

Red Tape Review Rule Report (Due: September 1, 2023)

Department Name:	Health & Human Services (HHS)	Date:	9/1/2023	Total Rule Count:	12
IAC #:	641	Chapter/ SubChapter/ Rule(s):	7	Iowa Code Section Authorizing Rule:	139A.8, 139A.22, 139A.26
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PLEASE NOTE, THE BOXES BELOW WILL EXPAND AS YOU TYPE

What is the intended benefit of the rule?

This rule chapter describes immunization requirements for all persons enrolled or attempting to enroll in a licensed child care center or a public or nonpublic elementary or secondary school in Iowa including those who are provided private instruction. Required immunizations listed in the rule are those defined by Iowa Code or approved by the Council on Health and Human Services.

The rule chapter defines procedure for members of the public to comply with immunization requirements, including how to:

- Request an individual exclusion for medical or religious reasons.
- Provide required education on meningococcal disease to students of institutions of higher education with on campus residence hall or dormitory.
- Provide proof of immunization the school or licensed child care center in which the applicant wishes to enroll.
- Maintain records and complete reporting duties as an admitting officials of a licensed child care center or elementary or secondary school.

The department maintains a statewide immunization and health screening registry to allow enrolled users to maintain and access to health screening histories for purposes of ensuring that patients are fully immunized and screened.

Is the benefit being achieved? Please provide evidence.

Figures below are actuals incurred in the fiscal years shown.

Identified Impacts*

	SFY2018	SFY2019	SFY2020	SFY2021	SFY2022	5 Year Total
Costs HHS Implementation Required Immunizations	\$5,146,000	\$5,246,000	\$5,346,000	\$5,446,000	\$5,546,000	\$26,130,000
Benefits Improved Public Health and Safety	Qualitative	Qualitative	Qualitative	Qualitative	Qualitative	Qualitative
Net Value	\$5,146,000	\$5,246,000	\$5,346,000	\$5,446,000	\$5,546,000	\$26,130,000

*All monetary figures have been rounded to the nearest thousandth.

Childcare and school immunization requirements play an important role in increasing immunization rates and ensuring environments where children congregate are safe. Vaccines are the best defense against infectious diseases, which may have serious complications such as pneumonia, meningitis, and even death. Achieving and maintaining high immunization rates is the best way to protect all children from vaccine-preventable diseases while at the childcare and school setting. The CDC estimates that vaccination of children born between 1994 and 2021 will prevent 472 million illnesses, 1,052,000 deaths, and save nearly \$2.2 trillion in societal costs. For every \$1 spent on each of the 11 vaccines given routinely to children, there is a savings of \$10.10 in medical costs by averting costs to treat diseases.

Rules also allow for the creation of an Immunization Registry. Immunization Information Systems (IIS) benefit healthcare providers and the public by storing patient records from all ages and to keep patients on schedule for recommended immunizations, documenting vaccine contraindications and reactions, validating immunization history, providing vaccine recommendations, producing patient reminder and recall notices, and managing vaccine inventory.

What are the costs incurred by the public to comply with the rule?

Parents with children receiving required immunizations, or their health insurance provider, must pay for the immunizations. Adult college students, or their health insurance provider, may also pay for required immunizations under this rule.

What are the costs to the agency or any other agency to implement/enforce the rule?

HHS incurs personnel costs for team members to support the procedures described in this rule chapter. These costs are reflected in the table above as “HHS Implementation”.

Do the costs justify the benefits achieved? Please explain.

The cost benefit analysis above shows a net value of \$26,130,000 and improved public health and safety. Eliminating the immunization tracking and reporting mechanisms required in rule, or significantly decreasing the number and/or types of immunizations required, may significantly lower immunization rates. Lowered immunization rates may lead to increased incidence of vaccine-preventable disease resulting in hospitalizations and deaths. This would also impact the ability of public health agencies and healthcare providers to serve Iowans with or exposed to vaccine-preventable diseases.

Are there less restrictive alternatives to accomplish the benefit? YES NO

If YES, please list alternative(s) and provide analysis of less restrictive alternatives from other states, if applicable. If NO, please explain.

HHS supports those immunization required in accordance with Iowa Code, or as approved by the Council on Health and Human Services. This rule chapter clarifies procedure but does not ascribe department duties or implementation elements in addition to those directly defined in Code. HHS has established parameters for immunization tracking and reporting at the level the Department feels necessary to protect public health and safety.

Does this chapter/rule(s) contain language that is obsolete, outdated, inconsistent, redundant, or unnecessary language, including instances where rule language is duplicative of statutory language? [list chapter/rule number(s) that fall under any of the above categories]

PLEASE NOTE, THE BOXES BELOW WILL EXPAND AS YOU TYPE

- 7.1
- 7.3
- 7.4

7.5
7.9
7.11

RULES PROPOSED FOR REPEAL (list rule number[s]):

7.9

***RULES PROPOSED FOR RE-PROMULGATION* (list rule number[s] or include text if available):**

7.1
7.2
7.3
7.4
7.5
7.6
7.7
7.8
7.10
7.11
7.12

****For rules being re-promulgated with changes, please attach a document with suggested changes, if available.***

METRICS

Total number of rules repealed:	1
Proposed word count reduction after repeal and/or re-promulgation	493
Proposed number of restrictive terms eliminated after repeal and/or re-promulgation	7

ARE THERE ANY RULES YOU WOULD RECOMMEND BE CODIFIED IN STATUTE?

No recommendations.