

4/19/2019

STAFF: ALYSON WILLIAMS

POLICY ANALYSIS

HB19-1312: SCHOOL IMMUNIZATION REQUIREMENTS

Concerning modernizing immunization requirements for school entry to improve vaccination rates. **Details**

| Bill Sponsors: | House – <i>Mullica (D),</i> Arndt (D), Benavidez (D), Bird (D), Buckner (D), Buentello (D), Caraveo (D), Coleman (D), Duran (D), Esgar (D), Froelich (D), Gray (D), Hansen (D), Jaquez Lewis (D), Kennedy (D), Kipp (D), McCluskie (D), Melton (D), Michaelson Jenet (D), Roberts (D), Sirota (D), Snyder (D), Tipper (D), Valdez, A. (D) |
|----------------|---|
| | Senate – Gonzales (D) and Priola (R) |
| Committee: | House Health & Insurance |
| Bill History: | 4/4/2019- Introduced in House |
| | 4/15/2019- House Health & Insurance Refer Amended to Committee of the Whole |
| Next Action: | 4/19/2019- House Second Reading |
| Fiscal Note: | <u>4/9/2019 Version</u> |

Bill Summary

The bill requires the Department of Public Health and Environment (CDPHE) to develop a standardized form and submission process for individuals to claim a medical, religious, or personal belief exemption to an immunization. In order to claim a personal or religious belief exemption for their child, this bill would require parents to submit the standardized form to CDPHE or the appropriate local public health agency.

Issue Summary

Advisory Committee on Immunization Practices (ACIP)

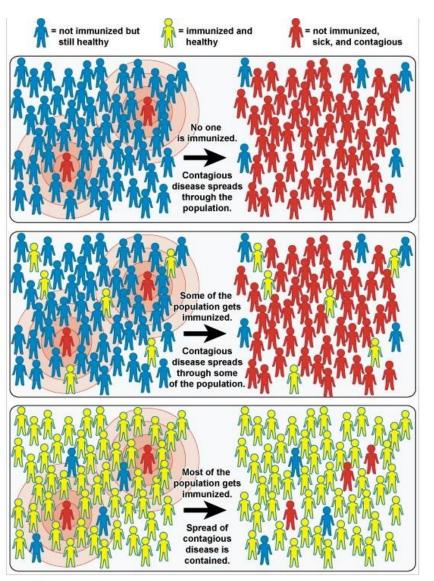
Formed in 1964, the Advisory Committee on Immunization Practices (ACIP) is an entity within the Centers for Disease Control and Prevention (CDC) that develops the recommendations regarding the use of vaccines for the general public based on scientific evidence.¹ ACIP collaborates with many organizations to develop its recommendations to annually update the immunization schedules for childhood and adolescents as well as adults.²

Herd Immunity

Herd immunity, also known as community immunity, works when enough people are vaccinated against a disease so it cannot travel as easily from person to person; therefore, the entire community is less likely to contract the disease.³ Since some individuals cannot get immunized, due to factors such as age, serious allergies, or a weakened or failing immune system, the herd immunity works to protect them if the majority of the population is immunized. For example, to achieve herd immunity for measles at least 90 to 95 percent

¹ CDC (2019). Advisory Committee on Immunization Practices (ACIP). Retrieved from <u>https://www.cdc.gov/vaccines/acip/index.html</u> ² Walton, L.R., Orenstein, W.A., & Pickering, L.K. (2015). *The history of the United States Advisory Committee on Immunization Practices* (ACIP). Retrieved from <u>https://www.ncbi.nlm.nih.gov/m/pubmed/25446820/</u>

³ U.S. Dept. of Health and Human Services (n.d.) *Vaccines Protect Your Community*. Retrieved from <u>https://www.vaccines.gov/basics/work/protection</u>



of the population needs to be vaccinated.⁴ The following graphic from the National Institute of Allergy and Infectious Diseases created the following graphic to demonstrate how herd immunity works.⁵

Credit: NIAID

National Vaccination Landscape

School requirements for vaccinations vary from state to state and "usually reflect the recommendations of the ACIP." ⁶ All states allow exemptions for medical reasons and almost all states have religious or philosophical/personal belief exemptions (excluding California, Mississippi, and West Virginia). Federal funds pay for approximately 95 percent of publicly funded vaccinations through the Vaccines for Children Program and Section 317 of the Public Health Services Act. All states and the District of Columbia had at least one

⁴ University of Oxford, Oxford Vaccine Group (April 26, 2016). *Herd Immunity: How does it work?* Retrieved from <u>https://www.ovg.ox.ac.uk/news/herd-immunity-how-does-it-work</u>

⁵ American Academy of Pediatrics (Apr. 18, 2016). *It Takes a Herd*. Retrieved from <u>https://www.aap.org/en-us/aap-voices/Pages/It-Takes-a-Herd.aspx</u>

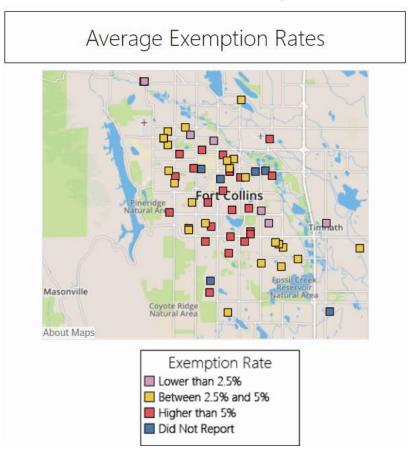
⁶ National Conference of State Legislatures (Jan. 17, 2019). *Immunization Policy Issues Overview*. Retrieved from <u>http://www.ncsl.org/research/health/immunizations-policy-issues-overview.aspx</u>

regional or local immunization registry and 94 percent of children in 2016 participated in one of these registries.

In October 2018, the CDC reported that the vaccination coverage of kindergartners for the 2017-28 school year had increased compared to the previous year's data.⁷ The report found that the median vaccination coverage was 94.3 percent of 2 doses of measles, mumps, and rubella (MMR). The median percentage of kindergartners with an exemption from at least one vaccine was 2.2 percent.

Vaccinations in Colorado

For the 2017-18 school year Colorado kindergartners had 88.7 percent overage for MMR, 87.7 percent coverage for chickenpox, and 88.6 percent coverage for DTaP (diphtheria, tetanus, and pertussis).⁸ This coverage is below the national median for those vaccinations. Further, more than 88 percent of exemptions are personal belief exemptions while approximately 4 percent were medical exemptions.⁹ Average exemption rates vary not only throughout the state but also within school districts and cities. The following graphic is from CDPHE's Colorado Health and Environmental Data portal.¹⁰



⁷ CDC (Oct. 12, 2018). Vaccination Coverage for Selected Vaccines and Exemption Rates Among Children in Kindergarten- United States, 201718 School Year. *Morbidity and Mortality Weekly Report 67*(40); 1115-1122. Retrieved from https://www.cdc.gov/mmwr/volumes/67/wr/mm6740a3.htm?s cid=mm6740a3 w

⁸ CDC (Oct. 12, 2018). Vaccination Coverage for Selected Vaccines and Exemption Rates Among Children in Kindergarten- United States, 201718 School Year. *Morbidity and Mortality Weekly Report 67*(40); 1115-1122. Retrieved from

https://www.cdc.gov/mmwr/volumes/67/wr/mm6740a3.htm?s_cid=mm6740a3_w

⁹ CDPHE (2019) State of Colorado 2017/2018 School and Child Care Immunization Data. Retrieved from

https://www.cohealthdata.dphe.state.co.us/Data/Details/22

¹⁰ CDPHE (2019). *School and Child Care Immunization Data 2016-2017*. Retrieved from

https://www.cohealthdata.dphe.state.co.us/Data/Details/1

This Legislation

The bill amends school immunization requirements to add that a student shall not attend any school unless he or she has presented to a school official a certificate of medical exemption or a certificate of a religious or personal belief exemption. By January 1, 2020, the Department of Public Health and Environment (CDPHE) is to develop educational materials regarding the benefits of immunizations. The materials are to be made available to health providers and facilities. CDPHE shall update the materials annually.

The bill further amends state immunization exemption requirements to state that for a parent or guardian to claim a medical exemption a licensed physician, physician assistant (PA), or advanced practice nurse (APN) must complete the certificate of a medical exemption on a standardized form developed by CDPHE and the certificate must be given to parent or guardian to submit to the student's school. The physician, PA, or APN is to inform the parent or guardian of the option to exclude the student's immunization information from the tracking system; however, the provider must submit the medical exemption data to the immunization tracking system.

For a parent, guardian, or student over the age of 18 (or who is emancipated) to claim a religious or personal belief exemption they must complete the certificate of a religious or personal belief exemption on standardized form developed by CDPHE and submit the certificate in-person to CDPHE or the applicable local public health agency. The local public health agency must provide a copy of the completed certificate, signed by a representative of CDPHE or the local public health agency, to the parent, guardian, or student. This copy is to be submitted to the student's school. Renewals of the exemption are completed in the same manner or online. The local public health agency or CDPHE is to inform the parent, guardian, or student of the option to exclude the student's immunization information from the tracking system; however, the entity must submit the medical exemption data to the immunization tracking system. By January 1, 2020 CDPHE is to post the standardized form for a certificate of a religious or personal belief exemption on its website. Any updates to the form are also to be posted on the website.

The State Board of Health shall adopt rules for the medical exemption recommendations as based on contraindications for vaccinations, described by the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control and Prevention (CDC).

CDPHE is to include immunization exemption information as part of its annual SMART Act¹¹ presentation to the General Assembly. The presentation must include at least the following information:

- Statistics demonstrating rates of immunization, medical exemptions, and religious or personal belief exemptions compared to previous years
- Statistics demonstrating rates of immunization, medical exemptions, and religious or personal belief exemptions for each county in Colorado
- Statistics demonstrating rates of immunization, medical exemptions, and religious or personal belief exemptions of Colorado compared to other states

The bill amends the rulemaking authority of the State Board of Health. The Board must adopt the immunization recommendations from ACIP. The Board may promulgate rules to establish required immunizations in addition to the ACIP recommendations. Further, the Board may conduct rulemaking to establish the timing by which schools, parents, guardians, or students, must demonstrate compliance with immunization requirements for school or grade-level entry.

¹¹ State Measurement for Accountable, Responsive, and Transparent Government Act

The bill adds physicians, PAs, and APNs to the sources where information for the immunization tracking system is gathered. The bill clarifies that these providers are not subject to regulatory sanction for not submitting immunization and medical exemption data to the system.

The bill is effective upon the Governor's signature or if the Governor allows it to become law without their signature.

Fiscal Note

The bill will increase the workload for CDPHE but it is assumed that the required tasks can be accomplished within existing appropriations for the department. It also increases the workload for local public health agencies, but the fiscal note does not address to what extent that work could increase costs.

Reasons to Support

Immunizations are important tools for protecting children and adults from serious, life-threatening, and once-common illnesses. This bill may increase vaccination rates, which would improve herd immunity to protect those that cannot be immunized from these illnesses. The proposed process for obtaining a personal belief or religious exemption may give public health agencies to share evidence-based information with parents, guardians, and students. Current law makes it easier for parents to claim an exemption rather than follow the recommended vaccination schedule. High exemption rates make communities vulnerable to outbreaks and jeopardize the health for newborn babies and individuals who cannot be vaccinated due to compromised immune systems. The requirements within the bill standardize the exemption process, which may make it so only those who truly need a medical exemption or hold a personal or religious belief would follow the new process. The secondary purpose of this bill is to increase usage of the state-wide immunization tracking system. The bill's focus on this system is also important in order to update and increase the quality of vaccination data statewide. Gathering exemption and immunization information may allow for quick action to be taken if a disease outbreak occurs.

Supporters

- Colorado Children's Campaign
- Colorado Pharmacists Society

- Denver Health
- Healthier Colorado

Reasons to Oppose

Requiring parents and guardians to go to CDPHE or the local public health agency may be a barrier for proper implementation in rural areas that could require a long drive to reach either of those entities. Some assert that the bill gives the Board of Health too broad of authority to add required vaccinations and to determine the timing of compliance with the required process. Further, some opponents assert that the collection of immunization and exemption information by CDPHE may violate federal privacy laws, including HIPAA.

Opponents

- Christian Home Educators of Colorado
- Home School Legal Defense Association

Other Considerations

Some believe that the bill could do more to combat non-immunization in Colorado, including completely removing the ability of receiving non-medical exemptions.

About this Analysis

This analysis was prepared by Health District of Northern Larimer County staff to assist the Health District Board of Directors in determining whether to take an official stand on various health-related issues. The Health District is a

special district of the northern two-thirds of Larimer County, Colorado, supported by local property tax dollars and governed by a publicly elected five-member board. The Health District provides medical, mental health, dental, preventive and health planning services to the communities it serves. This analysis is accurate to staff knowledge as of date printed. For more information about this summary or the Health District, please contact Alyson Williams, Policy Coordinator, at (970) 224-5209, or e-mail at <u>awilliams@healthdistrict.org</u>.