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House Bill 5322 (Substitute H-1 as passed by the House) Sponsor: Representative Brenda Clack House Committee: Health Policy Senate Committee: Health Policy

Date Completed: 3-26-08

<u>CONTENT</u>

The bill would amend the Revised School Code to require a school board to include information about human papillomavirus (HPV), if the board provided information on other health issues to parents of pupils in at least grades 6, 9, and 12.

Specifically, if the board of a school district or board of directors of a public school academy, at the beginning of a school year, provided information on immunizations, infectious disease, medications, or other school health issues to parents and guardians of pupils in at least grades 6, 9, and 12, then the board would have to include information about HPV and the vaccine for HPV. The information would have to include at least the following:

- -- The risks associated with HPV.
- -- The availability, effectiveness, and potential risks of immunization for HPV.
- -- Sources where parents and guardians could obtain additional information about HPV and could obtain vaccination of a child against HPV.

The Code contains generally the same requirements concerning meningococcal meningitis. The Department of Education, in cooperation with the Department of Community Health, must develop and make available to school districts, public school academies, and nonpublic schools information that meets these requirements. Under the bill, this also would apply to information meeting the proposed requirements concerning HPV.

MCL 380.1177a

Legislative Analyst: Suzanne Lowe

FISCAL IMPACT

The bill would have no fiscal impact on the State.

Local school districts would see minimal, if any, increases in costs associated with disseminating additional health information as required by this legislation.

Fiscal Analyst: Kathryn Summers-Coty

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