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Received March 28, 2013 Commission on State Mandates

March 28, 2013

Heather Halsey Executive Director Commission on State Mandates 980 9th Street, Suite 300 Sacramento, CA 95814

Re: Health and Safety Code sections 120325 and 120335 Statutes 2010, Chapter 434 (AB 354) Immunization Records - Pertussis (11-TC-02)

Dear Ms. Halsey:

The following comments are submitted in response to the Draft Staff Analysis for the Immunization Records - Pertussis (11-TC-02) test claim submitted by the claimant, Twin Rivers Unified School District.

1. <u>TEST CLAIM STATUTE IMPOSES STATE MANDATED ACTIVITIES ON</u> <u>SCHOOL DISTRICTS</u>

On September 26, 2011, claimant, Twin Rivers Unified School District, filed a test claim with the Commission. On October 5, 2011, Commission staff deemed the filing complete and issued a notice of complete test claim filing and schedule for comments. ¹ "No state agency or other interested party has filed a response to this test claim." ²

The test claim stated: "Students entering or advancing to grades seven through twelve in the 2011–12 school year are required to show proof of immunization with a pertussis (whooping cough) vaccine booster called tetanus toxoid, reduced diphtheria toxoid and acellular pertussis vaccine (Tdap). The new requirement affects all students—current, new, and transfers—in public and private schools." (test claim, p. 6.)

As pled by the claimant in the test claim, (test claim, p. 7.) school districts are required, "to inform parents/students of the new immunization requirements and will be required to train staff, obtain, review, maintain student immunization records and contact parents and legal guardians for non-compliance. The law requires school districts to maintain records of immunization of all school

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¹ Immunization Records- Pertussis 11-TC-02 (DSA p. 6)

² Immunization Records- Pertussis 11-TC-02 (DSA p. 12)

Heather Halsey Executive Director Commission on State Mandates

Health and Safety Code sections 120325 and 120335 Statutes 2010, Chapter 434 (AB 354) Immunization Records - Pertussis (11-TC-02)

age children and report periodically to the state on the immunization status of all new entrants into the schools."

Other activities pled in the test claim:

Request and review lawful exemption or proof of immunization from each pupil seeking admission to school in the state for the first time.

• Record each pupil's immunization for, or exemption from immunization record and maintain the form in the pupil's permanent record.

• Request and review lawful exemption or proof of immunization from each pupil advancing to the seventh grade.

- Periodically review the pupil's immunization record until the pupil is fully immunized.
- Document vaccine doses on the pupil's immunization record as they are administered.

• Notify parents or guardians of the requirement to exclude the pupil from school if written evidence of the required immunizations are not timely presented.

• Refer the parents or guardians to a physician, nurse, or county health department for review of immunization records and provision of required immunizations.

• Exclude pupils from school attendance when written evidence of additional doses is not presented within ten days of parental notification.

• Collect data and prepare reports annually on immunization status for the Department of Health Services, and prepare follow-up or additional reports upon request by county health departments and the state.³

2. <u>TEST CLAIM PLED STATE MANDATED ACTIVITIES</u>

The test claim (page 9), Section G, identifies a prior mandate determinations, <u>Immunization</u> <u>Records:</u> Hepatitis B test claim, made by the Commission on State Mandates that is *related* to the alleged mandate.(emphasis added) The test claim further references the California Code of Regulations, title 17, sections 6020, 6035, 6040, 6055, 6065, 6070, and 6075.⁴ Section 2 (g) of the test claim statute, attached to the test claim, states emergency regulations may be adopted to

³ "The activities identified by the claimant are addressed by DPH regulations that exist to implement and interpret Health and Safety Code sections 120325 through 120375." (DSA, p.15)

⁴ On August 24, 2000, the Commission on State Mandates (Commission) adopted the Statement of Decision for the Immunization Records: Hepatitis B test claim, finding that Statutes 1978, chapter 325; Statutes 1979, chapter 435; Statutes 1982, chapter 472; Statutes 1991, chapter 984; Statutes 1992, chapter 1300; Statutes 1994, chapter 1172; Statutes 1995, chapters 291 and 415; Statutes 1996, chapter 1023; Statutes 1997, chapters 855 and 882; and California Code of Regulations, title 17, sections 6020, 6035, 6040, 6055, 6065, 6070, and 6075. (test claim p. 9-10)(DSA p.10)

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Health and Safety Code sections 120325 and 120335 Statutes 2010, Chapter 434 (AB 354) Immunization Records - Pertussis (11-TC-02)

implement the statute.⁵

Staff's application of Section 1183.02 (c)⁶ requiring the register number of regulations be attached to the test claim form is not supported by the reading of the "plain language" contained in the regulation (See footnote 29 of the Draft Staff Analysis), nor is it included in the requirements of the test claim form.⁷

⁶ 2 California Code of Regulation, section 1183.02(c) Content and Form. Written responses, opposition, or recommendations on the test claim shall contain the following documentary evidence, if applicable:

(1) If assertions or representations of fact are made, they must be supported by documentary evidence which shall be submitted with the state agency's response, opposition, or recommendations. All documentary evidence shall be authenticated by declarations under penalty of perjury signed by persons who are authorized and competent to do so and must be based on the declarant's personal knowledge or information or belief.

(2) Include a copy of relevant portions of state constitutional provisions, federal statutes, and executive orders, and a copy of administrative decisions and court decisions that may impact the alleged mandate, unless such authorities are also cited in the test claim. The specific chapters, articles, sections, or page numbers must be identified. Published court decisions arising from state mandate determinations by the Board of Control and the Commission on State Mandates, article XIII B, section 6 of the California Constitution, and Government Code sections 17500 and following are exempt from the requirements of this subsection.

⁷ 7. Documentation support the written narrative with copies of all of the following:

(A) the test claim statute that includes the bill number alleged to impose or impact a mandate; and/or

(B) the executive order, identified by its effective date, alleged to impose or impact a mandate; and

(C) relevant portions of state constitutional provisions, federal statutes, and executive orders that may impact the alleged mandate; and

(D) administrative decisions and court decisions cited in the narrative. Published court decisions arising from a state mandate determination by the Board of Control or the Commission are exempt from this requirement; and

(E) statutes, chapters of original legislatively determined mandate and any amendments. (*http://www.csm.ca.gov/docs/TCForm.pdf*) @PFDesktop\::ODMA/WORLDOX/G/DATA/4655/1/CO/S0131187.WPD

⁵ Section 2 (g) of the test claim statute states, The department may adopt emergency regulations to implement subdivisions (c) and (d) including, but not limited to, requirements for documentation and immunization status reports, in accordance with the rule making provisions of the Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340) of Part 1 of Division 3 of Title 2 of the Government Code). The initial adoption of emergency regulations shall be deemed to be an emergency and considered by the Office of Administrative Law as necessary for the immediate preservation of the public peace, health and safety, or general welfare. Emergency regulations adopted pursuant to this subdivision shall remain in effect for no more than 180 days.

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Health and Safety Code sections 120325 and 120335 Statutes 2010, Chapter 434 (AB 354) Immunization Records - Pertussis (11-TC-02)

Moreover, neither the regulation 1183.02 (c), Government Code section 17553 (b) (1) ⁸ or the test claim form require California Code of Regulations be submitted with the test claim.

3. <u>CLAIMANT REQUESTS TEST CLAIM BE AMENDED</u>

The application of Government Code 17554, permits the parties to agree to waive the application of any procedural requirement.⁹ Claimant requests the test claim be amended to include the 17 California Code of Regulations sections 6020, 6035, 6040, 6051, 6055, 6065, 6070, and 6075 and Register of Actions that are attached. The equitable application of Government Code section 17554, provides all parties to the claim, the opportunity to agree that the commission may waive the application of any procedural requirement imposed by this chapter or pursuant to Section 17553. The authority granted by this section includes the consolidation of claims and the shortening of time periods.

CERTIFICATION

I certify by my signature below, under penalty of perjury under the laws of the State of California, that the statements made in this document are true and complete to the best of my own personal knowledge or information and belief.

Arthur M. Palkow

Attorney for the Claimant

⁸ Government Code section 17553 (b)(1): All test claims shall be filed on a form prescribed by the commission and shall contain at least the following elements and documents: (1) A written narrative that identifies the specific sections of statutes or executive orders and the effective date and register number of regulations alleged to contain a mandate and shall include all of the following.

⁹ Government Code section 17554. With the agreement of all parties to the claim, the commission may waive the application of any procedural requirement imposed by this chapter or pursuant to Section 17553. The authority granted by this section includes the consolidation of claims and the shortening of time periods.

Title 17. Public Health

Division 1. State Department of Health Services

Chapter 4. Preventive Medical Service

Subchapter 8. Immunization Against Poliomyelitis, Diphtheria, Pertussis, Tetanus, Measles (Rubeola), Rubella, Haemophilus Influenzae Type B (Hib), Mumps, and Hepatitis B Article 2. Required Immunizations (Refs & Annos)

17 CCR § 6020

§ 6020. Required Immunizations.

(a) The required immunizations for admission to and attendance at a public or private elementary or secondary school, child care center, day nursery, nursery school, family day care home, or developmental center shall be those set forth, according to age, in Table 1.

(b) In Table 1 of Section 6020 and in Table 2 of Section 6035, DTP (or DPT) means diphtheria and tetanus toxoids and pertussis vaccine, including DTaP vaccine. Tdap means tetanus toxoid, reduced diphtheria toxoid, and acellular pertussis vaccine. DT (or TD) and Td (or dT) means diphtheria and tetanus toxoids.

(c) For pupils who have reached their seventh birthday, a history of any preparations containing diphtheria and tetanus toxoids and pertussis vaccine (DTP, DT, Td, Tdap, etc.) shall be acceptable as meeting the requirement for tetanus and diphtheria toxoids and pertussis vaccine that is set forth in Table 1.

(d) Pupils who have reached their seventh birthday shall be exempt from the mumps immunization requirements.

(e) Combination vaccines that include measles, mumps, and rubella components shall be acceptable as meeting the requirements for these vaccines that are set forth in Table 1.

(f) For pupils entering or advancing to the seventh grade, immunization requirements are set forth in Table 1.

(g) Pupils already admitted to California public and private schools at the Kindergarten level or above before July 1, 2001 are exempt from the Varicella (chickenpox) requirement as set forth in Table 1.

(h) For pupils entering or advancing into the eighth through twelfth grades, the immunization requirement is set forth in Table 1 of Section 6020.

Table 1: Immunization Requirements			
Institution	Age	Vaccine	Total Doses Received

2. Next @ 2013 Thomson Routers, No claim to original U.S. Government Works.

Child care center, day nursery, nursery school, family day care home, development center	Less than 2 months	None
Same as above	2-3 months	 Polio¹¹ dose DTP¹ dose Hib¹ dose Hepatitis B¹ dose
Same as above	4-5 months	 Polio¹² doses DTP, or combination of DTP and diphtheria-tetanus toxoids
Same as above	6-14 months	 Polio¹² doses DTP, or combination of DTP and diphtheria-tetanus toxoids
Same as above	15-17 months	 4. Hepatitis B

		3. Measles, rubella, and mumps	
			or combined on or after the
			lst birthday
		4. Hib	1 dose on or after the
			1st birthday
		5. Hepatitis B	2 doses
Same as above	18 months-5 years	1. Polio ¹	3 doses
		2. DTP, or combination of DTP and diphtheria-tetanus	
		toxoids	4 doses
		3. Measles, rubella, and mumps	
			or combined on or after the
			1st birthday
		4. Hib ³	l dose on or after the
			1st birthday
		5. Hepatitis B ²	3 doses
		6. Varicella	1 dose
Elementary school at	4-6 years	1. Polio ¹	
kindergarten level and			3 doses is acceptable if at
above			least one dose was given on
			or after the 4th birthday
		2. DTP, or combination of DTP and diphtheria-tetanus	
		toxoids	5 doses, except that a total of
			4 doses is acceptable if at
			least one dose was given on
			or after the 4th birthday.

		3. Measles, rubella, and mumps	
			or combined, on or after the
			1st birthday. Pupils entering
			a kindergarten (or first grade
			if kindergarten skipped) are
			required to have 2 doses of
			measles-containing
			vaccine, both given on or
			after the first birthday
		4. Hepatitis B ²	3 doses
		5. Varicella	
Elementary school,	7-17 years	1. Polio ¹	4 doses, except that a total of
secondary school			3 doses is acceptable if at
			least one dose was given on
			or after the 2nd birthday
		2. Diphtheria and tetanus toxoids and pertussis vaccin	ne
		given as DTP, DT, Td, or Td	ap At least 3 doses. One more
			dose is required if the
			last dose was given before
			the 2nd birthday.
		3. Measles and rubella (munnet)	mps I dose of each, separately
			or combined, on or after the
			1st birthday. (See below for
			additional requirements for
			7th grade enrollment,
			effective 7/1/99.)

		4. Varicella ⁵	1 dose aged 7 through 12
			years for students not
			admitted to California
			schools before July 1, 2001.
			2 doses for students aged 13
			through 17 years not
			admitted to California
			schools before July 1, 2001.
Seventh Grade	Any	1. Tdap ^{6,7}	1 dose on or after the 7th
			birthday
		2. Measles ⁴	2 doses of measles
			-containing vaccine, both
			given on or after the first
			birthday.
Eighth through Twelfth	Any pupil under 18 years	1. Tdap ^{6,7}	1 dose on or after the 7th
Grades ⁸			birthday
Any	18 years and older	None	

¹ Oral polio vaccine (OPV) or inactivated polio vaccine (IPV) or any combination of these vaccines is acceptable.

² Applies only to children entering at kindergarten level (or at first grade level if kindergarten skipped) or below on or after August 1, 1997. Applies only to children entering at kindergarten level (or at first grade level if kindergarten skipped) or below on or after August 1, 1997.

 3 Required only for children who have not reached the age of 4 years 6 months.

⁴ Applies only to children (of any age) entering or advancing to the seventh grade on or after July 1, 1999.

⁵ Children admitted to California schools at the Kindergarten level or above before July 1, 2001 are exempt from this requirement.

⁶ Pupils must have received at least one dose of Tdap prior to admission or advancement into the 7th through 12th grades.

⁷ If DTP was given on or after age 7 years instead of Tdap, this dose may also be counted as a valid dose for this requirement.

⁸ This requirement is effective July 1, 2011, through June 30, 2012.

Note: Authority cited: Sections 120330, 120335 and 131200, Health and Safety Code. Reference: Sections 120325, 120335, 120370 and 120375, Health and Safety Code.

HISTORY

1. Amendment filed 8-30-79; effective thirtieth day thereafter (Register 79, No. 35).

2. Amendment filed 4-15-80 as an emergency; effective upon filing (Register 80, No. 16). A Certificate of Compliance must be transmitted to OAH within 120 days or emergency language will be repealed on 8-14-80.

3. Certificate of Compliance transmitted to OAL 7-29-80 and filed 8-20-80 (Register 80, No. 34).

4. Amendment of subsections (c), (d), and (e) filed 10-3-80; effective thirtieth day thereafter (Register 80, No. 40).

5. Repealer and new section filed 2-3-86; effective thirtieth day thereafter (Register 86, No. 6).

6. Amendment of subsection (a), repealer of subsection (f) and subsection relettering, and amendment of Table 1 and Note filed 3-29-96; operative 4-28-96 (Register 96, No. 13).

7. Repealer of subsection (b), subsection relettering, amendment of newly designated subsection (b), and amendment of Table 1 and Note filed 5-22-97 as an emergency; operative 5-22-97 (Register 97, No. 21). A Certificate of Compliance must be transmitted to OAL by 9-19-97 or emergency language will be repealed by operation of law on the following day.

8. Editorial correction of subsection (b) (Register 97, No. 37).

9. Certificate of Compliance as to 5-22-97 order transmitted to OAL 9-5-97 and filed 9-26-97 (Register 97, No. 39).

10. New subsection (f), amendment of Table 1 and amendment of Note filed 2-18-99 as an emergency; operative 2-18-99 (Register 99, No. 8). A Certificate of Compliance must be transmitted to OAL by 6-18-99 or emergency language will be repealed by operation of law on the following day.

11. Editorial correction of table (Register 99, No. 27).

12. Certificate of Compliance as to 2-18-99 order transmitted to OAL 5-26-99 and filed 6-30-99 (Register 99, No. 27).

13. New subsection (g), amendment of Table 1 and amendment of Note filed 9-24-2002 as an emergency; operative 9-24-2002 (Register 2002, No. 39). A Certificate of Compliance must be transmitted to OAL by 1-22-2003 or emergency language will be repealed by operation of law on the following day.

14. Certificate of Compliance as to 9-24-2002 order transmitted to OAL 1-17-2003 and filed 2-27-2003 (Register 2003, No. 9).

15. Amendment of subsections (b)-(d), new subsection (h) and amendment of Table 1 and Note filed 6-30-2011 as an emergency; operative 7-1-2011 (Register 2011, No. 26). A Certificate of Compliance must be transmitted to OAL by 12-28-2011 or emergency language will be repealed by operation of law on the following day.

16. Amendment of subsections (b)-(d), new subsection (h) and amendment of Table 1 and Note refiled 12-15-2011 as an emergency; operative 12-28-2011 (Register 2011, No. 50). A Certificate of Compliance must be transmitted to OAL by 3-27-2012 or emergency language will be repealed by operation of law on the following day.

17. Certificate of Compliance as to 12-15-2011 order transmitted to OAL 2-3-2012 and filed 3-15-2012 (Register 2012, No. 11).

This database is current through 3/15/13 Register 2013, No. 11

17 CCR § 6020, 17 CA ADC § 6020

End of Document

Title 17. Public Health

Division 1. State Department of Health Services

Chapter 4. Preventive Medical Service

Subchapter 8. Immunization Against Poliomyelitis, Diphtheria, Pertussis, Tetanus, Measles (Rubeola), Rubella, Haemophilus Influenzae Type B (Hib), Mumps, and Hepatitis B

Article 3. Admission to School, Child Care Center, Day Nursery, Nursery School, Family Day Care Home, or Development Center (Refs & Annos)

17 CCR § 6035

§ 6035. Conditional Admission.

(a) Any pupil seeking admission to a given public or private elementary or secondary school, child care center, day nursery, nursery school, family day care home, or development center who lacks documentation of having received all the required vaccine doses against poliomyelitis, diphtheria, tetanus, pertussis, measles, rubella, Haemophilus influenzae type B, mumps, hepatitis B and varicella (chickenpox) as specified in Table 1, Section 6020, and has not obtained a permanent medical exemption or a personal beliefs exemption to immunization in accordance with Section 6051, may be admitted conditionally if:

(1) he or she has not received all the immunizations required for his or her age group but has commenced receiving doses of all the vaccines in accordance with Table 2, is not currently due for any doses at the time of admission (if he or she is due for any doses at this time they must be obtained before admission), and the pupil's parent or guardian is notified of the date by which the pupil must complete all the required immunizations in accordance with Table 2; or

(2) he or she is under age 18 months and has received all the immunizations required for his or her age group but will require additional vaccine doses at an older age, and the pupil's parent or guardian is notified of the date by which the pupil must complete all the remaining doses when they become due in accordance with Table 1, Section 6020; or

(3) he or she has obtained a temporary medical exemption from immunization in accordance with Section 6050, and the pupil's parent or guardian is notified of the date by which the pupil must complete all the required immunizations when the temporary exemption terminates; or

(4) he or she is a pupil entering a child care center governed by Education Code Section 8263(c), where a different deadline for obtaining all required immunizations may apply.

(b) The public or private elementary or secondary school, child care center, day nursery, nursery school, family day care home, or development center shall not allow the admission of any pupil seeking entry who does not meet the requirements for admission under Section 6025 or 6035. The principal or administrator shall advise the pupil, or the parent or guardian, to contact a physician or agency that provides immunizations.

Table 2: Conditional Admission Immunization Schedule

Vaccine	Dose	Time Intervals
Polio ¹	1st dose	. Before admission
	2nd dose	. As early as 6 weeks but no later than 10 weeks after the 1st
		dose. Before admission if 10 or more weeks have elapsed
		since the 1st dose at the time of admission.
	3rd dose	As early as 6 weeks but no later than 12 months after the
		2nd dose. Before admission if 12 or more months have
		elapsed since the 2nd dose at the time of admission.
	4th dose (Required only for	
	entry to kindergarten level	
	or above)	. Age 4-6 years: If the 3rd dose was given before the 4th
		birthday one more dose is required before admission.
		Age 7-17 years: If the 3rd dose was given before the
		2nd birthday, one more dose is required before admission.
Diphtheria, Tetanus, and Pertussis		
	1st dose	. Before admission.
	2nd dose	. As early as 4 weeks but no later than 8 weeks after the
FOR PUPILS UNDER AGE 7 YEARS:		1st dose. Before admission if 8 or more weeks have
		elapsed since the 1st dose at the time of admission.

	3rd dose	As early as 4 weeks but no later than 8 weeks after the
Diphtheria-tetanus-pertussis (DTP) or combination		2nd dose. Before admission if 8 or more weeks have
of DTP and diphtheria-tetanus toxoids		elapsed since the 2nd dose at the time of admission.
	4th dose	. As early as 6 months but no later than 12 months after
		the 3rd dose. Before admission if 12 or more months
		have elapsed since the 3rd dose at the time of admission.
	5th dose (Required only for	
	pupils ages 4-6 years	
	for entry to kindergarten	
	level and above)	If the 4th dose was given before the 4th birthday, one
OR		more dose is required before admission.
FOR PUPILS AGE 7 YEARS AND OLDER:	1st dose	. Before admission.
	2nd dose	As early as 4 weeks but no later than 8 weeks after the
		1st dose. Before admission if 8 or more weeks have
Diphtheria-tetanus-pertussis (DTP, Tdap)	elapsed since the 1st dose at the time of admission.
and diphtheria-tetanus toxoids	3rd dose	As early as 6 months but no later than 12 months after the
		2nd dose. Before admission if 12 or more months have
		elapsed since the 2nd dose at the time of admission.
	4th dose	If the 3rd dose was given before the 2nd birthday, one
		more dose is required before admission.
	One Tdap dose	Before 7th through 12th grade entry.

Measles	One dose only	Before admission. If the pupil is under age 15 months, this
		dose is required when age 15 months is reached.
Note: For children entering kindergarten for first grade	1st dose	Before admission.
f kindergarten is skipped) on or after August 1, 1997,	2nd dose	As early as 1 month but no later than 3 months after
wo doses are required. For children ntering 7th grade		the 1st dose.
n or after July 1, 1999, the series shall e in process		
or completed.		
tubella	One dose only	Before admission. If the pupil is under age 15 months, this
		dose is required when age 15 months is reached.
fumps (Not required for pupils age 7 ears and older)	One dose only	Before admission. If the pupil is under age 15 months, this
		dose is required when age 15 months is reached.
lib		
hildren 2-14 months old	Two doses	1st dose before admission. 2nd dose as early as 2 months
		but no later than 3 months after the 1st dose.
Children 15 months-4 1/2 years old	One dose	Before admission.
Iepatitis B - For children entering at	1st dose	Before admission.
indergarten level (or first grade if indergarten skipped)	2nd dose	As early as 1 month but no later than 2 months after the first

or below on or after August 1, 1997.		dose.
	3rd dose	Infants and children under age 18 months: As early as 2
		months but no later than 12 months after the 2nd dose.
		Also, no earlier than 4 months after the 1st dose.
		Children age 18 months and older: As early as 2 months but
		no later than 6 months after the 2nd dose. Also, no earlier
		than 4 months after the 1st dose.
Varicella ² - For children aged 13 through 17 years	1st dose	. Before admission
not admitted to California schools before July 1, 2001.	e 2nd dose	As early as 4 weeks but no longer than 3 months after first
		dose

¹ Oral polio vaccine (OPV) or inactivated polio vaccine (IPV) or any combination of these vaccines is acceptable.

 2 Children admitted to California schools at the Kindergarten level or above before July 1, 2001 are exempt from this requirement.

Note: Authority cited: Sections 120330, 120335 and 131200, Health and Safety Code. Reference: Sections 120325, 120335, 120370 and 120375, Health and Safety Code.

HISTORY

1. Amendment filed 8-30-79; effective thirtieth day thereafter (Register 79, No. 35).

2. Amendment of subsection (a) filed 4-15-80 as an emergency; effective upon filing (Register 80, No. 16). A Certificate of Compliance must be transmitted to OAH within 120 days or emergency language will be repealed on 8-14-80.

3. Certificate of Compliance transmitted to OAL 7-29-80 and filed 8-20-80 (Register 80, No. 34).

4. Repealer and new section filed 2-3-86; effective thirtieth day thereafter (Register 86, No. 6).

5. Amendment of subsections (a), (b), Table 2 and Note filed 3-29-96; operative 4-28-96 (Register 96, No. 13).

6. Amendment of subsection (a), Table 2 and Note filed 5-22-97 as an emergency; operative 5-22-97 (Register 97, No. 21). A Certificate of Compliance must be transmitted to OAL by 9-19-97 or emergency language will be repealed by operation of law on the following day.

7. Certificate of Compliance as to 5-22-97 order transmitted to OAL 9-5-97 and filed 9-26-97 (Register 97, No. 39).

8. Amendment of Table 2 filed 2-18-99 as an emergency; operative 2-18-99 (Register 99, No. 8). A Certificate of Compliance must be transmitted to OAL by 6-18-99 or emergency language will be repealed by operation of law on the following day.

9. Certificate of Compliance as to 2-18-99 order transmitted to OAL 5-26-99 and filed 6-30-99 (Register 99, No. 27).

10. Editorial correction of Table 2 (Register 99, No. 39).

11. Amendment of subsection (a), Table 2 and Note filed 9-24-2002 as an emergency; operative 9-24-2002 (Register 2002, No. 39). A Certificate of Compliance must be transmitted to OAL by 1-22-2003 or emergency language will be repealed by operation of law on the following day.

12. Certificate of Compliance as to 9-24-2002 order transmitted to OAL 1-17-2003 and filed 2-27-2003 (Register 2003, No. 9).

13. Amendment of Table 2 and Note filed 6-30-2011 as an emergency; operative 7-1-2011 (Register 2011, No. 26). A Certificate of Compliance must be transmitted to OAL by 12-28-2011 or emergency language will be repealed by operation of law on the following day.

14. Editorial correction renumbering footnote reference (Register 2011, No. 28).

15. Amendment of Table 2 and Note refiled 12-15-2011 as an emergency; operative 12-28-2011 (Register 2011, No. 50). A Certificate of Compliance must be transmitted to OAL by 3-27-2012 or emergency language will be repealed by operation of law on the following day.

16. Certificate of Compliance as to 12-15-2011 order transmitted to OAL 2-3-2012 and filed 3-15-2012 (Register 2012, No. 11).

This database is current through 3/15/13 Register 2013, No. 11

17 CCR § 6035, 17 CA ADC § 6035

End of Document

Title 17. Public Health

Division 1. State Department of Health Services

Chapter 4. Preventive Medical Service

Subchapter 8. Immunization Against Poliomyelitis, Diphtheria, Pertussis, Tetanus, Measles

(Rubeola), Rubella, Haemophilus Influenzae Type B (Hib), Mumps, and Hepatitis B

Article 3. Admission to School, Child Care Center, Day Nursery, Nursery School, Family Day Care Home, or Development Center (Refs & Annos)

17 CCR § 6040

§ 6040. Requirements for Continued Attendance.

An already admitted pupil who is subsequently discovered not to have received all the immunizations which were required before admission or who is subsequently discovered not to have complied with the requirements for conditional admission specified in Section 6035 shall continue in attendance only if he or she receives all vaccine doses for which he or she is currently due and provides documentation of having received such doses no later than 10 school days after he or she or the parent or guardian is notified. The school, child care center, day nursery, nursery school, family day care home, or development center shall notify the pupil or the parent or guardian of the time period (no longer than 10 school days) within which the doses must be received.

Note: Authority cited: Sections 3381(c) (120335(c)), 100275 and 120330, Health and Safety Code. Reference: Sections 3381 (120335), 120340 and 120375 (a) and (b), Health and Safety Code.

HISTORY

1. Amendment filed 2-3-86; effective thirtieth day thereafter (Register 86, No. 6).

2. Amendment of section and Note filed 3-29-96; operative 4-28-96 (Register 96, No. 13).

This database is current through 3/15/13 Register 2013, No. 11

17 CCR § 6040, 17 CA ADC § 6040

End of Document

Title 17. Public Health

Division 1. State Department of Health Services

Chapter 4. Preventive Medical Service

Subchapter 8. Immunization Against Poliomyelitis, Diphtheria, Pertussis, Tetanus, Measles (Rubeola), Rubella, Haemophilus Influenzae Type B (Hib), Mumps, and Hepatitis B Article 4. Exclusion (Refs & Annos)

17 CCR § 6055

§ 6055. Conditions for Admission Not Fulfilled.

The governing authority of the school, child care center, day nursery, nursery school, family day care home, or development center shall exclude from further attendance any pupil who fails to obtain the required immunizations within no more than 10 school days following receipt of the notice provided pursuant to Section 6040, unless the pupil is exempt for medical reasons or personal beliefs, until the pupil provides written evidence that he or she has received another dose of each required vaccine due at that time. Any pupil so excluded shall be reported to the attendance supervisor or to the building administrator.

Note: Authority cited: Sections 3381(c) (120335(c)), 100275 and 120330, Health and Safety Code. Reference: Sections 3381 (120335), 120340, 120365, 120370 and 120375, Health and Safety Code.

HISTORY

1. Amendment filed 2-3-86; effective thirtieth day thereafter (Register 86, No. 6).

2. Amendment of section and Note filed 3-29-96; operative 4-28-96 (Register 96, No. 13).

This database is current through 3/15/13 Register 2013, No. 11

17 CCR § 6055, 17 CA ADC § 6055

End of Document

Title 17. Public Health

Division 1. State Department of Health Services

Chapter 4. Preventive Medical Service

Subchapter 8. Immunization Against Poliomyelitis, Diphtheria, Pertussis, Tetanus, Measles (Rubeola), Rubella, Haemophilus Influenzae Type B (Hib), Mumps, and Hepatitis B

Article 3. Admission to School, Child Care Center, Day Nursery, Nursery School, Family Day Care Home, or Development Center (Refs & Annos)

17 CCR § 6051

§ 6051. Unconditional Admission with Permanent Medical Exemption or Personal Beliefs Exemption.

A pupil with a permanent medical exemption or a personal beliefs exemption to immunization shall be admitted unconditionally. A pupil with an exemption which is not based on pre-existing immunity to disease may be subject to exclusion pursuant to Section 6060.

(a) A permanent medical exemption shall be granted upon the filing with the governing authority of a written statement from a licensed physician to the effect that the physical condition of the pupil or medical circumstances relating to the pupil are such that immunization is permanently not indicated. The fact of the permanent medical exemption shall be recorded on the California School Immunization Record, PM 286 (01/02) as provided in Section 6070. A permanent medical exemption may be provided for one or more vaccines. A physician may provide a written statement that the pupil is medically exempt from the measles (rubeola) and/or varicella (chickenpox) requirements as a result of having had measles (rubeola) and/or varicella (chickenpox) disease, respectively. A physician may provide a written statement that the pupil is medically exempt from the rubella and/or mumps requirement as a result of having had laboratory confirmed illness with the corresponding disease.

(b) A personal beliefs exemption shall be granted upon the filing with the governing authority of a letter or affidavit from the pupil's parent or guardian or adult who has assumed responsibility for his or her care and custody in the case of a minor, or the person seeking admission if an emancipated minor, that such immunization is contrary to his or her beliefs. The fact of the personal beliefs exemption shall be recorded on the California School Immunization Record, PM 286 (01/02). If a personal beliefs exemption letter or affidavit for some or all immunizations was filed with the governing authority prior to July 1, 2011, a personal beliefs exemption letter or affidavit for the pertussis booster immunization must be filed with the governing authority. The Personal Beliefs Exemption form, CDPH 8261 (03/11), hereby incorporated by reference, is to be made available at the school as a means for exercising a personal belief exemption to the pertussis booster immunization requirement in Section 120335(d), Health and Safety Code. The fact of a personal beliefs exemption for the pertussis booster immunization requirement in Section 120335(d), Health and Safety Code, shall be recorded on the Tdap (Pertussis Booster) Requirement sticker, PM 286 S (01/11).

Note: Authority cited: Sections 120330, 120335 and 131200, Health and Safety Code. Reference: Sections 120325, 120335, 120365, 120370 and 120375, Health and Safety Code.

HISTORY

1. Renumbering and amendment of a portion of former Section 6050 to Section 6051 filed 2-3-86; effective thirtieth day thereafter (Register 86, No. 6).

2. Amendment of section and Note filed 9-24-2002 as an emergency; operative 9-24-2002 (Register 2002, No. 39). A Certificate of Compliance must be transmitted to OAL by 1-22-2003 or emergency language will be repealed by operation of law on the following day.

3. Certificate of Compliance as to 9-24-2002 order transmitted to OAL 1-17-2003 and filed 2-27-2003 (Register 2003, No. 9).

4. Amendment of section and Note filed 6-30-2011 as an emergency; operative 7-1-2011 (Register 2011, No. 26). A Certificate of Compliance must be transmitted to OAL by 12-28-2011 or emergency language will be repealed by operation of law on the following day.

5. Amendment of section and Note refiled 12-15-2011 as an emergency; operative 12-28-2011 (Register 2011, No. 50). A Certificate of Compliance must be transmitted to OAL by 3-27-2012 or emergency language will be repealed by operation of law on the following day.

6. Certificate of Compliance as to 12-15-2011 order transmitted to OAL 2-3-2012 and filed 3-15-2012 (Register 2012, No. 11).

This database is current through 3/15/13 Register 2013, No. 11

17 CCR § 6051, 17 CA ADC § 6051

End of Document

Title 17. Public Health

Division 1. State Department of Health Services

Chapter 4. Preventive Medical Service

Subchapter 8. Immunization Against Poliomyelitis, Diphtheria, Pertussis, Tetanus, Measles (Rubeola), Rubella, Haemophilus Influenzae Type B (Hib), Mumps, and Hepatitis B Article 5. Records as Evidence of Immunization (Refs & Annos)

17 CCR § 6065

§ 6065. Documentary Proof.

(a) There shall be a written record given to the person immunized or to his or her parent or guardian, by the physician or agency performing the immunization which shall contain the following information:

(1) Name of the person.

(2) Birthdate.

(3) Type of vaccine administered.

(4) Month, day, and year of each immunization.

(5) Name of the physician or agency administering the vaccine.

(b) The written record shall be shown by the parent, guardian or person immunized to the governing authority of the school, child care center, day nursery, nursery school, family day care home, or development center at the time of the pupil's admission and at subsequent times when required by the governing authority to determine the pupil's immunization status. For the pupil to be admitted, the written record shall show at least the month and year of each required vaccine dose. For doses of measles, rubella and mumps vaccine given during the month of the first birthday the record shall also show the specific date (i.e., month, day and year) of immunization. For a dose of Tdap given during the month of the pupil's 7th birthday, the record shall also show the specific date (i.e., month, day and year) of immunization.

(c) When such written records are not available, the pupil shall not be admitted and the parent or guardian shall be referred to a physician or nurse for review of his or her immunization history and provision of immunizations as needed.

Note: Authority cited: Sections 120330, 120335 and 131200, Health and Safety Code. Reference: Sections 120325, 120335, 120370 and 120375, Health and Safety Code.

HISTORY

1. Amendment filed 2-3-86; effective thirtieth day thereafter (Register 86, No. 6).

2. Amendment of subsection (b) and Note filed 3-29-96; operative 4-28-96 (Register 96, No. 13).

3. Amendment of section and Note filed 9-24-2002 as an emergency; operative 9-24-2002 (Register 2002, No. 39). A Certificate of Compliance must be transmitted to OAL by 1-22-2003 or emergency language will be repealed by operation of law on the following day.

4. Certificate of Compliance as to 9-24-2002 order transmitted to OAL 1-17-2003 and filed 2-27-2003 (Register 2003, No. 9).

5. Amendment of subsection (b), repealer of subsection (d) and amendment of Note filed 6-30-2011 as an emergency; operative 7-1-2011 (Register 2011, No. 26). A Certificate of Compliance must be transmitted to OAL by 12-28-2011 or emergency language will be repealed by operation of law on the following day.

6. Amendment of subsection (b), repealer of subsection (d) and amendment of Note refiled 12-15-2011 as an emergency; operative 12-28-2011 (Register 2011, No. 50). A Certificate of Compliance must be transmitted to OAL by 3-27-2012 or emergency language will be repealed by operation of law on the following day.

7. Certificate of Compliance as to 12-15-2011 order transmitted to OAL 2-3-2012 and filed 3-15-2012 (Register 2012, No. 11).

This database is current through 3/15/13 Register 2013, No. 11

17 CCR § 6065, 17 CA ADC § 6065

End of Document

Title 17. Public Health

Division 1. State Department of Health Services

Chapter 4. Preventive Medical Service

Subchapter 8. Immunization Against Poliomyelitis, Diphtheria, Pertussis, Tetanus, Measles (Rubeola), Rubella, Haemophilus Influenzae Type B (Hib), Mumps, and Hepatitis B Article 5. Records as Evidence of Immunization (Refs & Annos)

17 CCR § 6070

§ 6070. School/Child Care Facility Immunization Record.

(a) The governing authority of each school, child care center, day nursery, nursery school, family day care home, or development center shall record each pupil's immunizations on the California School Immunization Record, PM 286 (1/02) and is in its entirety, incorporated by reference which, at kindergarten level and above, shall be part of the mandatory permanent pupil record as defined in Section 430 of Title 5, California Code of Regulations.

(b) Each pupil's immunization record shall contain:

(1) Name of pupil.

(2) Birthdate (month, day and year).

(3) Date of unconditional or conditional admission (month, day, and year).

(4) Type of vaccine and date (month, day, and year) each dose was administered. Although month, day and year of vaccine administration should be recorded, a California Immunization Record, PM 286 (01/02), showing only month and year of vaccine dose(s) shall be allowed, except that for records showing measles, rubella, and/or mumps vaccine doses given during the month of the first birthday or Tdap dose given during the month of the 7th birthday, the date of immunization shall also be recorded.

(5) Date and type of exemption, if any.

(c) The immunization record shall be transferred with the mandatory permanent pupil record.

(d) For pupils at kindergarten level and above transferring between school campuses within California or from a school in another state to a school in California, if the mandatory permanent pupil record or other immunization record has not been received at the time of entry to the new school, the governing authority of the school may admit the pupil for a period of up to 30 school days. If the mandatory permanent record or other immunization record has not arrived by the end of this period, the governing authority shall require the parent or guardian to present a written immunization record, as described in Section 6065, documenting that all currently due required immunizations have been received. If such a record is not presented, the

pupil shall be excluded from further attendance until he or she comes into compliance with the immunization requirements, as outlined in Sections 6020, 6035, and 6065.

(e) The governing authority shall see that the immunization record of each pupil admitted conditionally is reviewed every 30 days until that pupil has received all the required immunizations. Any immunizations received subsequent to conditional admission shall be entered in the pupil's immunization record.

(f) For pupils who are being admitted or are advancing into the 7th through 12th grades beginning July 1, 2011, the governing authority shall record each pupil's Tdap dose, given on or after the 7th birthday, on the supplemental sticker form Tdap (Pertussis Booster) Requirement [PM 286 S (01/11)]. This form is hereby incorporated by reference. The governing authority shall affix the PM 286 S (01/11) to the front of the pupil's California School Immunization Record, PM 286 (01/02).

Note: Authority cited: Sections 120330, 120335 and 131200, Health and Safety Code. Reference: Sections 120325, 120335, 120370 and 120375, Health and Safety Code.

HISTORY

1. Amendment filed 2-3-86; effective thirtieth day thereafter (Register 86, No. 6).

2. Amendment of section heading, subsection (a) and Note filed 3-29-96; operative 4-28-96 (Register 96, No. 13).

3. Amendment of section and Note filed 9-24-2002 as an emergency; operative 9-24-2002 (Register 2002, No. 39). A Certificate of Compliance must be transmitted to OAL by 1-22-2003 or emergency language will be repealed by operation of law on the following day.

4. Certificate of Compliance as to 9-24-2002 order transmitted to OAL 1-17-2003 and filed 2-27-2003 (Register 2003, No. 9).

5. Amendment of subsection (b)(4), new subsection (f) and amendment of Note filed 6-30-2011 as an emergency; operative 7-1-2011 (Register 2011, No. 26). A Certificate of Compliance must be transmitted to OAL by 12-28-2011 or emergency language will be repealed by operation of law on the following day.

6. Amendment of subsection (b)(4), new subsection (f) and amendment of Note refiled 12-15-2011 as an emergency; operative 12-28-2011 (Register 2011, No. 50). A Certificate of Compliance must be transmitted to OAL by 3-27-2012 or emergency language will be repealed by operation of law on the following day.

7. Editorial correction of subsection (f) (Register 2012, No. 10).

8. Certificate of Compliance as to 12-15-2011 order transmitted to OAL 2-3-2012 and filed 3-15-2012 (Register 2012, No. 11).

This database is current through 3/15/13 Register 2013, No. 11

17 CCR § 6070, 17 CA ADC § 6070

End of Document

Title 17. Public Health

Division 1. State Department of Health Services

Chapter 4. Preventive Medical Service

Subchapter 8. Immunization Against Poliomyelitis, Diphtheria, Pertussis, Tetanus, Measles (Rubeola), Rubella, Haemophilus Influenzae Type B (Hib), Mumps, and Hepatitis B Article 5. Records as Evidence of Immunization (Refs & Annos)

17 CCR § 6075

§ 6075. Reporting.

(a) The governing authority of each school, child care center, day nursery, nursery school, family day care home, or development center shall file a report with the state and local health departments on the immunization status of new entrants annually or when needed to determine immunization status such as during an epidemic or potential epidemic. The forms to be used for these reports are:

(1) Schools with kindergartens: IMMUNIZATION ASSESSMENT OF KINDERGARTEN STUDENTS -ANNUAL REPORT [PM 236 (3/01)] and this form in its entirety is incorporated by reference.

(2) Schools with seventh grades: PERTUSSIS BOOSTER IMMUNIZATION ASSESSMENT OF SEVENTH GRADE STUDENTS [CDPH 8259 (9/11)]. This form is hereby incorporated by reference.

(3) Child care centers, day nurseries, nursery schools and development centers: ANNUAL IMMUNIZATION REPORT ON CHILDREN ENROLLED IN CHILD CARE CENTERS [DHS 8018 (3/01)] and this form is in its entirety incorporated by reference or ANNUAL IMMUNIZATION ASSESSMENT REPORT OF CHILDREN ENROLLED IN CHILD CARE CENTERS -LINE LISTING [DHS 8387 (3/94)]. The Department of Health Services or the local health department will provide the appropriate reporting form.

(4) Family day care homes: ANNUAL FAMILY DAY CARE HOME IMMUNIZATION SURVEY [DHS 8529 (10/00)] and this form is in its entirety incorporated by reference.

(5) Schools with any grade from the 7th through 12th grade shall report data on Tdap immunization: PERTUSSIS (Tdap) ASSESSMENT OF 7-12th GRADE STUDENTS 2011-2012 SCHOOL SUMMARY SHEET [CDPH 8260 (01/11)]. This form is hereby incorporated by reference.

(b) The annual report shall contain at least the following information on new entrants in kindergarten or lower level classes only:

(1) Enrollment as of date of report.

(2) Number of new entrants admitted unconditionally specifying the number who have received all immunizations, the number who are medically exempt and the number who are exempt for personal beliefs.

(3) Number of new entrants admitted conditionally specifying the number of doses received of poliomyelitis, diphtheria, tetanus, pertussis, measles, rubella, Haemophilus influenza type b (Hib), mumps, hepatitis B, and varicella (chickenpox) vaccines.

(4) Other information requested by the State Department of Health Services.

(c) Additional reports which include new entrants in all grades may be requested during an epidemic or potential epidemic.

Note: Authority cited: Sections 120330 and 120335, Health and Safety Code. Reference: Sections 120325, 120335, 120370 and 120375, Health and Safety Code.

HISTORY

1. Amendment of subsection (b)(3) filed 4-15-80 as an emergency; effective upon filing (Register 80, No. 16). A Certificate of Compliance must be transmitted to OAH within 120 days or emergency language will be repealed on 8-14-80.

2. Certificate of Compliance transmitted to OAL 7-29-80 and filed 8-20-80 (Register 80, No. 34).

3. Amendment of subsection (a), new subsections (a)(1)-(3), and amendment of subsection (b)(3) and Note filed 3-29-96; operative 4-28-96 (Register 96, No. 13).

4. Editorial correction of subsection (b)(3) (Register 97, No. 12).

5. Amendment of subsection (b)(3) and Note filed 5-22-97 as an emergency; operative 5-22-97 (Register 97, No. 21). A Certificate of Compliance must be transmitted to OAL by 9-19-97 or emergency language will be repealed by operation of law on the following day.

6. Editorial correction of Note (Register 97, No. 37).

7. Certificate of Compliance as to 5-22-97 order transmitted to OAL 9-5-97 and filed 9-26-97 (Register 97, No. 39).

8. Amendment of subsection (a)(1), new subsection (a)(2) and subsection renumbering filed 2-18-99 as an emergency; operative 2-18-99 (Register 99, No. 8). A Certificate of Compliance must be transmitted to OAL by 6-18-99 or emergency language will be repealed by operation of law on the following day.

9. Certificate of Compliance as to 2-18-99 order transmitted to OAL 5-26-99 and filed 6-30-99 (Register 99, No. 27).

10. Amendment of subsections (a)(1), (a)(3)-(4) and (b)(3) and amendment of Note filed 9-24-2002 as an emergency; operative 9-24-2002 (Register 2002, No. 39). A Certificate of Compliance must be transmitted to OAL by 1-22-2003 or emergency language will be repealed by operation of law on the following day.

11. Certificate of Compliance as to 9-24-2002 order transmitted to OAL 1-17-2003 and filed 2-27-2003 (Register 2003, No. 9).

12. New subsection (a)(5) filed 6-30-2011 as an emergency; operative 7-1-2011 (Register 2011, No. 26). A Certificate of Compliance must be transmitted to OAL by 12-28-2011 or emergency language will be repealed by operation of law on the following day.

13. New subsection (a)(5) refiled with additional amendment of subsection (a)(2) and Note 12-15-2011 as an emergency; operative 12-28-2011 (Register 2011, No. 50). A Certificate of Compliance must be transmitted to OAL by 3-27-2012 or emergency language will be repealed by operation of law on the following day.

14. Certificate of Compliance as to 12-15-2011 order transmitted to OAL 2-3-2012 and filed 3-15-2012 (Register 2012, No. 11).

This database is current through 3/15/13 Register 2013, No. 11

17 CCR § 6075, 17 CA ADC § 6075

End of Document

- Adopts Sections 3571, 3582, 3590, 3590.1, 3590.2, and 3590.3, and amends Section 3000 in the California Code of Regulations, Title 15, concerning residence restrictions imposed upon, and parole supervision of, sex offenders while on parole.
- Establishes CDCR Form 1650–D (Rev 7/10) Record of Supervision in the regulations. This form has been incorporated by reference into the regulations and a copy has been made available for public review.
- Implements regulations to enforce the paroled sex offender residence restrictions established by "Jessica's Law" which prohibit certain sex offenders from establishing residences within specified distances of schools and parks.
- Makes specific the definitions of terms used in ennabling statutes.
- Defines the responsibilities of parole agents responsible for the supervision of paroled sex offenders.
- Establishes processes for the verification and approval of sex offender residence addresses to ensure compliance with residence restrictions.

TITLE 17. DEPARTMENT OF PUBLIC HEALTH

- ACTION: Notice of Emergency Rulemaking Title 17, California Code of Regulations
- SUBJECT: School Immunization Requirements: Grades 7 through 12:

FY 2011-2012, DPH-10-004E

The California Department of Public Health (Department) has adopted the regulations described in this notice on an emergency basis, and they are now in effect.

PUBLIC PROCEEDINGS

Notice is hereby given that the California Department of Public Health will conduct written public proceedings, during which time any interested person or such person's duly authorized representative may submit statements, arguments, or contentions (all of which are hereinafter referred to as comments) relevant to the action described in this notice.

INFORMATIVE DIGEST/POLICY STATEMENT OVERVIEW

Health and Safety Code (HSC), Section 131200, authorizes the Department to adopt and enforce regulations for the execution of its duties. HSC, Section 120330, authorizes the Department to promulgate regulations, in consultation with the California Department of Education (CDE), to carry out Chapter 1, Educational and Child Care Facility Immunization Requirements (commencing with Section 120325 but excluding Section 120380).

The legislative intent as stated in HSC, Sections 120325 and 120335, is to achieve total immunization of appropriate age groups against specific diseases and any other disease deemed appropriate by the Department, taking into consideration national recommendations. HSC, Sections 120325 through 120375, require pupils to provide proof of certain immunizations in order to attend public and private elementary and secondary schools, child care centers, family day care homes, nursery schools, day nurseries and developmental centers. HSC, Sections 120325(c), 120365, and 120370, allow for medical or personal beliefs exemptions and require that the governing authority report on immunization status of new entrants.

California experienced a pertussis (whooping cough) epidemic in 2010. Childhood immunization against pertussis does not provide lasting immunity needed to control the disease. Pertussis remains widespread in the United States despite high levels of immunization in early childhood. Until 2005, there was no licensed pertussis vaccine for persons age seven years or older. Based on recent survey data, many adolescents and adults have not received a recommended pertussis booster. This pool of susceptible persons is likely a major contributor to the spread of pertussis and prolongation of the epidemic throughout the state. Previously, state law prohibited the requirement of pertussis immunization for children seven years of age or older. Because of the urgency of the epidemic, the Legislature enacted AB 354 (Arambula, Chapter 434, Statutes of 2010) and removed the age restriction, requiring full immunization against pertussis for admission or advancement to the 7th through 12th grades. AB 354 also eliminated the requirement for hepatitis B vaccine for admission or advancement to the 7th grade.

These emergency amendments do the following:

Amend Section 6020, Required Immunizations, for consistency with HSC, Section 120335 to remove the requirement for hepatitis B vaccine for admission or advancement to the 7th grade, and specify the requirement for full immunization against pertussis and the immunizing agent, pertussis vaccine (Tdap), to meet the oneyear requirement for 7th through 12th grades beginning July 1, 2011, through June 30, 2012.

Amend Section 6035, Conditional Admission, to be consistent with HSC, Section 120335 by specifying the requirement for full immunization against pertussis for admission or advancement to the 7th through 12th grades.

CALIFORNIA REGULATORY NOTICE REGISTER 2011, VOLUME NO. 26-Z

Amend Section 6051, Unconditional Admission with Permanent Medical Exemption or Personal Beliefs Exemption, to require a separate PBE for the pertussis booster, and incorporate by reference the optional form to document personal beliefs exemption (PBE) for Tdap, Personal Beliefs Exemption [CDPH 8261 (03/11)] and to reformat into two subparagraphs to delineate between medical and personal beliefs exemptions.

Amend Section 6065, Documentary Proof, to require documentary proof of immunization for the one-year pertussis immunization requirement and to delete an obsolete immunization requirement.

Amend Section 6070, School/Child Care Facility Immunization Record, to add a recording requirement for Tdap dose given during the month of the 7th birthday and to incorporate by reference the form Tdap (Pertussis Booster) Requirement [PM 286 S (01/11)], for the governing authority to record the pertussis immunization.

Amend Section 6075, Reporting, to incorporate by reference the form Pertussis (Tdap) Assessment of 7–12th Grade Students [(CDPH 8260 (01/11)] for the governing authority to report pertussis immunization status for 7th through 12th grades, for the year beginning July 1, 2011 through June 30, 2012.

This emergency action amends CCR, Title 17, Sections 6020, 6035, 6051, 6065, 6070, and 6075 to remove a requirement for the hepatitis B vaccine, define the term Tdap, define age and dose requirements for school–age children receiving the pertussis vaccine, and specify the manner by which schools shall record and report pertussis immunization status. The following newly adopted forms are incorporated by reference:

- Tdap (Pertussis Booster) Requirement (PM 286 S, 01/11)
- Personal Beliefs Exemption (CDPH 8261, 03/11)
- Pertussis (Tdap) Assessment of 7–12th Grade Students (CDPH 8260,01/11)

AUTHORITY

Sections 120330, 120335, and 131200, Health and Safety Code.

REFERENCE

Sections 120325, 120335, 120370, and 120375, Health and Safety Code.

COMMENTS

Any written comments pertaining to these regulations, regardless of the method of transmittal, must be received by the Office of Regulations by 5 p.m. on August 15, 2011, which is hereby designated as the close of the written comment period. Comments received after this date will not be considered timely. Persons wishing to use the California Relay Service may do so at no cost by dialing 711.

Written comments may be submitted as follows:

- 1. By email to <u>regulations@cdph.ca.gov</u>. It is requested that email transmission of comments, particularly those with attachments, contain the regulation package identifier "DPH -10-004E" in the subject line to facilitate timely identification and review of the comment; or
- 2. By fax transmission: (916) 440–5747; or
- By mail to: Office of Regulations, California Department of Public Health, MS 0507, P.O. Box 997377, Sacramento, CA 95899–7377; or hand-delivered to: 1616 Capitol Avenue, Sacramento, CA, 95814. It is requested, but not required, that written comments sent by mail or hand-delivered be submitted in triplicate.

All comments, including email or fax transmissions, should include the author's name and U.S. Postal Service mailing address in order for the Department to provide copies of any notice for proposed changes to the regulation text on which additional comments may be solicited.

INQUIRIES

Inquiries regarding the substance of the proposed regulations described in this notice may be directed to Alana McKinzie of the Center for Infectious Diseases, at (916) 449–5197.

All other inquiries concerning the action described in this notice may be directed to Miko Sawamura, Office of Regulations, at (916) 440–7733, or to the designated backup contact person, Coleen Keelan, at (916) 440–7439.

CONTACTS

In any inquiries or written comments, please identify the action by using the Department regulation package identifier, DPH-10-004E.

AVAILABILITY OF STATEMENT OF REASONS AND TEXT OF REGULATIONS

The Department has prepared and has available for public review an initial statement of reasons for the proposed regulations, all the information upon which the proposed regulations are based, and the text of the proposed regulations. The Office of Regulations, at the address previously noted, will be the location of public records, including reports, documentation, and other material related to the proposed regulations (rulemaking file). In addition, a copy of the final statement of reasons (when prepared) will be available upon request from the Office of Regulations.

Materials regarding the action described in this notice (including this public notice, the regulation text, and the initial statement of reasons) that are available via the Internet may be accessed at <u>www.cdph.ca.gov</u> by clicking on these links, in the following order: Decisions Pending and Opportunity for Public Participation, Regulations, Proposed.

In order to request that a copy of this public notice, the regulation text, and the initial statement of reasons or alternate formats for these documents be mailed to you, please call (916) 440–7439 (or the California Relay Service at 711), send an email to regulations@ cdph.ca.gov, or write to the Office of Regulations at the address previously noted. Upon specific request, these documents will be made available in Braille, large print, audiocassette, or computer disk.

AVAILABILITY OF CHANGED OR MODIFIED TEXT

The full text of any regulation which is changed or modified from the express terms of the proposed action will be made available by the Department's Office of Regulations at least 15 days prior to the date on which the Department adopts, amends, or repeals the resulting regulation.

FISCAL IMPACT ESTIMATE

A. Fiscal Effect on Local Government:

Monies allocated annually from federal 317 funding to purchase vaccines for the local health departments have been redirected from non–urgent vaccines to cover the additional vaccines as mandated.

Local health departments that immunize low-income children, who are not enrolled in Medi-Cal or Child Health and Disability Prevention programs, will not receive compensation for administering the vaccine similar to their subsidized counterparts. Depending on the actual number of children immunized per local health department, the maximum state-wide impact is estimated to be \$765,000.

B. Fiscal Effect on State Government:

Department of Health Care Services and the Managed Risk Medical Insurance Board

The one-year vaccine requirement expenditures will be incurred in fiscal year (FY) 2011–12. It is anticipated that in FY 2011–12, Medi–Cal and Healthy Families costs will total \$4,909,500 (General Fund \$1,826,325; Federal Fund \$3,083,175).

California Department of Education Costs

The estimated FY 2011–12 costs for the CDE associated with the implementation of this immunization requirement is \$27,200 (.2 FTE school nurse consultant at \$26,700; 8 hours analyst time at \$500), these costs will be absorbed by CDE.

State Controller's Office Costs

In the past, public school districts have claimed funds from the State Controller's Office for implementing the immunization requirements for each pupil entering a California school for the first time or being assessed at a newly–required periodic review date. This proposed regulation change to require pertussis immunization for pupils being admitted or advanced to the 7th through 12th grades may be submitted by public schools for mandated cost reimbursement by the State Controller's Office.

C. Fiscal Effect on Federal Funding of State Programs:

The one-year vaccine requirement expenditures will be incurred in FY 2011–12. It is estimated that in FY 2011–12, Medi–Cal and Healthy Families federal costs will total \$3,083,175 and federal 317 grant costs will total \$1,212,950 for total federal funding expenditures of \$4,296,125. Funding for the Vaccines for Children (VFC) program is provided by the federal government and distribution to providers is managed by the state. The VFC program is an entitlement program and funding is not driven by a specific item in the federal budget but rather provider orders and vaccine need.

D. All cost impacts, known to the Department at the time the notice of proposed action was submitted to the Office of Administrative Law, that a representative private person or business would necessarily incur in reasonable compliance with the proposed action:

Private Persons: The cost for private pay individuals is estimated to be \$37.55 for the cost of the vaccine, plus a manufacturer's mark-up and the \$9.00 administration fee per injection. The number of children in this category is unknown, but the Department considers this population to be negligible. Some children with private insurance, entering or advancing into 7th through 12th grades will not have had the required pertussis immunization. There are approximately 1,000,000 unimmunized children in 7th through 12th grades. Of this population, it is estimated that 57% are covered by private insurance and may incur an estimated \$15 co-pay for the office visit for their vaccination, others may have no costs. Thus, the total cost to all persons with third party or private insurance, as a whole, is estimated to be no more than \$8,550,000.

Small Businesses: Private schools are prohibited from submitting requests for reimbursement of state mandated costs; however, they will need to assess their students' records for receipt of the additional required pertussis dose. It is estimated that there are approximately 228,833 private school students in the 7th through 12th grades. The cost to assess each student record is approximately \$1/pupil. Therefore, the maximum total impact to private schools, as a whole, is estimated to be \$228,833.

E. Other Nondiscretionary Cost or Savings Imposed on Local Agencies: None.

DETERMINATIONS

The Department has determined that the regulations would impose a mandate on local agencies or school districts. There may be costs for which reimbursement is required by Part 7 (commencing with Section 17500) of Division 4 of the Government Code. These regulations do impose a mandate on schools. If the Commission on State Mandates determines that this is a reimbursable state—mandated cost, the schools may be reimbursed for up to \$1 per pupil record assessed.

The Department has made an initial determination that the regulations would not have a significant statewide adverse economic impact directly affecting business, including the ability of California businesses to compete with businesses in other states.

The Department has determined that the regulations would not significantly affect the following:

- (1) The creation or elimination of jobs within the State of California.
- (2) The creation of new businesses or the elimination of existing businesses within the State of California.
- (3) The expansion of businesses currently doing business within the State of California.

The Department has determined that the regulations would affect small business.

The Department has determined that the regulations will have no impact on housing costs.

The proposed emergency regulation imposes a reporting requirement for schools with 7th through 12th grades to provide data on pertussis immunization to the California Department of Public Health. The Department finds that it is necessary for the protection of the health, safety, or welfare of the people of the State of California that the regulation applies to businesses.

ADDITIONAL STATEMENTS AND COMMENTS

In accordance with Government Code Section 11346.5(a)(13), the Department must determine that no

reasonable alternative considered by the Department or that has otherwise been identified and brought to the attention of the Department would be more effective in carrying out the purpose for which the action is proposed or would be as effective and less burdensome to affected private persons than the proposed action.

No hearing has been scheduled; however any interested person or his or her duly authorized representative may request in writing, no later than 15 days prior to the close of the written comment period, a public hearing pursuant to Government Code Section 11346.8. For individuals with disabilities, should a public hearing be scheduled, the Department will provide assistive services such as sign–language interpretation, real–time captioning, note takers, reading or writing assistance, and conversion of written public hearing materials into Braille, large print, audiocassette, or computer disk. Note: The range of assistive services available may be limited if requests are received less than ten business days prior to a public hearing.

To request such services or copies of materials in an alternate format, please write to Coleen Keelan, Office of Regulations, MS 0507, P.O. Box 997377, Sacramento, CA 95899–7377, or call (916) 440–7439, or use the California Relay Service by dialing 711.

GENERAL PUBLIC INTEREST

TITLE 2. DEPARTMENT OF FAIR EMPLOYMENT AND HOUSING

NOTICE IS HEREBY GIVEN that the prospective contractors listed below have been required to submit a Nondiscrimination Program (NDP) or a California Employer Identification Report (CEIR) to the Department of Fair Employment and Housing, in accordance with the provisions of Government Code Section 12990. No such program or CEIR has been submitted and the prospective contractors are ineligible to enter into State contracts. The prospective contractor's signature on Standard Form 17A, 17B, or 19, therefore, does not constitute a valid self-certification. Until further notice, each of these prospective contractors in order to submit a responsive bid must present evidence that its Nondiscrimination Program has been certified by the Department.

ASIX Communications, Inc. DBA ASI Telesystems, Inc. 21150 Califa Street Woodland Hills, CA 91367

Bay Recycling 800 77th Avenue Oakland, CA 94621