

Impact of Eliminating Non-Medical Exemptions in California

Michelle Mello, JD, PhD



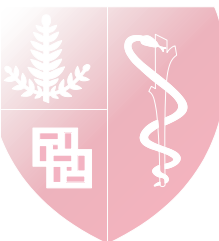
Stanford
MEDICINE

Department of Medicine
*Center for Health Policy/
Primary Care and Outcomes Research*

Stanford Law School

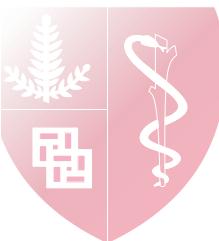
Recent California vaccination laws

Bill	Effective Date	Exemption Provisions
AB2109	1 January 2014	Requires parents filing personal belief exemptions to submit to the state DPH a health care provider's attestation that the <u>parent was counseled</u> about the risks and benefits of the applicable immunizations and communicable diseases



Recent California vaccination laws

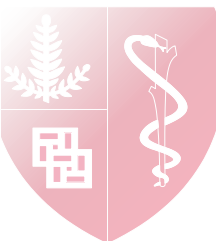
Bill	Effective Date	Exemption Provisions
SB277	1 July 2016	<p><u>Eliminates personal belief exemptions</u> (both philosophical and religious)</p> <p>Applies to students in public and private elementary and secondary schools, day care centers, and development centers, but not students in home-based private schools or independent-study programs who do not receive classroom-based instruction or students with individualized education programs who would be barred from accessing related services</p> <p><u>Permits children with personal belief exemptions filed by 1 January 2016 (within 6 months of the law's passage) to continue in school until the next "grade span" begins</u> (e.g., kindergarteners may continue until seventh grade)</p> <p><u>Permits medical exemptions to be obtained by submitting a statement from any licensed physician on the basis of any medical circumstances</u> relating to the child that suggest immunization may not be safe, including "family medical history"</p>





Recent California vaccination laws

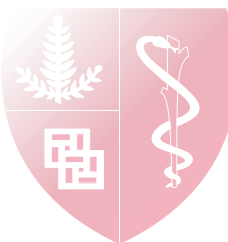
Bill	Effective Date	Exemption Provisions
SB276	1 January 2021	<p>Requires physicians to submit medical exemptions to the state DPH's immunization registry on a standard form</p> <p>Requires the submitting physician to certify under penalty of perjury that statements in the form are true and that she or he has <u>physically examined the child</u></p> <p>Requires that if the submitting physician is not the child's primary care physician, the submitting <u>physician must state how long she or he has been treating the child, identify the primary care physician, and explain why the primary care physician is not making the submission</u></p> <p>Requires children with preexisting medical exemptions to follow the new procedures in order to maintain their exemption</p> <p>Requires DPH to annually review exemption requests to identify schools with immunization rates <95% and <u>physicians who submitted >4 exemptions in a year</u> and to review all exemption forms identified through this process</p> <p>Authorizes DPH to revoke exemptions that are deemed inappropriate because they do not meet CDC, ACIP, or AAP exemption criteria, and grants parents the right to appeal such decisions</p> <p><u>Requires DPH to report physicians</u> whose exemption-related practice "is contributing to a public health risk in one or more communities" to the state medical board</p>

AAP = American Academy of Pediatrics; AB = Assembly Bill; ACIP = Advisory Committee on Immunization Practices; CDC = Centers for Disease Control and Prevention; DPH = Department of Public Health; SB = Senate Bill.



Impact of CA laws on vaccination rates

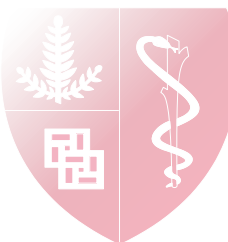
- Up-to-date percentage of kindergarteners: 92.8%  **95.1%** in 2 years
- Rates of medical exemptions: increased **fourfold** by 2019
 - Concentrated in small number of physicians
 - Concerns about validity
- Any-exemption rate (projected): 2.59%  **1.41%** by 2027



4 key conclusions from studies of state vaccination exemption laws

1. States without nonmedical exemptions have lower rates of vaccination exemptions and vaccine-preventable diseases.¹
2. The ease of obtaining exemptions is associated with exemption rates and disease outbreak risk.¹
3. Small reductions in exemption rates can pack a punch.
4. If the law leaves avenues for avoiding vaccination open, parents opposed to vaccines will find a way to take them.

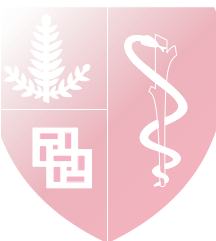
¹ Source: Wang et al., *Am. J. Pub. Health* 2014 (systematic review)



Limitations of CA laws

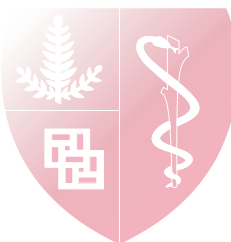
SB277	1 July 2016	<p>Eliminates personal belief exemptions (both philosophical and religious)</p> <p>Applies to students in public and private elementary and secondary schools, day care centers, and development centers, but not students in home-based private schools or independent-study programs who do not receive classroom-based instruction or students with individualized education programs who would be barred from accessing related services</p> <p><u>Permits children with personal belief exemptions filed by 1 January 2016 (within 6 months of the law's passage) to continue in school until the next "grade span" begins (e.g., kindergarteners may continue until seventh grade)</u></p> <p><u>Permits medical exemptions to be obtained by submitting a statement from any licensed physician on the basis of any medical circumstances relating to the child that suggest immunization may not be safe, including "family medical history"</u></p>
SB276	1 January 2021	<p>Requires physicians to submit medical exemptions to the state DPH's immunization registry on a standard form</p> <p>Requires the submitting physician to certify under penalty of perjury that statements in the form are true and that she or he has <u>physically examined the child</u></p> <p><u>Requires that if the submitting physician is not the child's primary care physician, the submitting physician must state how long she or he has been treating the child, identify the primary care physician, and explain why the primary care physician is not making the submission</u></p> <p>Requires children with preexisting medical exemptions to follow the new procedures in order to maintain their exemption</p> <p><u>Requires DPH to annually review exemption requests to identify schools with immunization rates <95% and physicians who submitted >4 exemptions in a year and to review all exemption forms identified through this process</u></p> <p>Authorizes DPH to revoke exemptions that are deemed inappropriate because they do not meet CDC, ACIP, or AAP exemption criteria, and grants parents the right to appeal such decisions</p> <p><u>Requires DPH to report physicians whose exemption-related practice "is contributing to a public health risk in one or more communities" to the state medical board</u></p>

AAP = American Academy of Pediatrics; AB = Assembly Bill; ACIP = Advisory Committee on Immunization Practices; CDC = Centers for Disease Control and Prevention; DPH = Department of Public Health; SB = Senate Bill.



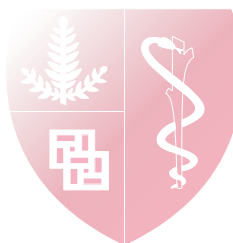
Lessons for other states

- Tightening exemptions is worth doing—but the devil is in the details.
- Expect anti-vax groups to mobilize the help parents get around new requirements.
- Get it right the first time.



Recommendations from California's experience

- Eliminate nonmedical exemptions
- Create evenhanded rules for public and private schools and daycares
- Set forth a specific but expansive list of required immunizations
- Make annual data on school-level exemption rates public



Recommendations from California's experience

- Require that medical exemptions come from a pediatrician or family physician the child sees for regular care.
- Limit the bases for medical exemptions to valid, recognized contraindications.
- Provide for DOH review of medical exemptions and action against physician “frequent flyers.”
- Task DOH, not schools, with reviewing exemptions.
- Avoid grandfather clauses.

