991.

U.S. Department of Labor:

- 29 CFR 1910.1030, *Occupational Exposure to Bloodborne Pathogens; Proposed Rule*. May 30, 1989.
- CPL2-2.44B, *Enforcement Procedures for Occupational Exposure to Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV)*. Feb. 27, 1990.
- *Joint Advisory Notice, Protection Against Occupational Exposure to Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV)*. Oct. 19, 1987.

U.S. Department of Health and Human Services:

- *Joint Advisory Notice* (see above).
- *Guidelines for Prevention of Transmission of Human Immunodeficiency Virus and Hepatitis B Virus to Health-Care and Public Safety Workers*. CDC, February 1989.
- *A Curriculum Guide for Public-Safety and Emergency-Response Workers*. NIOSH, February 1989.
- *Educational Materials and Resources for Emergency Responder* (printouts). National AIDS Information Clearinghouse (CDC), 800/458-5231.

Other general information on infection control is available from your local hospital, local health agency and state public health agency.

visions outlined by the CDC guidelines to ensure safe and healthy employment and work places.

In addition to the OSHA instruction and information available from USFA and CDC, other information is being developed on a national level for fire service and EMS managers. USFA is preparing to develop a model infection control program. Also, a subcommittee of the National Fire Protection Association's Technical Committee on Fire Service Occupational Safety and Health is developing NFPA 1581, "Standard for a Fire Department Infection Control Program," which should be released for public comment in late summer.

For fire and EMS supervisors, USFA and the National Fire Academy (NFA) are working jointly on the development of a two-day field course entitled, "Infection Control for Emergency Response Personnel: The Supervisor's Role and Responsibilities." Depending on the availability of funds, this course will be pilot-tested this fall.

While it is heartening that other organizations are developing such guidelines, the significance of the new OSHA initiative is that emergency services managers will now be held accountable for the protection of their workers. Without a doubt, the impact on fire services and EMS will be great. Managers should look at this initiative as a benefit, however, because the costs of implementing an infection control program are minimal when compared to the costs—direct, indirect and non-monetary—resulting from a firefighter, EMT or paramedic contracting an infectious disease on the job.

The long-term benefits to emergency services, and to society in general, through an increased understanding of the problem and a decreased exposure potential, could result in an overall reduction in the rate of infection of communicable diseases, such as HBV and HIV. This, in itself, is part of the mission of the fire service and EMS—to protect and save lives. It is a rare opportunity for emergency service managers to be able to do so by protecting their own employees.

Gordon M. Sachs is the EMS program manager for the U.S. Fire Administration in Emmitsburg, Md. He has more than 12 years of fire service and EMS experience, and is a member of the National Fire Protection Association's subcommittee on Infection Control Programs.

Table 1

Impact of OSHA Instruction by State

States/Territories with Pre-Existing OSHA-Approved Occupational Safety and Health Plans

Alaska	New York
Arizona	North Carolina
California	Oregon
Connecticut*	Puerto Rico
Hawaii	South Carolina
Indiana	Tennessee
Iowa	Utah
Kentucky	Vermont
Maryland	Virginia
Michigan	Virgin Islands
Minnesota	Washington
Nevada	Wyoming
New Mexico	

States Covered Under New Federal OSHA Regulations

Alabama	Missouri
Arkansas	Montana
Colorado	Nebraska
Delaware	New Hampshire
District of Columbia	New Jersey
Florida	North Dakota
Georgia	Ohio
Idaho	Oklahoma
Illinois	Pennsylvania
Kansas	Rhode Island
Louisiana	South Dakota
Maine	Texas
Massachusetts	West Virginia
Mississippi	Wisconsin

*Covers only state and local government employees

all health care providers - hospital etc

CS

SPONSOR SUBSTITUTE FOR SENATE BILL NO. 194
IN THE LEGISLATURE OF THE STATE OF ALASKA
SEVENTEENTH LEGISLATURE - FIRST SESSION

BY SENATORS MENARD, Collins

Introduced: 4/3/91
Referred: HES, Finance

Integrate into Governmental pay for volunteer services

A BILL

FOR AN ACT ENTITLED

1 "An Act relating to hepatitis B vaccinations for law enforcement officers and emergency
2 medical services providers; and providing for an effective date."

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

4 * Section 1. AS 18.08 is amended by adding a new section to read:

5 Sec. 18.08.081. HEPATITIS B VACCINATION PROGRAM. (a) The department shall
6 establish a program under which hepatitis B testing and vaccination is reasonably accessible at
7 no charge to all law enforcement officers and emergency medical services providers in the state
8 who do not ^{provide service to the public w/in} reside in a municipality that has the power to establish a program of hepatitis B
9 testing and vaccination.

10 (b) A municipality that has the power to do so shall establish a program under which
11 hepatitis B testing and vaccination is reasonably accessible at no charge to all law enforcement
12 officers and emergency medical services providers who ^{provide service to the public w/in} reside in the municipality. The
13 department shall, upon request, assist a municipality in establishing a program required under this
14 subsection.

1 (c) In this section,

2 (1) "emergency medical services provider" means a person who is

3 (A) an emergency trauma technician, emergency medical technician, or
4 paramedic who is an active volunteer or paid employee of a fire department that provides
5 emergency medical services as part of its duties, a first responder service, or an
6 ambulance service; or

7 (B) a community health aide, as defined in AS 18.28.100;

8 (2) "law enforcement officer" means

9 (A) an officer of the state troopers;

10 (B) a member of the police force of a municipality; or

11 (C) a village public safety officer.

12 * Sec. 2. This Act takes effect immediately under AS 01.10.070(c).

*Cover in Mini?
CA - Outside
Volunteers vs Pat*

SENATE BILL NO. 194

IN THE LEGISLATURE OF THE STATE OF ALASKA

SEVENTEENTH LEGISLATURE - FIRST SESSION

BY SENATOR MENARD

Introduced: 3/13/91
Referred: HES and Finance

A BILL

FOR AN ACT ENTITLED

1 "An Act relating to hepatitis B vaccinations for emergency medical services providers; and
2 providing for an effective date."

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7 no charge to all emergency medical services providers in the state who do not reside in a
8 municipality that has the power to establish a program of hepatitis B testing and vaccination.

9 (b) A municipality that has the power to do so shall establish a program under which
10 hepatitis B testing and vaccination is reasonably accessible at no charge to all emergency medical
11 services providers who reside in the municipality. The department shall, upon request, assist a
12 municipality in establishing a program required under this subsection.

13 (c) In this section, "emergency medical services provider" means a person who is an
14 emergency trauma technician, emergency medical technician, or paramedic who is an active

1 volunteer or paid employee of a fire department that provides emergency medical services as part
2 of its duties, a first responder service, or an ambulance service.

3 * Sec. 2. This Act takes effect immediately under AS 01.10.070(c).

BILL NO: SSSB 194

DATE: April 17, 1991

TITLE: "An Act relating to
Hepatitis B vaccinations."

CONTACT: Lt. Patrick Kasnick
269-5641

DEPARTMENT OF
PUBLIC SAFETY

Under the provisions of this bill, the Department of Health and Social Services would be required to provide a program in which testing and vaccinations for hepatitis B would be provided free of cost to Alaskan law enforcement officers and emergency medical services providers.

The Department of Public Safety supports SSSB 194. Hepatitis is one of the many dangers inherent in police work, so assuring that preventative vaccination and testing programs are available to all police officers is appropriate and good public policy.



Richard L. Burton
Commissioner

COMMUNICATIONS SECTION

Position Paper

CSSS for Senate Bill No.194

For An Act Entitled: "An Act relating to Hepatitis B vaccinations for law enforcement officers and emergency medical services providers; and providing for an effective date."

Committee Substitute for Sponsor Substitute for SB 194 will require the Department of Health and Social Services to establish a program to make Hepatitis B testing and vaccinations reasonably accessible at no charge to all law enforcement officers and emergency medical services providers in the state who do not reside in a municipality that has the power to establish a program of Hepatitis B testing and vaccination.

Hepatitis B infection is caused by the Hepatitis B virus. The incubation period of Hepatitis B is long - 45 to 160 days; average 120 days. The virus is transmitted by percutaneous (intravenous, intramuscular, subcutaneous, and intradermal) and permucosal exposure to infective body fluids, as may occur in needle sticks, perinatal exposure, or sexual exposure.

Illness can range from no symptoms to severe illness and death. Clinical symptoms include loss of appetite, malaise, nausea, vomiting, abdominal pain, and jaundice. Skin rashes, joint pain, and arthritis can also occur. The case-fatality rate is approximately 1.4%. Some individuals who become infected with Hepatitis B virus will become chronically infected with the virus.

Excellent guidelines exist to provide information and recommendations on prevention of hepatitis. One of the best is "Protection Against Viral Hepatitis, Recommendations of the Immunization Practices Advisory Committee (IPAC)," MMWR 1990;39S-2. Both nationally and in Alaska the present strategy for Hepatitis B prevention is to vaccinate those individuals at high risk of infection. The major deterrents to controlling the viruses include lack of knowledge about risk of the disease, lack of public sector programs, inability to access most of the high risk populations, and the cost of the vaccine.

Without conducting a statewide screening program, it is impossible to know how many public safety providers in Alaska are seropositive for Hepatitis B, and it is even more difficult to determine how many may have been infected while providing patient care.

In February 1990, the U.S. Department of Labor's Occupational Safety and Health Administration (OSHA) released an OSHA Instruction on "Enforcement Procedures for Occupational Exposure to Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV)." This instruction required employers of health care workers, including emergency medical services personnel, to offer to each employee, of substantial risk of directly contacting bodily fluids,

HBV vaccinations free of charge, and appropriate equipment as recommended by the Centers for Disease Control. This requirement took effect in February 1991. However, the Alaska Department of Labor states that our OSHA laws do not apply to volunteers in this state.

A central issue in Hepatitis B vaccine policy is the high cost of the vaccine. If the vaccine were inexpensive, then national and state public health professionals would recommend universal vaccination of all persons. However, the high cost of the vaccine (\$30.64 per dose, 3 doses per person or a minimum of \$91.92 per person plus testing and administrating costs) has required the vaccine to be targeted at those at highest risk of infection.

Active emergency medical service providers in Alaska number about 3000. Statewide, there currently are over 1500 certified EMT-I's, about 450 EMT-II's, 350 EMT-III's and 160 Mobile Intensive Care Paramedics, plus there is an estimated 500 active volunteer Emergency Trauma Technicians (ETT's). There also is a significant turnover among volunteer emergency medical responders with approximately 1,000 to 2,000 newly certified ETT's and EMT's each year.

Although we believe that the risk for emergency medical responders and law enforcement officers to get Hepatitis B while providing emergency medical care is low, we cannot say that there is no risk at all. We also note that many emergency medical responders and law enforcement officers have Workers' Compensation coverage and the cost of lost work time and disability benefits for an emergency responder who gets hepatitis B in the emergency care setting could easily exceed \$ 20,000, even if the disease does not progress to the acute carcinoma stage.

While recognizing the importance of the volunteer emergency personnel and their concerns regarding hepatitis B, the department has concerns about the policy effects of this bill upon the state vaccination program. If special consideration is granted to law enforcement and emergency medical service providers, it can be anticipated that public safety and health care workers who are at similar risk would advocate for equal coverage. If similar coverage were to be provide by the state to all such individual, it is anticipated that the cost to the state could be as much as \$1,100,000 per year for the vaccines.

Recommendation

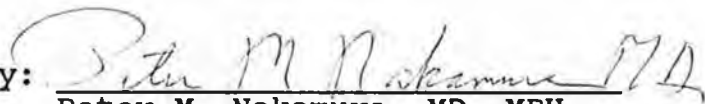
It is the department's understanding that the intent of CSSSB 194 is to provide hepatitis B testing and vaccine to only those volunteer emergency medical service providers that are not covered OSHA

instructions previously mentioned. The department supports the intent of this bill, but recommends that it be amended to clarify responsibilities by requiring all governmental units to provide at their expense hepatitis B screening and vaccinations to all volunteer emergency medical and public personnel within their jurisdiction; and that the department would provide this services to all volunteer emergency providers outside municipalities and boroughs.

Position

The Department of Health and Social Services supports the intent of this legislation, but we propose that it be amended to require the department to provide hepatitis B testing and vaccinations only to volunteer emergency medical services providers who do not reside in a municipality.

Recommended by:

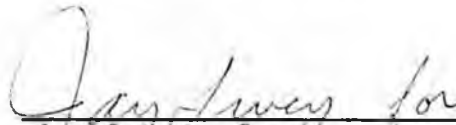


Peter M. Nakamura, MD, MPH
Director
Division of Public Health

Date:

4-24-91

Approved by:



Theodore Mala, MD, MPH
Commissioner
Dept. of Health & Social Services

Date:

4-24-91

Submitted

Position Paper

Sponsor Substitute for Senate Bill No. 194

For An Act Entitled: "An Act relating to Hepatitis B vaccinations for law enforcement officers and emergency medical services providers; and providing for an effective date."

SS SB 194 will require the Department of Health and Social Services to establish a program to make hepatitis B testing and vaccinations reasonably accessible at no charge to all law enforcement officers and emergency medical services providers in the state who do not reside in a municipality that has the power to establish a program of Hepatitis B testing and vaccination.

Hepatitis B infection is caused by the hepatitis B virus. The incubation period of hepatitis B is long - 45 to 160 days; average 120 days. The virus is transmitted by percutaneous (intravenous, intramuscular, subcutaneous, and intradermal) and permucosal exposure to infective body fluids, as may occur in needle sticks, perinatal exposure, or sexual exposure.

Illness can range from no symptoms to severe illness and death. Clinical symptoms include loss of appetite, malaise, nausea, vomiting, abdominal pain, and jaundice. Skin rashes, joint pain, and arthritis can also occur. The case-fatality rate is approximately 1.4%. Some individuals who become infected with Hepatitis B virus will become chronically infected with the virus.

Excellent guidelines exist to provide information and recommendations on prevention of hepatitis. One of the best is "Protection Against Viral Hepatitis, Recommendations of the Immunization Practices Advisory Committee (IPAC)," MMWR 1990;39S-2. Both nationally and in Alaska the present strategy for hepatitis B prevention is to vaccinate those individuals at high risk of infection. The major deterrents to controlling the viruses include lack of knowledge about risk of the disease, lack of public sector programs, inability to access most of the high risk populations, and the cost of the vaccine.

Without conducting a statewide screening program, it is impossible to know how many public safety providers in Alaska are seropositive for hepatitis B, and it is even more difficult to determine how many may have been infected while providing patient care.

In February 1990, the U.S. Department of Labor's Occupational Safety and Health Administration (OSHA) released an OSHA Instruction on "Enforcement Procedures for Occupational Exposure to Hepatitis B Virus (HBV) and Human Immunodeficiency Virus (HIV)." This instruction required employers of health care workers, including emergency medical services personnel, to offer to each employee, of substantial risk of directly contacting bodily fluids, HBV vaccinations free of charge, and appropriate equipment as

recommended by the Centers for Disease Control. This requirement took effect in February 1991. However, the Alaska Department of Labor states that our OSHA laws do not apply to volunteers in this state.

A central issue in hepatitis B vaccine policy is the high cost of the vaccine. If the vaccine were inexpensive, then national and state public health professionals would recommend universal vaccination of all persons. However, the high cost of the vaccine (\$30.64 per dose, 3 doses per person or a minimum of \$91.92 per person plus testing and administrating costs) has required the vaccine to be targeted at those at highest risk of infection.

Active emergency medical service providers in Alaska number about 3000. Statewide, there currently are over 1500 certified EMT-I's, about 450 EMT-II's, 350 EMT-III's and 160 Mobile Intensive Care Paramedics, plus there is an estimated 500 active volunteer Emergency Trauma Technicians (ETT's). There also is a significant turnover among volunteer emergency medical responders with approximately 1,000 to 2,000 newly certified ETT's and EMT's each year.

Although we believe that the risk for emergency medical responders and law enforcement officers to get hepatitis B while providing emergency medical care is low, we cannot say that there is no risk at all. We also note that many emergency medical responders and law enforcement officers have Workers' Compensation coverage and the cost of lost work time and disability benefits for an emergency responder who gets hepatitis B in the emergency care setting could easily exceed \$ 20,000, even if the disease does not progress to the acute carcinoma stage.

While recognizing the importance of the volunteer emergency personnel and their concerns regarding hepatitis B, the department has concerns about the policy effects of this bill upon the state vaccination program. If special consideration is granted to law enforcement and emergency medical service providers, it can be anticipated that public safety and health care workers who are at similar risk would advocate for equal coverage. If similar coverage were to be provide by the state to all such individual, it is anticipated that the cost to the state could be as much as \$1,100,000 per year for the vaccines.

Recommendation

The Department of Health and Social Services supports the intent of SS SB 194, but we are concerned about the potential cost of implementing this bill, up to \$115,300 per year.

The intent of this bill can be met at reduced cost to the state if the bill is amended as follows:

Sec. 18.08.081. Hepatitis B Vaccination Program. (a) The department shall establish a program under which hepatitis B testing and vaccination is reasonably accessible at no charge to all volunteer emergency medical services providers in the state who do not provide services in a municipality.

(b) A municipality that has power shall establish a program under which hepatitis B testing and vaccination is reasonably accessible at no charge to all emergency medical services providers who provide service to the public within the municipality. The department shall, upon request, assist a municipality in establishing a program required under this subsection.

With these proposed amendments to the bill, the cost to the state would be about \$30,000 per year (300 volunteer EMS providers x \$100 per provider = \$30,000), and perhaps \$15,000 to \$20,000 in subsequent years.

Position

The Department of Health and Social Services supports the intent of this legislation, but we propose that it be amended to require the department to provide hepatitis B testing and vaccinations only to volunteer emergency medical services providers who do not reside in a municipality that has the power to establish a program of hepatitis B testing and vaccinations.

Recommended by Peter M. Nakamura
Peter M. Nakamura, MD, MPH
Director
Division of Public Health

Date: 4/18/91

Approved by: Theodore Mala
Theodore Mala, MD, MPH
Commissioner
Dept. of Health & Social Services

Date: 4/18/91

Alaska Association Chiefs of Police



April 19, 1991

Senator Curt Menard
Alaska State Legislature
P. O. Box V
Juneau, AK 99811

Dear Senator Menard,

On behalf of the Alaska Association of Chiefs of Police I would like to express our support for Senate Bill 194, which relates to hepatitis B vaccinations for law enforcement officers and emergency medical service providers. Hepatitis B is a highly contagious and dangerous disease that places public safety workers at severe risk.

We believe that the cost of vaccination is minor in comparison to the potential lost time from work. Vaccination is a simple, cost effective means of reducing insurance and workmans compensation claims. Above all else, the early prevention that SB 194 would require avoids needless pain and suffering on the part of emergency service workers.

We thank you and Senator Collins for your support. If we can be of any assistance in the passage of this bill, please contact me.

Sincerely,

Duane S. Udland, President
Alaska Association of Chiefs of Police
4501 South Bragaw
Anchorage, AK 99507

Post-It brand fax transmittal memo 7671 1 of pages 1

To <i>Senator Menard</i>	From <i>Duane Udland</i>
Co. <i>Al. Legislature</i>	Co. <i>APD</i>
Dept.	Phone # <i>786-7552</i>
Fax # <i>465-3756</i>	Fax # <i>786-3438</i>

CORDOVA MEDICAL CLINIC

Larry A. Ermold, M.D.

Oliver S. Osborn, M.D.

P.O. Box 310
Cordova, Alaska 99574
(907) 424-8200

March 25, 1991

Gene Kubina
House of Representatives
P.O. Box V
Juneau, AK. 99811

Dear Representative Kubina:

I understand that Senator Menard has introduced a bill to provide for Hepatitis B vaccinations for emergency medical services providers. I wanted to let you know that I support this bill, and I think it is a wise idea.

Here in Cordova we have an active volunteer ambulance crew who are occasionally exposed to potentially infective bodily fluids, and they certainly deserve the support of the city and of the state in their work. They certainly should be offered free Hepatitis B vaccinations.

Sincerely Yours,

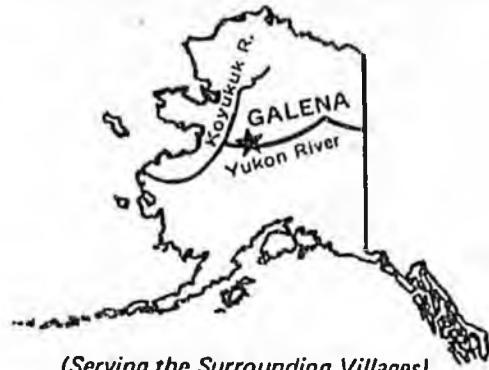

Oliver S. Osborn, M.D.

OSO/jsk

cc: Senator Curt Menard

GALENA HEALTH CENTER

EDGAR NOLLNER BUILDING
P. O. BOX 77
GALENA, ALASKA 99741
PHONE: (907) 656-1266



(Serving the Surrounding Villages)
Hughes, Huslia, Kaltag
Koyukuk, Nulato, Ruby

Lyman Hoffman
P.O. Box V
Juneau Ak 99811

Dear Mr Hoffman:

I am taking a moment to urge you to support Senate Bill 194 relating to Hepatitis B vaccinations for emergency medical service providers.

I am a physician assistant and director of Emergency Medical Services at the Galena Health Center.

This is an important step in protecting our Volunteers and supporting them in protecting themselves. We need to let them know someone out there cares about them.

Volunteers are 90% of EMS personnel in Alaska

Please take a moment to study this bill and I urge you to support it!

Thank you!

Wendy Hudlick PA-C

Box 77

Galena Health Center

Galena Alaska

Senate and Special
copy to
sent to Lyman Hoffman
3/26/91

Thank you for keeping
us up to date
Wendy



COPY

INTERIOR AMBULANCE RESCUE SQUAD

P.O. Box 10295
Fairbanks, Alaska 99710
(907) 457-2501

March 29, 1991

Senator Arliss Sturgulewski
Senate
Capitol, Room 427
P.O. Box V
Juneau, AK 99811

RE: Senate Bill 194:
"An Act relating to hepatitis B vaccinations for
emergency medical service providers"

Dear Senator Sturgulewski:

As an EMS service in the State of Alaska, we are faced with the high cost of hepatitis B vaccinations. Due to the high incidence of the disease in the state, and the high risk that our members are exposed to, these vaccinations are not a luxury, but a necessity.

A secondary problem is that volunteers are rarely addressed in regulations mandated by OSHA and other such agencies regarding health and safety hazards, funding is not available either. Though our medics are all volunteers, they are highly trained, skilled professionals, and deserve the same protection as their paid peers.

We would like to go on record in support of Senate Bill #194, presented by Senator Menard. This bill will allow all emergency medical service providers, both paid and volunteer, the right to be protected against this horrible disease. Please support this bill. I remain

Sincerely yours,

Thomas A. Narow, EMT III, ACLS
Chief of Service

cc: Senator Curt Menard

TAN:ln



INTERIOR AMBULANCE RESCUE SQUAD

P.O. Box 10295
Fairbanks, Alaska 99710
(907) 457-2501

March 29, 1991

Senator Curt Menard
Senate
Capitol, Room 9
P.O. Box V
Juneau, AK 99811

RE: Senate Bill 194:
"An Act relating to hepatitis B vaccinations for
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Dear Senator Menard:

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A secondary problem is that volunteers are rarely addressed in regulations mandated by OSHA and other such agencies regarding health and safety hazards, funding is not available either. Though our medics are all volunteers, they are highly trained, skilled professionals, and deserve the same protection as their paid peers.

We would like to go on record in support of Senate Bill #194 as this bill will allow all emergency medical service providers, both paid and volunteer, the right to be protected against this horrible disease. Thank you for sponsoring this bill. I remain

Sincerely yours,

Thomas A. Narow, EMT III, ACLS
Chief of Service

TAN:ln



April 12, 1991

The Honorable Curt Menard
Alaska State Senate
P.O. Box V
Juneau, AK 99811

RE: Sponsor Substitute for Senate Bill No. 194

Dear Senator Menard:

While the Kenai Peninsula Fire Chiefs Association recognizes the concept of your bill regarding hepatitis B vaccinations for law enforcement officers and emergency medical service providers, we feel it lacks one crucial group of individuals who routinely respond to, and are exposed to, hepatitis B. This group of individuals are our volunteer firefighters or rescuers.

We encourage you to re-write Section 1. (c) (1) (A) to include "...paramedic, volunteer firefighter or rescuer with an organized first responder service or ambulance service; or...

Should you decide to amend your bill to include our request, the Kenai Peninsula Fire Chiefs Association would be happy to assist you in lobbying other members of the legislature to ensure passage of this bill.

I would be more than happy to discuss this matter with you at any time. Please feel free to call me at 262-4312.

Sincerely,

Greg B. Barclay, President

Kotzebue Volunteer Fire Dept.
Kotzebue, AK 99752
March 27, 1991

Senate
P.O. Box V
Juneau, AK 99811

Dear Senator Menard:

We at the Kotzebue Volunteer Fire Department would like to support Senate Bill No. 194. We feel having a hepatitis B testing and vaccination program for all EMS Providers is a basic level of protection. Living in a rural area, we recognize the importance of the service provided by volunteer EMTs. It seems only fair that they should be as protected as possible from the risks they are exposed to as volunteers. Thank you.

Sincerely,

Kotzebue Volunteers

Danny Thomas
Alyssa Lee
Tom Brown
Hassard May
Mary Brown

Richard Elan
John
A.P.

Mary C. Elliott
Walter Baus
Walter A. Arnold
D.J. Jackson
William E. Keenan Jr.
Paul A. Chamberlain
William B. Hendry Jr.

MARKETING

By Vancura

Chuck Vancura, MBA
President

775 E. Parks Hwy.
Suite 202
Wasilla, AK 99687
Tel.: (907) 373-7750

25 March 1991

Senator Arliss Sturgulewski
P.O. Box V
Juneau, Ak. 99811

Advertising

Dear Senator Sturgulewski,

Public Relations

I would like to call your attention to SB 194
introduced by Senator Curt Menard.

Promotions

As you may know the State of Alaska has one of the best volunteer EMS programs in the United States. Our system of providing Emergency Medical care is held in balance by the fine thread of volunteerism. In each of our communities are volunteers who standby ready to respond to emergencies without compensation, unlike many other communities in the lower 48.

Pricing

Research

It is important that we don't allow this fine thread of volunteers to break as a result of liability for additional risk prevention required of health care responders in the field. In many communities in Alaska our emergency medical teams are almost completely made up of volunteers saving the state thousands of dollars in employee expenses, it is therefore cost efficient to provide a healthy environment for our volunteers so that they may continue to provide this free service to other Alaskans.

Customer Service

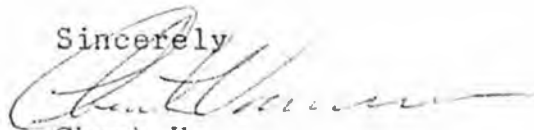
I encourage you to not only support SB 194 but to be an active voice for the health of our Alaskan Volunteers.

Strategic Planning

Business Evaluations

Business Plans

Sincerely



Chuck Vancura

Market Plans

Business Consultation

Marketing Workshops

MARKETING

By Vancura

Chuck Vancura, MBA
President

775 E. Parks Hwy.
Suite 202
Wasilla, AK 99687
Tel.: (907) 373-7750

25 March 1991

Senator Curt Menard
P.O. Box V
Juneau, Ak. 99811

Advertising

Dear Senator Menard,

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Customer Service

Strategic Planning

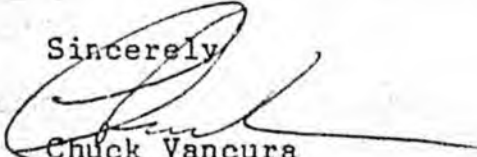
Business Evaluations

I am encouraged that you not only introduced this bill but that you are on the look out for the health of our Alaskan volunteers and our Alaskan budget. Good show, Senator!

Business Plans

Market Plans

Business Consultation

Sincerely

Chuck Vancura

Marketing Workshops



Matanuska-Susitna Borough

680 NORTH SEWARD MERIDIAN PARKWAY, WASILLA, ALASKA 99687

TELEPHONE: (907) 376-9627 / 376-9628 / FAX: 376-0799

EMERGENCY SERVICES DIVISION

March 29, 1991

Curt Menard, Senator
Rm 110, Capital
PO Box V
Juneau, Alaska 99811

Dear Senator Menard:

I have recently received a copy of Senate Bill 194 introduced by yourself concerning Hepatitis B vaccinations. This bill represents a significant step towards assuring everyone involved in providing patient care the safety of being vaccinated against Hepatitis B.

I would like to offer one suggestion to make the bill even more effective in improving the safety of our responders. That would be to add the classification of "rescuer" to section 1 (c). These people are often the first on scene of an emergency and are exposed to blood as much as the emergency medical technicians would be. Also by virtue of their job of extricating the injured person, they often are scratched and cut by glass and metal edges.

The Mat-Su Borough was one of the first EMS and Rescue services in the state to comply with the then proposed OSHA guidelines three years ago. Since then we have spent over \$25,000 in our infection control program and for vaccines for our volunteers. Although very expensive in times of decreasing funds, it has been money well spent and is a positive investment in protecting our volunteers.

Your interest and concern for the pre-hospital care system is appreciated by all of us who work to provide the best EMS systems

possible. This bill will be especially helpful to those small volunteer systems with little financial resources yet great needs. The danger of Hepatitis B infection is very real in this state and those who provide care in the field under uncontrolled and often dangerous situations cannot be down played.

Again our appreciation for your support of EMS and for your consideration of my suggestions to improve your bill. If you have any questions, please feel free to call me.

Sincerely,

A handwritten signature in black ink, appearing to read 'Kevin Koechlein', written over a horizontal line.

Kevin Koechlein, Chief
Emergency Services Division

KK:nak

Billy Harris
Fire Chief

Kenai Peninsula Borough

NIKISKI FIRE DEPARTMENT

Box 8508
Nikiski, Alaska 99635

(907)283-4388
283-4202

April 1, 1991

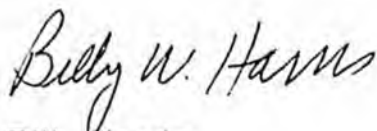
Senator Curt Menard
Capitol Room 9
PO Box V
Juneau, AK 99811

REF: Senate Bill 194

Dear Senator:

I feel strongly about getting the above bill providing HBV vaccine to all emergency services workers enacted. Hepatitis B is a dangerous virus that has the potential of seriously endangering our employees. The virus is widespread throughout the state in native cultures and lower income individuals. Though the vaccine is not cheap at \$150 a series, it is a lot cheaper than retiring an employee and retraining someone new. I urge your support of Senate Bill 194 in the 17th Legislature of the State of Alaska.

Sincerely,



Bill Harris
Fire Chief

BH:MW:tc



March 25, 1991

Senator Arlis Sturgulewski
Alaska State Legislature
Post Office Box V
Juneau, Alaska 99811

RE: Alaska Senate Bill No. 194

Dear Senator Sturgulewski:

As an Alaskan ambulance service staffed totally by volunteers, we would like to encourage your support of Alaska Senate Bill No. 194 which was introduced on March 13, 1991. We commend Senator Menard on his action of introducing this legislation.

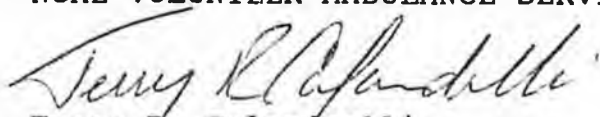
Our volunteers are continually exposed to hepatitis B by virtue of our area of response. We often are called upon to transport patients from surrounding villages via medevacs and residents who are carriers of hepatitis B. Since our staff consists totally of volunteers, it would be a tremendous financial hardship to the majority of our staff to pay for screening and vaccine for hepatitis B, and most of our staff are currently unprotected against this disease due to the costs involved.


Volunteers are the backbone of emergency medical services in the State of Alaska and this bill would demonstrate the appreciation and support of our State Legislature of those volunteers.

Again, we urge your support of Senate Bill No. 194 and the volunteers of our emergency medical services in the State of Alaska. Thank you for your consideration.

Sincerely,

NOME VOLUNTEER AMBULANCE SERVICE, INC.


Terry R. Calandrelli
Captain


Nancy L. Calandrelli
Secretary/Treasurer

cc: Senator Curt Menard



March 25, 1991

Senator Curt Menard
Alaska State Legislature
Post Office Box V
Juneau, Alaska 99811

RE: Alaska Senate Bill No. 194

Dear Senator Menard:

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Our volunteers are continually exposed to hepatitis B by virtue of our area of response. We often are called upon to transport patients from surrounding villages via medevacs and residents who are carriers of hepatitis B. Since our staff consists totally of volunteers, it would be a tremendous financial hardship to the majority of our staff to pay for screening and vaccine for hepatitis B, and most of our staff are currently unprotected against this disease due to the costs involved.

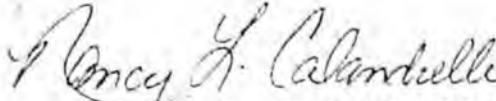
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Again, we urge your support of Senate Bill No. 194 and the volunteers of our emergency medical services in the State of Alaska. Thank you for your consideration.

Sincerely,

NOME VOLUNTEER AMBULANCE SERVICE, INC.


Terry R. Calandrelli
Captain


Nancy L. Calandrelli
Secretary/Treasurer

Southern Region
EMERGENCY
Medical Services Council, Inc.

RESOLUTION

WHEREAS, volunteer EMTs are the backbone of emergency medical services in the State of Alaska; and

WHEREAS, State law precludes informing potentially exposed volunteers of their exposure to communicable diseases; and

WHEREAS, exposure to communicable diseases, in particular hepatitis B, is perceived as a significant threat to individual responders; and

WHEREAS, the financial resources of volunteer providers and volunteer ambulance services are significantly limited; and

WHEREAS, the cost of immunization against communicable diseases, in particular hepatitis B, exceeds the individual volunteer's ability to pay; and

WHEREAS, recruitment and retention of volunteer EMTs and volunteer ambulance services is dependent on providing as safe an environment as possible; and

WHEREAS, the services provided by Alaska's EMS volunteers provide for the health and safety of both Alaskans and visitors; and

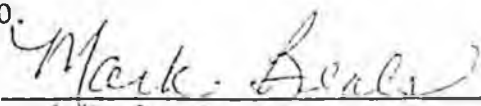
WHEREAS, maintenance of a strong volunteer EMS system affords significant savings to the State of Alaska; and

WHEREAS, Alaska Statute 18.08.010 mandates that the State of Alaska provide for the health and safety of its citizens;

NOW THEREFORE, BE IT RESOLVED that the Southern Region Emergency Medical Services Council, Inc. requests the Commissioner of the Department of Health and Social Services to support a free, comprehensive immunization and testing program, including free hepatitis B vaccinations, for volunteer EMS providers in Alaska.

BE IT FURTHER RESOLVED, that the Southern Region Emergency Medical Services Council, Inc. requests the Commissioner of the Department of Health and Social Services to develop a long-term policy that provides free communicable disease vaccinations for volunteer EMS providers.

Executed this 31st day of October, 1990.



Mark Beals, Secretary
Southern Region Emergency Medical
Services Council, Inc.



Alaska State Legislature

Please enter into the record my testimony to the SENATE HEALTH, EDUCATION & SOCIAL SERVICES committee name
 committee on SENATE BILL 194, dated 4-19-94
 bill/subject

With the changes in the bill
 IN SECTION C, 1, A TO include ETT
 EMTS + Paramedics IT seems to
 now cover the majority of folks that
 need Hep B on the Kenai Peninsula.

Having asked about the outlying
 communities as Hope etc IT seems that
 all the VOLUNTEERS OR "MOST" are at the
 ETT level.

The Bill as written looks "OK"

Signed: Mary R. Barclay
 Testifier
President Kenai Peninsula Fire Chiefs Assoc.
 Representing (Optional)
231 S. Brinkley ST Soldotna AK 99669
 Address
262-4312 262-4792
 Phone No.

Michele R. Kirkman
P.O. Box 10547
Fairbanks, AK 99710

April 3, 1991

Senator Arliss Sturgulewski
P.O. Box V
Capitol, Room 427
Juneau, AK 99811

Dear Senator Sturgulewski:

As a registered nurse, I have seen the devastating effects that Hepatitis B has on ones' health and life. As the past chief of an ambulance rescue squad, I am aware of the costs of providing protection, through vaccination and testing, to those who are at risk for contracting this disease. Many of the organizations that provide emergency medical care in Alaska are volunteer and do not have the funds to pay for this protection. Since emergency medical services providers are frequently exposed to blood and body fluids, they are at a high risk for contracting Hepatitis B. Therefore, I fully support Senate Bill 194 and urge you to do likewise.

Sincerely,



Michele R. Kirkman, R.N.,C., EMT III

Michele R. Kirkman
P.O. Box 10547
Fairbanks, AK 99710


April 3, 1991

Senator Curt Menard
P.O. Box V
Capitol, Room 9
Juneau, AK 99811

Dear Senator Menard:

As a registered nurse, I have seen the devastating effects that Hepatitis B has on ones' health and life. As the past chief of an ambulance rescue squad, I am aware of the costs of providing protection, through vaccination and testing, to those who are at risk for contracting this disease. Many of the organizations that provide emergency medical care in Alaska are volunteer and do not have the funds to pay for this protection. Since emergency medical services providers are frequently exposed to blood and body fluids, they are at a high risk for contracting Hepatitis B. Therefore, I fully support Senate Bill 194 and urge you to do likewise.

Sincerely,



Michele R. Kirkman, R.N.,C., EMT III



Alaska State Legislature

Please enter into the record my testimony to the SENATE HESS
 committee name
 committee on SB 194 HEPATITIS B, dated 4/19/91
 bill/subject

I REQUESTED THAT SITKA BE INCLUDED AS A TELECONFERENCE SITE SO THAT I COULD SPEAK ON THE BEHALF OF EMERGENCY MEDICAL SERVICE VOLUNTEERS IN SUPPORT OF SB 194.

ROUGHLY 2500 PEOPLE VOLUNTEER IN THE STATE OF ALASKA TO PROVIDE EMERGENCY MEDICAL CARE FOR PEOPLE WITHIN THEIR COMMUNITIES. THIS SERVICE, CONSERVATIVELY VALUED AT \$4.5 MILLION, IS GIVEN FOR FREE.

EACH OF THESE VOLUNTEERS ^{COULD BE} ~~IS~~ EXPOSED DIRECTLY TO HEPATITIS B EVERY TIME THEY RESPOND TO AN EMERGENCY CALL. THE HEP. B VIRUS IS TRANSMITTED THROUGH BLOOD & BODILY FLUIDS & RESULTS IN INFLAMMATION OF THE LIVER, SOMETIMES LEADING TO

(CONT'D)

Signed: DAVID L NEWELL
 Testifier

SOUTHEAST REGION EMS COUNCIL - EMS VOLUNTEERS
 Representing (Optional)

207 MOLIER DRIVE, ROOM 113, SITKA
 Address

747-8005
 Phone No.

CIRRHOSIS AND EVEN DEATH. THERE IS NO KNOWN ~~AND~~ CURE.

THE GOOD NEWS IS THAT HEP. B IS PREVENTABLE BY VACCINE.

THIS BILL PROPOSES THAT THE STATE OF ALASKA TAKE APPROPRIATE RESPONSIBILITY FOR PROTECTING ITS VOLUNTEERS WHO ARE AT RISK OF HEPATITIS B INFECTION WHO DONT HAVE A MUNICIPALITY TO SUPPORT THEM.

THANK YOU.

Shawn L Newell



GEORGE F. GARNETT, M.D., INC.

Diplomate American Board of Family Practice

245 N. Binkley St., Suite 101

Soldotna, AK 99669

Office (907) 262-7700

April 2, 1991

Senator Curt Menard
P.O. Box V
Juneau, AK. 99811

Dear Senator Curt Menard:

I have reviewed Senate Bill Number 194 and would encourage your support for this bill. The bill provides for hepatitis B vaccinations for Emergency Medical Services providers. The way this bill is worded protects the state from large expenditures for ambulance services that are supported by a municipality. However, at the same time protects volunteer emergency medical providers who are not supported by any municipality from the ravages of hepatitis B.

Hepatitis B can cause lengthy illnesses and can cause a volunteer to loose a considerable amount of time from his job or possibly even loose his job. It is not fair to ask these people to volunteer their time as emergency medical care providers and risk losing their livelihood to support their family. I think the state and you in particular, should support this legislation, so that we can protect those people out there who are protecting our lives.

Thank you very much.

Sincerely yours,



George F. Garnett, M.D.

GG/mb

April 3, 1991

Senator Curt Menard
Alaska State Legislature
Post Office Box V
Juneau, Alaska 99811

RE: Alaska Senate Bill No. 194

Dear Senator Menard:

As an Alaskan who volunteers time to the local ambulance service, I would like to encourage your continuing support of Alaska Senate Bill No. 194 which you introduced on March 13, 1991. Thank you for introducing this legislation.

As a volunteer, I am continually exposed to hepatitis B by virtue of our service area. We often are called upon to transport patients from surrounding villages via medevacs and residents who are carriers of hepatitis B. Since I am an unpaid volunteer, it would be a financial hardship to incur the cost for screening and vaccine for hepatitis B. Most of my fellow volunteers are currently unprotected against this disease due to the cost.

Volunteers are the backbone of emergency medical services in the State of Alaska and this bill would demonstrate the appreciation and support of our State Legislature of those volunteers.

Again, I urge your continuing support of Senate Bill No. 194 and the volunteers of our emergency medical services in the State of Alaska. Thank you for your consideration.

Sincerely,



Charlie Lean
Post Office Box 1716
Nome, Alaska 99762

April 3, 1991

Senator Curt Menard
Alaska State Legislature
Post Office Box V
Juneau, Alaska 99811

RE: Alaska Senate Bill No. 194

Dear Senator Menard:

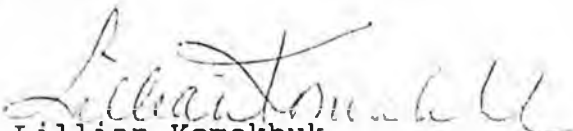
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As a volunteer, I am continually exposed to hepatitis B by virtue of our service area. We often are called upon to transport patients from surrounding villages via medevacs and residents who are carriers of hepatitis B. Since I am an unpaid volunteer, it would be a financial hardship to incur the cost for screening and vaccine for hepatitis B. Most of my fellow volunteers are currently unprotected against this disease due to the cost.

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Again, I urge your continuing support of Senate Bill No. 194 and the volunteers of our emergency medical services in the State of Alaska. Thank you for your consideration.

Sincerely,



Lillian Komakhuk
Post Office Box 1706
Nome, Alaska 99762

April 3, 1991

Senator Curt Menard
Alaska State Legislature
Post Office Box V
Juneau, Alaska 99811

RE: Alaska Senate Bill No. 194

Dear Senator Menard:

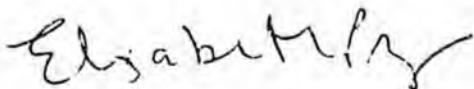
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Again, I urge your continuing support of Senate Bill No. 194 and the volunteers of our emergency medical services in the State of Alaska. Thank you for your consideration.

Sincerely,



Elizabeth Preza
Post Office Box 1871
Nome, Alaska 99762

April 3, 1991

Senator Curt Menard
Alaska State Legislature
Post Office Box V
Juneau, Alaska 99811

RE: Alaska Senate Bill No. 194

Dear Senator Menard:

As an Alaskan who volunteers time to the local ambulance service, I would like to encourage your continuing support of Alaska Senate Bill No. 194 which you introduced on March 13, 1991. Thank you for introducing this legislation.

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Again, I urge your continuing support of Senate Bill No. 194 and the volunteers of our emergency medical services in the State of Alaska. Thank you for your consideration.

Sincerely,



Liz Collins
Post Office Box 663
Nome, Alaska 99762

April 3, 1991

Senator Curt Menard
Alaska State Legislature
Post Office Box V
Juneau, Alaska 99811

RE: Alaska Senate Bill No. 194

Dear Senator Menard:


As an Alaskan who volunteers time to the local ambulance service, I would like to encourage your continuing support of Alaska Senate Bill No. 194 which you introduced on March 13, 1991. Thank you for introducing this legislation.

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Again, I urge your continuing support of Senate Bill No. 194 and the volunteers of our emergency medical services in the State of Alaska. Thank you for your consideration.

Sincerely,


Hunter Michelbrink
Post Office Box 1770
Nome, Alaska 99762

April 3, 1991

Senator Curt Menard
Alaska State Legislature
Post Office Box V
Juneau, Alaska 99811

RE: Alaska Senate Bill No. 194

Dear Senator Menard:

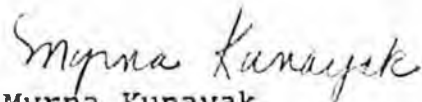
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Again, I urge your continuing support of Senate Bill No. 194 and the volunteers of our emergency medical services in the State of Alaska. Thank you for your consideration.

Sincerely,



Myrna Kunayak
Post Office Box 1034
Nome, Alaska 99762

April 3, 1991

Senator Curt Menard
Alaska State Legislature
Post Office Box V
Juneau, Alaska 99811

RE: Alaska Senate Bill No. 194

Dear Senator Menard:

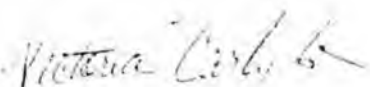
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Again, I urge your continuing support of Senate Bill No. 194 and the volunteers of our emergency medical services in the State of Alaska. Thank you for your consideration.

Sincerely,



Vikki Carlyle
Post Office Box 1506
Nome, Alaska 99762

April 3, 1991

Senator Curt Menard
Alaska State Legislature
Post Office Box V
Juneau, Alaska 99811

RE: Alaska Senate Bill No. 194

Dear Senator Menard:

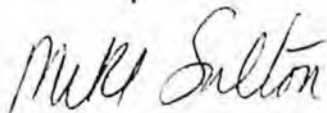
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Again, I urge your continuing support of Senate Bill No. 194 and the volunteers of our emergency medical services in the State of Alaska. Thank you for your consideration.

Sincerely,



Mike Sulton
Post Office Box 1464
Nome, Alaska 99762

April 3, 1991

Senator Curt Menard
Alaska State Legislature
Post Office Box V
Juneau, Alaska 99811

RE: Alaska Senate Bill No. 194

Dear Senator Menard:

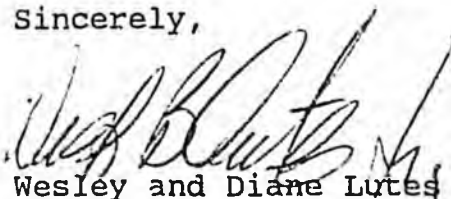
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Again, I urge your continuing support of Senate Bill No. 194 and the volunteers of our emergency medical services in the State of Alaska. Thank you for your consideration.

Sincerely,



Wesley and Diane Lutes
Post Office Box 1421
Nome, Alaska 99762

April 3, 1991

Senator Curt Menard
Alaska State Legislature
Post Office Box V
Juneau, Alaska 99811

RE: Alaska Senate Bill No. 194

Dear Senator Menard:

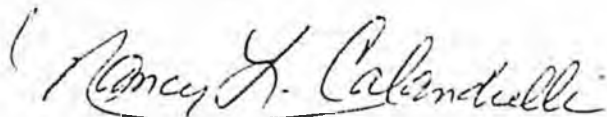
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Again, I urge your continuing support of Senate Bill No. 194 and the volunteers of our emergency medical services in the State of Alaska. Thank you for your consideration.

Sincerely,



Nancy L. Calandrelli
Post Office Box 1041
Nome, Alaska 99762

April 3, 1991

Senator Curt Menard
Alaska State Legislature
Post Office Box V
Juneau, Alaska 99811

RE: Alaska Senate Bill No. 194

Dear Senator Menard:

As an Alaskan who volunteers time to the local ambulance service, I would like to encourage your continuing support of Alaska Senate Bill No. 194 which you introduced on March 13, 1991. Thank you for introducing this legislation.

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Again, I urge your continuing support of Senate Bill No. 194 and the volunteers of our emergency medical services in the State of Alaska. Thank you for your consideration.

Sincerely,



Terry Calandrelli
Post Office Box 1041
Nome, Alaska 99762

April 3, 1991

Senator Curt Menard
Alaska State Legislature
Post Office Box V
Juneau, Alaska 99811

RE: Alaska Senate Bill No. 194

Dear Senator Menard:

As an Alaskan who volunteers time to the local ambulance service, I would like to encourage your continuing support of Alaska Senate Bill No. 194 which you introduced on March 13, 1991. Thank you for introducing this legislation.

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Again, I urge your continuing support of Senate Bill No. 194 and the volunteers of our emergency medical services in the State of Alaska. Thank you for your consideration.

Sincerely,



Mark Hunt
Post Office Box 2074
Nome, Alaska 99762

PUBLIC OPINION MESSAGE

DEAR: SENATOR MENARD

NAME: ROBBY BENSON
TITLE: CITY CLERK/TREASURER
ADDRESS: P.O. BOX 229
CITY: DELTA JCT. ZIP: 99737
PHONE: 895-4656
BILL NO: SB 194
SUBJECT: HEPATITIS B SHOTS FOR SERVICE PROVIDERS
MESSAGE: ON BEHALF OF THE DELTA JUNCTION CITY COUNCIL, WE REQUEST YOUR SUPPORT
OF SENATE BILL 194. THANK YOU.

POMID: 02103857
DATE: 91/03/28
TIME: 10:38:57
LIONAME: DELTA JUNCTION LIO

COPIES: REPRESENTATIVE SENATORS

GONZALES

SHULTZ
STURGULEWSKI
FISCHER
COTTEN
HOFFMAN

PUBLIC OPINION MESSAGE

DEAR: SENATOR MCHARD

NAME: TERESA D. STONE
TITLE: EHS COORDINATOR - KANA
ADDRESS: 402 CENTER ST.
CITY: KODIAK ZIP: 99615
PHONE: 436-5725
BILL NO: SD 154

SUBJECT: HEPATITIS B SHOTS FOR SERVICE PROVIDERS
MESSAGE: I WOULD LIKE TO ENCOURAGE YOUR SUPPORT FOR THIS BILL. THERE IS A GREAT NEED FOR THIS PROTECTION AMONG THE VOLUNTEERS AS WELL AS PAID EMPLOYEES. I HAVE WORKED AS AN EMS VOLUNTEER FOR SEVERAL YEARS. I AM CURRENTLY THE KODIAK ISLAND EMS COORDINATOR. THANK YOU FOR YOUR SUPPORT.

POMID: 09163257
DATE: 91/04/08
TIME: 16:32:57
LIONAME: KODIAK LIO

COPIES: REPRESENTATIVE SENATORS

DAVIDSON	ZHAROFF
	KEPTTULA
	CONROBT
	DUNCAN
	ADAMS
	UEHLING
	HOFFMAN
	SHULTZ
	STURGULENSKI
	FISCHER
	COTTEN

PUBLIC OPINION MESSAGE

DEAR: SENATOR MENARD

NAME: MEPRICK PEICE
TITLE:
ADDRESS: 175 BLUE FOX RUN
CITY: FAIRBANKS ZIP: 99712
PHONE: 457-2600
BILL NO: SB 194

SUBJECT: HEPATITIS B SHOTS FOR SERVICE PROVIDERS
MESSAGE: HEPATITIS B IS A DEADLY DISEASE THAT KILLS OVER 2000 HEALTH CARE WORKERS ANNUALLY. WORLDWIDE IT KILLS 2 MILLION PEOPLE ANNUALLY. BY COMPARISON HEPATITIS KILLS FAR MORE PEOPLE THAN THE WELL PUBLICIZED AIDS VIRUS. IN ALASKA EMS PERSONNEL ARE AT A RISK OF BEING EXPOSED TO, AND CONTRACTING HEPATITIS B. IT IS TIME THAT LEGISLATION SUCH AS SB 194 BECAME LAW. THANK YOU. EOM/CS

FOMID: 07124643
DATE: 01/04/02
TIME: 12:46:43
LIONAME: FAIRBANKS LIO

COPIES: SENATORS

ADAMS
COLLINS
COTTELL
DUNCAN
ELIASON
FAHRENKAMP
FISCHER
FRANK
HALFORD
HOFFMAN
JONES
KERTTULA
PEARCE
FOURCHOT
PODEY
SHULTZ
STURGOLEWSKI
UEHLING
ZHAROFF

T/C NO: 91-04-095
 DATE: APRIL 19, 1991
 SPONSOR: SENATE HESS
 SUBJECT: SB 194, MULTIPLE BILLS
 MODERATOR: DONNA GRENIER
 SITE: VALDEZ

PARTICIPANT LIST#1

FINAL STATS

 TESTIFIED

NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1. CHARLES LUNDFELT FIRE CHIEF	MAY WISH TO TESTIFY LATER		SB194

 OBSERVED

NAME/REPRESENTING	ADDRESS	PHONE	BILL NO.
1.			

TESTIFIED:
 UNABLE:
 OBSERVED:
 TOTAL:

START TIME:

END TIME: