

ILLINOIS REGISTER

DEPARTMENT OF PUBLIC HEALTH

DRAFT NOTICE OF PROPOSED AMENDMENT 9.23.15

- 1) Heading of the Part: College Immunization Code
- 2) Code Citation: 77 Ill. Adm. Code 694
- 3)

<u>Section Number:</u>	<u>Proposed Action:</u>
694.10	Repeal
694.20	Amendment
694.30	New Section
694.100	Amendment
694.110	Amendment
694.200	Amendment
694.APPENDIX C	Amendment
- 4) Statutory Authority: College Student Immunization Act [110 ILCS 20].
- 5) A Complete Description of the Subjects and Issues Involved: This rulemaking proposes changes to the vaccination requirements for incoming college students at Illinois higher education institutions. Specifically, the rulemakings seeks to add a vaccination requirement for meningococcal disease (one dose of meningococcal vaccine on or after 16th birthday) and for pertussis (students must have received at least one dose of Tdap within previous 10 years) and will require college students to show proof of receipt of two doses of rubella, mumps-containing vaccines. The vaccination requirements will take effect beginning with the 2016-17 Fall term. The proposed amendments seek to align Illinois college vaccination requirements with current accepted clinical practices as recommended by the Centers for Disease Control and Prevention’s Advisory Committee on Immunization Practices (ACIP), the American Academy of Pediatrics (AAP) and the Academy of Family Physicians (AFP).

The economic effect on this proposed rulemaking is unknown. Therefore, the Department requests any information that would assist in calculating this effect. However, all vaccines are readily available through the federal Vaccines for Children (VFC) program administered by the Department.

The Department anticipates adoption of this rulemaking approximately three months after publication of the Notice in the *Illinois Register*.

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- 6) Published studies or reports, and sources of underlying data used to compose this rulemaking: CDC. Updated Recommendations of the Advisory Committee on Immunization Practices (ACIP) for the Control and Elimination of Mumps; MMWR 2006; 55 (No. 22)
- CDC. Vaccine Use and Strategies for Elimination of Measles, Rubella, and Congenital Rubella Syndrome and Control of Mumps: Recommendations of the Advisory Committee on Immunization Practices (ACIP); MMWR 1998; 47 (No. RR-8)
- CDC. Prevention and Control of Meningococcal Disease: Recommendations of the Advisory Committee on Immunization Practices (ACIP); MMWR 2005; 54 (No. RR-7);
- CDC. Licensure of a Meningococcal Conjugate Vaccine for Children Aged 2 Through 10 Years and Updated Booster Dose Guidance for Adolescents and Other Persons at Increased Risk for Meningococcal Disease - Advisory Committee on Immunization Practices (ACIP); MMWR 2011; 60:1018-1019
- CDC. Update Recommendations for use of meningococcal conjugate vaccines – Advisory Committee on Immunization Practices (ACIP); MMWR 2011;60:72-76
- CDC. Prevention and Control of Meningococcal Disease: Recommendations of the Advisory Committee on Immunization Practices (ACIP); MMWR 2013; 62 (No. RR-2)
- 7) Will this rulemaking replace any emergency rulemaking currently in effect? No
- 8) Does this rulemaking contain an automatic repeal date? No
- 9) Does this rulemaking contain incorporations by reference? No
- 10) Are there any other proposed rulemakings pending on this Part? No
- 11) Statement of Statewide Policy Objectives: This rulemaking does not create or expand any state mandates on units of local government.
- 12) Time, Place and Manner in which interested persons may comment on this proposed rulemaking:

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Interested persons may present their comments concerning this rulemaking within 45 days after the publication of this issue of the *Illinois Register* to:

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13) Initial Regulatory Flexibility Analysis:

A) Types of small businesses, small municipalities and not for profit corporations affected:

These immunization rules will not have a direct impact on these stated entities. An indirect impact could occur to employer-provided health care coverage for the requirement for additional vaccination protection for students attending college. However, the Department sponsors a Vaccines For Children (VFC) program, which addresses vaccination needs for under-insured children through age 18 years and a Vaccines For Adults (VFA) program for adults to address the needs of under-insured and uninsured adults.

B) Reporting, bookkeeping or other procedures required for compliance:

Health care providers administering vaccinations are expected to record the following information as documentation for any vaccination provided: the type of vaccine, date administered, vaccine manufacturer, vaccine lot number and the date of the Vaccine Information Statement provided to the patient at the time of the vaccination.

Colleges and universities with on-campus student housing are required to monitor compliance with immunization requirements as noted in the College Student Immunization. The proposed amendments revise language to assure consistency with current medical practice, national vaccination scheduling recommendations and alignment with statutory requirements created by P.A. 86-1324 and 85-1315.

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- C) Types of professional skills necessary for compliance:
Only licensed medical professionals can administer vaccinations.

- 14) Regulatory Agenda on which this rulemaking was summarized: July 2015

The full text of the Proposed Amendments begins on the next page: