
Immunization Law: Frequently Asked Questions

Annual Immunization Status Report (AISR)

Q: *Why do we not report AISR for PreK when the immunizations are required?*

A: The Annual Immunization Status Report (AISR) is only for K-12.

K-12 Requirements

Q: *Is this in effect for the upcoming (2014-2015) school year?*

A: Yes, the new requirements go into effect on September 1, 2014 and are for the upcoming school year.

Q: *What does the addition of hepatitis B, MMR, and varicella for K-12 mean in terms of AISR requirements?*

A: It means that hepatitis B, MMR, and varicella vaccines have been added to the others that are reported via the AISR for all grades. It also gives schools the authority to request MMR, varicella and hepatitis B vaccination documentation along with other required vaccines for all grades.

Q: *Do we have to check MMR, hepatitis B, and varicella for every grade?*

A: No, the change to the law gives the school nurse authority to request MMR, varicella and hepatitis B vaccination documentation along with other required vaccines for all grades.

Q: *Should we make sure children entering older grades have a final DTaP or polio dose after age 4 years?*

A: No, this only applies to incoming kindergarteners who are completing their childhood series after Sept. 1, 2014.

Q: *Do children who received 4 doses of Pentacel (DTaP-IPV-Hib vaccine) as infants need a 5th dose of polio vaccine?*

A: Yes, regardless of the number of doses previously received, a final polio dose is required on or after the fourth birthday. Again, this should be enforced for children who completed the series after Sept. 1, 2014.

Q: *We occasionally see children who have already had 5 or more doses of polio vaccine but none were given after the 4th birthday. Do they still need another dose?*

A: Yes, but this only applies to incoming kindergarteners who are completing their childhood series after Sept. 1, 2014.

Q: *In the past, a child entering kindergarten who received a third dose of polio or a fourth dose of DTaP after his or her 4th birthday was not required to receive a fourth polio dose or a fifth DTaP dose. Does that still apply?*

A: Yes.

Q: *What is the difference with the new kindergarten requirements outside the fact that I must check to make certain the last dose of DTaP and Polio were given at age 4 or after?*

A: There are no other new requirements for children in kindergarten.

Q: *If a child has not completed the vaccine series, can he or she still attend school?*

A: Yes, as long as he or she has started the series and has a health care provider's or local public health official's signature indicating that he or she is in the process of completing the series. For children enrolling in school, Minnesota law allows up to eight months to complete a vaccine series.

Q: *Are children who are home schooled required to follow the same immunization laws?*

A: Yes, homeschoolers are required to follow the same immunization laws as public and private schools, starting at age 7 or at first entry to home school.

Q: *Is the first day of school considered the exclusion date or do you extend it into September?*

A: The first day of school could be used as the exclusion date. The law says that in order for a student to *enroll* or *remain enrolled* they must have documentation of vaccination or a legal exemption.

Q: *Why not just check on an annual basis? Is the understanding that children that are not current/compliant on the first day of school as opposed what some school districts are doing (30 days to comply)?*

A: The law says that to enroll or remain enrolled, students need to have the required immunizations or be in the process of completing the series. Students have eight months to complete the series. For example, if a student received their first hepatitis B vaccine a few days before school begins, they have eight months to complete the series. The 30 day rule only applies to transfer students, not all students.

Q: *Can schools exclude students from entrance if the vaccines are NOT up to date?*

A: Yes. Schools can exclude students from entrance into school if their vaccines are not up to date unless the student has begun but not completed vaccinations that require more than one dose, known as a series. The law says that students have 8 months to complete the series. For example, if a student received their first hepatitis B vaccine a few days before school begins, they have eight months to complete the series.

Hepatitis A

Q: *What ages are included for the hepatitis A requirement?*

A: Children in child care or an early childhood program *through pre-kindergarten* are required to show documentation of two doses of hepatitis A vaccination unless there is a legal exemption. Hepatitis A is not required for kindergarten and higher grades.

Q: *Do school-age children in extended-day child care programs need to get the hepatitis A vaccination series?*

A: No, school-age children in extended-day child care programs are not included because hepatitis A vaccination is not required for kindergarten and higher grades.

Q: *At what age are children expected to have completed the hepatitis A series?*

A: The first hepatitis A dose is required starting at age 12 months and the two-dose series should be completed by age 2 years (two doses are given at least six months apart).

Q: *The hepatitis A requirement does not indicate a number of doses. Will children be required to show just one dose or two doses?*

A: Unless there is a legal exemption, one dose is required for children age 12 months to 2 years old and two doses are required starting at age 2 years *through pre-kindergarten* for children in child care or an early childhood programs .

Q: *What is the age cut-off for the hepatitis A requirement, are we required to catch up older kids now?*

A: The cut-off is related to the program the child is enrolled in, not a specific age. Health care providers will need to catch up kids who did not previously receive hepatitis A and are enrolled in child care and early childhood programs. Once a child starts kindergarten, hepatitis A is not required. Minnesota law allows up to 18 months to complete the hepatitis A series (and other required vaccine series).

Meningococcal

Q: *Is meningococcal required for college entry?*

A: Minnesota's College Immunization Law doesn't require meningococcal vaccination but some post-secondary schools have their own requirements. Parents/students should check with the school they will be attending to find out what vaccinations are required. (Minnesota law does require that colleges provide information about meningococcal disease and the availability of a vaccine.)

Q: I see that the requirement includes 7-12th grades. Will schools need to ask for meningococcal vaccination documentation in all grades as of September 1, 2014?

A: MDH expects that schools report compliance for seventh graders via the Annual Immunization Status Report (AISR) for the 2014-2015 school year. There will be a phased approach for AISR reporting beyond next year (see table).

Grade	School Year					
	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20
7	1 MCV4 dose	1 MCV4 dose	1 MCV4 dose	1 MCV4 dose	1 MCV4 dose	1 MCV4 dose
8		1 MCV4 dose	1 MCV4 dose	1 MCV4 dose	1 MCV4 dose	1 MCV4 dose
9			1 MCV4 dose	1 MCV4 dose	1 MCV4 dose	1 MCV4 dose
10				1 MCV4 dose	1 MCV4 dose	1 MCV4 dose
11					1 MCV4 dose	1 MCV4 dose
12						1 MCV4 dose

Q: What is the expectation regarding the booster dose? Do schools have to check for documentation? At what age?

A: We are not requiring schools to report via AISR on booster dose compliance. MDH made this decision due to a complicated catch-up schedule, the need to add new reporting infrastructure at 10th grade, and a booster dose recommended at an age that spans two grade cohorts. MDH will monitor booster dose uptake via MIIC and if significant gaps exist will re-visit this decision.

Note: Fact sheets/print materials that discuss meningococcal requirements will continue to include seventh through 12th grade language, “For all students entering seventh grade. Students entering eighth through 12th grade must show documentation if the school requests it.”

Q: Is there a catch-up phase for reporting the meningococcal requirement?

A: MDH expects that schools report compliance for seventh graders via the Annual Immunization Status Report (AISR) for next school year. There will be a phased approach for AISR reporting beyond next year (see table above).

Q: Have you heard of Districts asking for initial MCV4 doses for all 7th-12th graders and just reporting out on 7th grade instead of a phased approach, which gets complicated for electronic rules and for parents?

A: While we have not heard of that specific approach, if districts have the resources they may use this approach. The law allows schools the authority to request documentation of MCV4 or a legal exemption for all students in seventh through 12th grades.

Pneumococcal

Q: Can you clarify pneumococcal requirements for each specific age for the new law especially as it relates to those over 24 months?

A: Pneumococcal is only required for children two to 24 months old in child care and early childhood programs. It is not required for children over 24 months of age. The *Early Childhood Immunization Form* describes the pneumococcal doses required for specific ages under 24 months. You can find the form at: www.health.state.mn.us/divs/idepc/immunize/laws/earlychdimzfm.pdf.

Tdap

Q: *If a Tdap was given to a child between ages 7 and 11 years, is another Tdap required at 7th grade? (E.g., a refugee received a Td/Tdap series or a child received Tdap at age 10 years due to a pertussis outbreak.)*

A: No, another Tdap is not required. The child will need a Td booster 10 years after his or her last tetanus and diphtheria-containing vaccine.

Q: *If a child received a Td between ages 7 and 11 years, shouldn't we wait 10 years before giving a Tdap?*

A: No, Tdap would still be required at 11-12 years in order to boost protection against pertussis disease.

Q: *Our software does not distinguish between Td and Tdap. Must we verify that a child has received Tdap?*

A: No, schools may assume that the dose given was Tdap.

Q: *Can a student receive tetanus two years in a row if there is a situation where they may have received Td and now need Tdap?*

A: Yes, previous studies on safety of giving a Tdap in close proximity to a Td show no increased rates of local reactions.

Varicella (Chickenpox)

Q: *Can a history of chickenpox be accepted in lieu of immunization?*

A: Yes, parents can sign and submit documentation of month and year of disease, if it occurred prior to 2010. If the disease occurred in 2010 or later, a health care provider must sign documentation of chickenpox (varicella) disease.

Q: *For the varicella requirement for early childhood programs, I want to confirm that only one dose is required until they reach kindergarten, correct?*

A: Yes, this is correct.

Child Care/Early Childhood Programs

Q: *Is it the intent of the MDH to have all pre-kindergarten students' immunization compliant prior to enrollment?*

A: Yes, the law says that no child may be allowed to enroll or remain enrolled in child care or an early childhood program until the person has submitted documentation of vaccination or an legal exemption. Often, the *Early Childhood Immunization Form* accompanies the registration form so that both registration and immunization documentation are submitted together. You may want to ask other school districts how they are handling this. Many have been administering ECSE programs for many years and have had to comply with this requirement.

Q: *Do the new immunization requirements only apply to newly enrolling children?*

A: No. Any child enrolled in child care or early childhood programs needs to meet the new requirements effective Sept 1, 2014.

Q: *Are early childhood programs required to complete the Annual Immunization Status Report?*

A: No, the Annual Immunization Status Report (AISR) is only for schools, K-12.

Q: *What school-based early childhood programs are included in the law?*

A: Programs that are included are those that provide instructional or other services in a classroom setting and include:

- Children from birth through pre-kindergarten
- Meet at least once a week for 6 or more weeks during the year
- Early childhood special education (ECSE) was already included

Q: *Do school based preschool/special ed programs need to complete the child care immunization report now?*

A: No, MDH is not requiring an immunization report from early childhood programs.

Q: *How were early childhood programs notified of the changes?*

A: MDH has been working with the Early Childhood Coordinator at the Minnesota Department of Education and the administrators of early childhood programs, to disseminate information about the changes.

Q: *How are Early Childhood Special Education students who receive services in the home setting affected by this law?*

A: Students receiving Early Childhood Special Education (ECSE) educational services at home are expected to comply with the same requirements as children attending school-located programs.

Note: ECSE students, school-located or in the home, have been included in the law since 1989. The recent changes to the law haven't changed the requirements for these students.

Q: *Must we exclude Early Childhood Special Education children on the first day if they are not compliant with immunizations. How many doses of each required immunization will Early Childhood (birth-4) children need?*

A: Minnesota's law requires that schools and administrators of Early Childhood Education programs, including ECSE, check for documentation of vaccination or a legal exemption on the first day of school or enrollment. However, because ECSE is a part of a larger federal program, we suggest you check with your school district on exclusion.

The *Early Childhood Immunization Form* describes which vaccines are due at certain ages. You can find the form at: www.health.state.mn.us/divs/idepc/immunize/laws/earlychdimzfm.pdf.

Additionally, the MDH fact sheet *When to Get Vaccines, Birth to 16 years*, provides information on age-appropriate doses of required and recommended vaccines, www.health.state.mn.us/divs/idepc/immunize/whentoget.pdf.

Q: *In regards to early childhood programs, when are we to determine if a child is compliant? On the first day of their enrollment to the program or throughout the year (requirements change as they get older)?*

A: Schools should request documentation of immunization the first time a child *enrolls* in an early childhood program within each school year. Submission of immunization documentation for subsequent sessions during the same school year is not necessary.

Q: *It is very difficult to understand the early childhood rules such as the 18 month compliance. Why have that and what does it mean?*

A: Early childhood programs can exclude children from entrance into program if their vaccines are not up to date unless the child has begun but not completed vaccinations that require more than one dose, known as a series. Children in child care and early childhood programs have 18 months to complete a series to be compliant with the law. For example, if a child gets their first DTaP just before they begin child care or an early childhood program, they have 18 months to complete the series.

Note: This time frame is different for schools; children enrolled in schools have up to eight months to complete a series.

Q: *Our ECFE program meets every other week through the year. They meet for at least six weeks, but not every week, so it appears we do not need to collect immunizations. Is this correct?*

A: No, you do need to collect the information. The law does not require the six weeks to be consecutive; it requires that the class meets at least six weeks through the year. For example, if you have a class that meets every other week for more than 12 weeks, it is included in the law because that is at least six weeks.

It may be helpful to understand why ECFE programs are now included in the immunization law. Due to the health condition of many ECSE children they may not receive the full protection of vaccination; requiring vaccination of all children comingling with these children ensures greater protection for *all* children.

Q: *Does the law cover exclusion from early childhood programs if the child does not get their MMR and varicella boosters once they turn four or do we wait until they start kindergarten?*

A: The MMR and varicella doses that are due between 4-6 years are not required for early childhood programs. They are required for kindergarten-12th grade only.

Forms

Q: *Does a school, child care or early childhood program have to use a specific immunization form when communicating with parents about the immunization law?*

A: Yes, they must use the form MDH provides or a form approved by MDH.

Q: *Would you like us to provide the upcoming kindergartners with the older pupil immunization record or the new one?*

A: Please use the *Student Immunization Form* that is currently available at:
www.health.state.mn.us/divs/idepc/immunize/studentimzfm.pdf

Q: *When will the forms be updated?*

A: The Student, Child Care, and Early Childhood Program Immunization Forms have been updated and are available from the Immunization Website: www.health.state.mn.us/divs/idepc/immunize/tracking.html.

Make sure you're signed up for GovDelivery to get the latest updates. To sign up, click on "subscribe" next to the little red envelope on each of these pages:

- School Health Personnel: www.health.state.mn.us/divs/idepc/immunize/school/
- Minnesota Immunization Rule Revisions: www.health.state.mn.us/divs/idepc/immunize/immrule/

Q: *I've heard a new form may be coming. Do you when will it be available?*

A: Unfortunately, we don't know when the form will be available but will let you know when it is. Until then, please use the *Student Immunization Form* available at: www.health.state.mn.us/divs/idepc/immunize/studentimzfm.pdf.

School Software

Q: *Does our software vendor have the capability to automatically download (populate) the MIIC immunization information to our school immunization data? Procedure to set this up?*

A: There are ways of sharing data between MIIC and these systems; however, it requires some IT support from the school or district. Contact your MIIC regional coordinator with questions, for contact information see www.health.state.mn.us/divs/idepc/immunize/registry/map.html.

The Submit Client Query in MIIC is one option that schools can use. This can be done at any time in MIIC, but requires that the user have access to the Submit Client Query feature (a MIIC Help Desk request). Follow the Submit Client Query Specifications for creating the file to submit to MIIC:

1. Create a file containing demographics on the students of interest
2. Submit the file within the MIIC application
3. MIIC would return files with the demographic matched information from MIIC and also a file of all the immunizations for these students
4. The school would then need to "read-in" these flat files into their system

The technical documentation is available here:

www.health.state.mn.us/divs/idepc/immunize/registry/hp/clientqueryspec.pdf.

There are more technical HL7-based options that work for query and response; however, these would require more advanced IT support than the flat-file based submit client query.

Exemptions

Q: *My question is in regards to conscientious objectors. If they have a notarized CO on file that says, "no to all vaccinations; " how often does this need to be re-evaluated and signed again? Is it good for the entire school career?*

A: A signed and notarized conscientious objection (CO) form should be obtained at kindergarten and seventh grade. A new CO form should also be obtained when there are new immunization requirements put into law.

Other

Q: *Will the four day grace period be applied to the new requirements for DTP and polio after the fourth birthday? Will it still apply to other age-specific requirements like Hib after the first birthday, MMR after the first birthday?*

A: Yes, the 4 day grace period still stands.

Q: *What is the 4 day grace period? I apologize; I am not familiar with this.*

A: The four day grace period means that a vaccine given four days before the minimum interval or age can be counted as valid.

Q: *What exactly will be the requirements for students over the age of 18 (hepatitis B, MMR, DTP/Td/Tdap, polio, varicella, meningococcal)? Students over 20?*

A: Students over 18 are required to get the same vaccines as students under 18 years, with the exception of polio vaccine. This is also true of students over 20 years. However, once a student is 18 years or older they can sign their own immunization record forms to certify their immunization status or a legal exemption.

Q: *Will MDH be providing any training or webinars for ECFE?*

A: At this time there are no webinars planned for ECFE. We are working with the Minnesota Department of Education to communicate the new immunization rules.

Q: *How are pediatric clinics educating our students' families...getting the word out?*

A: MDH has communicated to pediatric clinics through GYS News. We are also working with partners through related professional organizations/associations to "get the word out" to pediatric providers and clinics. We will continue to communicate to providers on a regular basis for the 2014-2015 school year.

Q: *The "Are Your Kids Ready" flyer does not list how many doses of Hep A are required for Early Childhood Programs. Why not?*

A: Thanks for the tip, we'll take a look and see what we can do to add the doses. In the meantime, you can see which vaccines are due at what age on the *Early Childhood Immunization Form* at:

www.health.state.mn.us/divs/idepc/immunize/laws/earlychdimzfm.pdf.

Additionally, the MDH fact sheet *When to Get Vaccines, Birth to 16 years*, provides information on age-appropriate doses of required and recommended vaccines, www.health.state.mn.us/divs/idepc/immunize/whentoget.pdf.

Q: *Will MIIC be updated to reflect the new immunizations by fall?*

A: Kinks that need to be worked out to support the immunization law changes either have or are currently being addressed.



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