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Mandating Flu Vaccines for Health Care Workers

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Mandating Flu Vaccines for Health Care Workers
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Bill 381

“The purpose of this bill is to require that all health care workers receive an influenza vaccination by October 1 every year.”

Support for Bill 381

There is strong support in favor of Bill 381 and agreement that health care workers should be mandated to receive an influenza vaccination by October 1st of each calendar year.

Increased Risk

- Without mandate, there is an increased risk immunocompromised and/or surgical patients.
- The following groups are at an increased risk of contracting the respiratory viruses that cause the flu – influenza A and B.²
  - Children and infants
  - Older adults (65 years+)
  - Pregnant women
  - Individuals with weakened immune systems
- Any person in a hospital or hospital-like setting is at a higher risk of contracting the virus due to its heavier population and high frequency of close, interpersonal contact.³

Losses in Man Hours, Money, & Productivity

- There is a potential loss of man hours and productivity due to employee absence because of illness associated with failure to mandate vaccinations.
- An estimated 17 million workdays are missed by employees in the U.S. each year, totaling to a loss of $7 billion and in productivity.⁴
- Health care workers are increasing their percentage in this estimate each flu season.⁵
- Hospital emergency rooms become flooded during the months of January through March, in part, because of individuals infected with influenza. Thus, attention and treatment is diverted from critically ill and acute patients.
- During the 2017-2018 flu season, the CDC estimated 960,000 hospitalizations due to influenza – three times higher than the estimated 290,000 for the 2010-2011 season.⁶

Increased Cost of Healthcare

- An increased cost of healthcare could be attributed to unnecessary prescriptions and tests prescribed and performed due to influenza symptoms.
- Results of a 2007 study estimated 31.4 million outpatient visits are attributed to the flu, annually.
- These visits result in direct medical expenses of $10.4 billion, and consequently, a $16.3 billion loss in personal earnings.⁵

Summary Statement & Impact

The passing of Bill 381 would ensure higher rates of influenza prevention, increased productivity in the workplace, improved economic and healthcare stability, and healthier citizens.

References