

COLORADO NONMEDICAL EXEMPTIONS WENT DOWN FROM 2011 TO 2012

TABLE 1. Estimated vaccination coverage among children enrolled in kindergarten, by state/area, type of survey conducted, and selected vaccines — United States, 2012–13 school year

State/Area	Estimated kindergarten population	Total surveyed	Proportion surveyed (%)	Type of survey conducted	MMR (%)	DTaP/DT, (%)	Varicella
Colorado	70,657	350	(0.5)	Simple random	(85.7)	(82.9)	(84.6)

TABLE 2. Weighted number and percentage of children enrolled in kindergarten with a reported exemption to vaccination, by state/area and type of exemption — United States, 2012–13 school year

State/Area	Medical exemptions		Nonmedical exemptions			Total exemptions			Percentage point difference
	No.	(%)	Religious no.	Philosophic no.	Total no.	(%)	Total no.	(%)	
Colorado	191	(0.3)	0	2,678	2,678	(4.0)	2,869	(4.3)	-1.3

Colorado was one of four states that reported decreases of >1.0 percentage points in nonmedical exemptions from 2011 to 2012 (range: -1.3 in Colorado to -1.6 in New Mexico). <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6230a3.htm>

2012 Colorado and US Immunization Coverage Levels for children 19 – 35 months old.

	3+D Tap	4+D Tap	3+P olio	1+M MR	Hib- FS	Hib- FS	3+H epB	Hep B Birt h	1+V ar	3+P CV	4+P CV	1+ Hep A	2+H epA	Rota virus 1	4:3:1	4:3:1:3	4:3:1:3:3	4:3:1:3:3:1	4:3:1:3:3:1:4
US	94.3 ±0.7	82.5 ±1.2	92.8 ±0.7	90.8 ±0.8	93.3 ±0.7	80.9 ±1.2	89.7 ±0.9	71.6 ±1.4	90.2 ±0.8	92.3 ±0.8	81.9 ±1.1	81.5 ±1.1	53.0 ±1.5	68.6 ±1.4	80.5 ±1.2	76.0 ±1.3	73.2 ±1.3	71.9 ±1.4	68.4 ±1.4
CO	94.2 ±3.6	82.8 ±6.7	92.2 ±4.1	91.5 ±4.5	93.1 ±3.9	86.7 ±5.6	90.5 ±4.5	64.0 ±8.4	89.6 ±4.8	92.3 ±4.6	84.9 ±6.2	85.3 ±5.7	56.2 ±8.6	73.5 ±7.7	80.2 ±7.0	76.5 ±7.5	75.9 ±7.5	73.8 ±7.8	71.7 ±7.9

4:3:1 - 4 or more doses of DTaP, 3 or more doses of poliovirus vaccine, and 1 or more doses of any MMR vaccine.

4:3:1:3 - 4 or more doses of DTaP, 3 or more doses of poliovirus vaccine, 1 or more doses of any MMR vaccine plus the full series Hib.

4:3:1:3:3 - 4 or more doses of DTaP, 3 or more doses of poliovirus vaccine, 1 or more doses of any MMR vaccine, full series of Hib vaccine and 3 or more doses of HeppB vaccine.

4:3:1:3:3:1 - 4 or more doses of DTaP, 3 or more doses of poliovirus vaccine, 1 or more doses of any MMR vaccine, full series of Hib vaccine, 3 or more doses of HeppB vaccine, and 1 or more doses of varicella vaccine.

4:3:1:3:3:1:4 - 4 or more doses of DTaP, 3 or more doses of poliovirus vaccine, 1 or more doses of any MMR vaccine, full series Hib vaccine, 3 or more doses of HeppB, 1 or more doses of varicella vaccine, and 4 or more doses of PCV.

Source - http://www.cdc.gov/vaccines/stats-surv/nis/tables/12/tab03_antigen_state_2012.pdf - Estimated Vaccination Coverage with Individual Vaccines and Selected Vaccination Series Among Children 19-35 Months of Age by State US, National Immunization Survey Q1/2012-Q4/2012

Difference in Estimated Vaccination Coverage with Individual Vaccines and Selected Vaccination Series Among Children 19-35 Months of Age - National Immunization Survey over a one year time period from Q1/2011-Q4/2011 to Q1/2012 – Q4/2012.

Individual Vaccine or Series	National	Colorado	Washington State
3 DTaP	-1.2±0.9	3.0±6.2	0.6±6.4
4 DTaP	-2.1±1.6	1.8±10.2	-1.5±7.6
3 Polio	-1.1±0.9	2.4±6.6	-0.8±6.7
1 MMR	-0.8±1.1	3.1±7.0	-4.5±7.3
Hib, Full Series	-0.9±0.9	10.2±10.0	3.5±8.7
3 Hepatitis B	-1.4±1.1	2.5±6.9	0.2±7.4
1 Varicella (Chickenpox)	-0.6±1.1	1.0±7.2	-3.3±7.5
3 pneumococcal conjugate vaccine (PCV)	-1.3±1.0	5.0±8.1	0.2±6.6
4 pneumococcal conjugate vaccine (PCV)	-2.5±1.5	6.2±9.9	-5.3±8.2
4:3:1	-2.1±1.6	1.5±10.4	-2.9±9.7
4:3:1:3	0.6±1.8	4.0±11.2	0.6±9.6
4:3:1:3:3	0.6±1.8	4.6±11.2	-0.8±9.5
4:3:1:3:3:1	0.9±1.8	3.0±11.4	0.2±9.3
4:3:1:3:3:1:4	-0.1±1.9	6.0±11.8	-3.6±8.4

DTaP – diphtheria, tetanus and acellular pertussis vaccine.

MMR – Measles, Mumps and Rubella.

4:3:1 Series - 4 or more doses of DTaP, 3 or more doses of poliovirus vaccine, and 1 or more doses of any MMR vaccine.

4:3:1:3 Series - 4 or more doses of DTaP, 3 or more doses of poliovirus vaccine, and 1 or more doses of any MMR vaccine and the full series Hib.

4:3:1:3:3 Series - 4 or more doses of DTaP, 3 or more doses of poliovirus vaccine, and 1 or more doses of any MMR vaccine, full series Hib and 3 hepatitis B.

4:3:1:3:3:1 Series - 4 or more doses of DTaP, 3 or more doses of poliovirus vaccine, 1 or more doses of any MMR vaccine, full series Hib, 3 hepatitis B and 1 varicella.

4:3:1:3:3:1:4 Series - 4 or more doses of DTaP, 3 or more doses of poliovirus vaccine, 1 or more doses of any MMR vaccine, full series Hib, 3 hepatitis B, 1 varicella and 4 or more does of PCV.

http://www.cdc.gov/vaccines/stats-surv/nis/tables/12/diff_2012_2011.pdf

The aggregate kindergarten data were summed in Microsoft® Excel⁶ and compared to the results obtained from the audit of the school records.

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RESULTS

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Documentation of vaccination status

The majority of the kindergarteners in the sample (62.7%, or 1,531) had approved certificates of immunization in their school records; 35.0% (713) had an unapproved document on file, and a small percentage had no immunization document in their school record (2.3%, or 42). Although an approved document of immunization is required according to the Rules of the Colorado Board of Health, the percentage of children with an approved document on file varied across regions from a low of 36.6% in the Northeast region to 98.7% in the Western Slope region.

Coverage

Vaccination coverage estimates are shown in Table 1. About 76.3% (n=1,776; 95% confidence interval [CI] 73.8, 78.8) of Colorado's kindergarteners received the required vaccines as indicated by school records. In contrast, the series coverage estimated from school self-reports for the same time frame was 89.4% (n=46,559). The series coverage based on school self-reports of 89.4% is 10 percentage points higher than the upper 95% CI based on the audits. The audit found that coverage on the individual vaccines ranged from 85.1% for MMR to 92.2% for varicella. No significant difference was observed in UTD status by month of data collection (p>0.05).

Table 1

Vaccination coverage in Colorado kindergarteners for the 2004–2005 school year

Reasons for non-UTD status

Overall, 6.1% of the kindergarteners took some kind of exemption. A small percentage (2.8%) took exemptions for all vaccines (0.2% medical, 0.2% religious, and 2.4% personal) (Table 2). An additional 3.3% of kindergarteners took exemptions for at least one vaccine in the series but not all vaccines. Kindergarteners who were in the process of becoming UTD accounted for another 0.2%. For 17.4% of kindergarteners, there was no recorded reason for being not UTD. Of these, about 1.3% of kindergarteners were categorized as not UTD because there were no records in the school file. For the remaining children who were not UTD (16.1%) and did have records in their school file, no explanation for their status was apparent. Those children had not taken an exemption nor were they in the process of becoming UTD.

Table 2

UTD status and reasons not UTD

Factors associated with vaccination status

No association was detected between UTD status and a child's gender, race, or ethnicity. However, there was an association between country of birth and vaccination status in two of the five regions. In the Northeast, 77.5% (334 of 431) of the children born in the U.S. were UTD, compared to 59.6% (31 of 52) who were born out of the country ($\chi^2=8.03, p<0.01$). In the Western Slope region, 82.2% (194 of 236) of children born in the U.S. were UTD, while only 72% (121 of 168) of the non-U.S.-born children were UTD ($\chi^2=5.92, p=0.02$).

The composition of the school personnel who monitor immunization records was also significantly related to UTD status for the same two regions. Children in these regions were more likely to be UTD if they attended a

COLORADO LAW REQUIRES THAT THIS FORM BE COMPLETED FOR EACH STUDENT ATTENDING COLORADO SCHOOLS

Name _____ Date of Birth _____

Parent/Guardian _____

COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT—CERTIFICATE OF IMMUNIZATION

Vaccine		Enter the month, day and year each immunization was given					
Hep B	Hepatitis B						
DTaP	Diphtheria, Tetanus, Pertussis (pediatric)						
DT	Diphtheria, Tetanus (pediatric)						
Tdap	Tetanus, Diphtheria, Pertussis						
Td	Tetanus, Diphtheria						
Hib	<i>Haemophilus influenzae</i> type b						
IPV/OPV	Polio						
PCV	Pneumococcal Conjugate						
MMR	Measles, Mumps, Rubella						
Measles	Measles						
Mumps	Mumps						
Rubella	Rubella						
Varicella	Chickenpox					Healthcare Provider Documentation Date	Lab Verification Date
Vaccines recorded below this line are recommended. Recording of dates is encouraged.							
HPV	Human Papillomavirus						
Rota	Rotavirus						
MCV4/MPSV4	Meningococcal						
Hep A	Hepatitis A						
TIV/LAIV	Influenza						
Other							

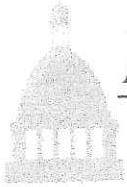
THIS SECTION CAN BE COMPLETED BY CHILD CARE/SCHOOL/HEALTH CARE PROVIDER

- A) Child Care Up to Date**
Up to date through 6 months of age for Colorado School Immunization Requirements
Update Signature _____ Date _____
- B) Child Care Up to Date**
Up to date through 18 months of age for Colorado School Immunization Requirements
Update Signature _____ Date _____
- C) Child Care/Pre-school/Pre-K***
Up to date for Child Care/Pre-School/Pre-K for Colorado School Immunization Requirements
Update Signature _____ Date _____
- D) Complete for K-5th Grade**
Up to date for K-5th Grade for Colorado School Immunization Requirements
Update Signature _____ Date _____

* If age 4 years and fulfills Requirements for Pre-School & Kindergarten, check BOTH Boxes C and D.

HAS MET ALL IMMUNIZATION REQUIREMENTS FOR COLORADO SCHOOLS (6TH GRADE OR HIGHER)

Signed _____ Title _____ Date _____
(Physician, nurse, or school health authority)



MEMO

To: Lydia McCoy, Colorado Children's Immunization Coalition
From: Aponte & Busam Public Affairs
Date: June 3, 2010
Re: Summary of 2010 Legislative Session

Lydia,

Once again it was our pleasure to represent the Colorado Children's Immunization Coalition at the State Capitol during the 2010 legislative session. 2010 was a unique year as we played defense on several bills that could have had potentially harmful effects on the progress we have made in recent years. However, we were able to stave off any threatening language, and have an additional opportunity for parental education regarding the importance of vaccinations. All in all, 2010 was a successful year as the state Immunization programs avoided substantial budget cuts, in light of the nearly \$2B deficit that lawmakers worked to fill.

Below, you'll find a recap of the Coalition's legislation of interest as well as a general overview of Colorado's political climate and a look forward to the November election and the 2011 session. We'll look forward to working with you over the interim to put together a long term strategic plan for the Coalition's public policy goals.

2010 Issues of Importance: Legislative Highlights

SB 56: Immunization Information for School Children

Brought forth by the Sanofi Pasteur, the manufacturer of the meningitis vaccine, SB 56 was a relatively simple bill that requires the Department of Public Health and Environment to add recommended vaccines to a letter furnished to the Department of Education and distributed to parents at the beginning of the school year. CCIC was actively engaged in the pre-session negotiation with the sponsor (Sen. Betty Boyd) and other stakeholders, and given the introduced language took a passive support position, as it was deemed that bill would eventually increase education about the importance of immunizations. However, during the process the bill was amended with language which requires the letter to cite the statutory reference allowing parents to opt-out of vaccinations. While the Coalition was opposed to any language that may promote a parent's ability to opt-out, we supported the addition of recommended vaccines to the letter and increasing parents awareness of their options. The bill ultimately passed both chambers and was signed into law by the Governor on March 29, 2010. Moving forward, the Coalition will have the opportunity to work with CDPHE to craft the specific wording of the letter prior to its distribution to CDE.



Colorado Department
of Public Health
and Environment

Child Care Immunization Chart - 2013-14 SY

Immunization Chart for *Required* vaccines (Child Care, Preschool & K-Entry)

- This chart is a **guide** for childcare providers or parents to determine which vaccines children are required to have in order to be in compliance with state immunization **requirements**. This also insures that children are protected against vaccine preventable diseases. Select the appropriate age range for the child from the left hand column. The number of required doses are located in each of the columns and vaccines are listed across the top of the page. Review the child's immunization record with this chart to make sure they have at least the number of doses required. (Please keep in mind that this document provides the dosing schedule for "required" vaccines. Most health care providers will start the "recommended" schedule at 2 months of age).
- If the child does not have the minimum number of doses, the parent is to be directly notified (in person, by phone, or by mail) that their child does not have the **required** minimum number of vaccine doses. Within 14 days of direct notification, the parent is to obtain the required vaccine(s) or makes a plan to do so providing written documentation of that plan. (Colorado law has allowances for medical exemption (to be signed by a health care provider), as well as religious or personal exemption (to be signed by parent or guardian). These signed exemptions are to be kept in the child's file.

Age of Child	# of required doses DT, DTP, or DTaP Diphtheria, Tetanus Pertussis	# of required doses Polio <i>Polio</i>	# of required doses MMR Measles Mumps Rubella	# of required doses Hib <i>Haemophilus influenzae type b</i>	# of required doses Hep B <i>Hepatitis B</i>	# of required doses Varicella <i>Chickenpox</i>	# of required doses PCV7 or PCV13 <i>Pneumococcal Disease</i>
< 4 mos.							
by 4 mos.	1	1		1	1		1
by 6 mos.	2	2		2	2/		2~
by 8 mos.	2	2		2	2/		3/2~
by 12 mos.	3	2		4/3/2♥	2/		3/2~
by 15 mos.	3	2	1+	4/3/2/1♥	2/	1*	4/3/2~
by 19 mos.	4	3	1	4/3/2/1♥	3/	1	4/3/2~
by 2 years	4	3	1	4/3/2/1♥	3/	1	4/3/2/1~
by 3 years	4	3	1	4/3/2/1♥	3/	1	4/3/2/1~
by 4 years	4	3	1	4/3/2/1♥	3/	1	4/3/2/1~
K-Entry	5/4♦	4/3♣	2		3/	2	

- ♥ The number of Hib doses required depends on the child's current age and the age when the Hib vaccine was administered. If any dose is given at or over, 15 months, the Hib requirement is met. For children who begin the series before 12 months, 3 doses are required, of which at least 1 dose must be administered at, or over, 12 months. If the 1st dose was given at 12 to 14 months, 2 doses are required. If the current age is 5 years or older, no new or additional doses are required.
- ~ The number of doses of pneumococcal conjugate vaccine (PCV7 or PCV13) depends on the student's current age and the age when the 1st dose was administered. If the 1st dose was administered between 2 to 6 months of age, the child will receive 3 doses two months apart, and an additional dose between 12 to 15 months of age. If started between 7 to 11 months of age, the child will receive 2 doses, two months apart, and an additional dose between 12 to 15 months of age. If the 1st dose was given between 12 to 23 months of age, 2 doses, 2 months apart, are required. Any dose given at 24 months through 4 years of age, the PCV vaccine requirement is met. No doses required once the child turns 5 years of age.
- + MMR given more than 4 days before the 1st birthday is not a valid dose. That dose must be repeated. Documentation of 1 dose of rubella vaccine and 2 doses of measles and 2 doses of mumps vaccines on or after the first birthday meets the school requirement for Kindergarten entry.
- ♦ Five doses of pertussis, tetanus, and diphtheria vaccines are required at school entry in Colorado unless the 4th dose was given at 48 months of age or older (i.e., on or after the 4th birthday) in which case only 4 doses are required. There must be at least 4 weeks between dose 1 and dose 2, at least 4 weeks between dose 2 and dose 3, at least 4 months between dose 3 and dose 4, and at least 6 months between dose 4 and dose 5. The final dose must be given no sooner than 4 years of age (dose 4 may be given at 12 months of age provided there is at least 4 months between dose 3 and dose 4).
- ♣ Four doses of polio vaccine are required at school entry in Colorado. There must be at least 4 weeks between dose 1 and dose 2, at least 4 weeks between dose 2 and dose 3, and at least 6 months between dose 3 and dose 4. The final dose must be given no sooner than 4 years of age. A fourth dose is not required if the 3rd dose was administered at age 4 years or older and at least 6 months after the 2nd dose. Minimum age/interval does not apply if the 4th dose (3rd if given on or after 4th birthday) was administered prior to July 1, 2009.
- * If a child has had chickenpox disease and it is documented by a health care provider, that child has met the varicella requirement. Varicella given more than 4 days before the 1st birthday is not a valid dose. That dose must be repeated.
- / The 2nd dose of Hep B is to be given at least 4 weeks after the 1st dose; 3rd dose to be given at least 16 weeks (4 months) after 1st dose; and last dose to be given at least 8 weeks after 2nd dose and at 6 months of age or older. (For those kids who have 3 doses prior to 7/1/09, they do not need to follow the above stated intervals.)