

ILLINOIS STATE MEDICAL SOCIETY

**Resolution 12.2018-10
(A-19)**

Introduced by: Rashmi K. Chugh, M.D., ISMS Member

Subject: Policy Change to School Immunization Requirements

Referred to: Council on Medical Service

1 Whereas, updated immunization and physical examination of children at the
2 appropriate age is critical for public health; and

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4 Whereas, preventive medicine measures presently in existence in the State of
5 Illinois require physical examination and updating of immunizations for school children,
6 on school entry, at 6th grade and 9th grade levels, aligned with immunization
7 recommendations from the Centers for Disease Control and Prevention; therefore be it

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9 RESOLVED, that ISMS policy be changed by making the following deletion and
10 addition:

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12 “Illinois residents should be provided access to all medically indicated
13 immunizations. Physicians are requested to provide this protection or to
14 encourage the local public health agency to perform this function, and to
15 encourage enforcement of current immunization laws. In addition,
16 physicians should be encouraged to participate in epidemiological studies
17 (especially as related to “search and destroy” methods for communicable
18 diseases) which have been endorsed by the local or state medical society.
19 ISMS continues to support the need for physical examinations of, and
20 updating of immunizations for, school children in the State of Illinois on
21 school entry, at ~~5th~~ 6th grade and 9th grade levels, in keeping with
22 preventive medicine measures presently in existence in the state.
23 Measures to assure compliance of the school health mandates by school
24 districts in Illinois should be maintained. Every school district should be
25 consulted by health departments planning any mass immunization
26 campaign. In counties where there is no public health department, the
27 Illinois Department of Public Health should contact either the county
28 medical society or local physicians (whichever is appropriate) for
29 coordination of the immunization program. If private facilities are utilized
30 during a mass immunization campaign, normal reimbursement procedures

1 may be employed, but no charge shall be made for the cost of vaccine paid
2 for by the federal government.”

Fiscal Note:

N/A

Existing ISMS policy related to this issue:

It is the policy of ISMS to collaborate with the existing Illinois Comprehensive Automated Immunization Registry Exchange (I-CARE) vaccine registry, the Illinois Department of Public Health, manufacturers of vaccines, and other states with existing immunization registries to investigate options to expand the current Illinois state immunization registry to include patients of all ages, and that the I-CARE vaccine registry be interoperable with all commercial healthcare databases. (HOD 2016)

It is the policy of ISMS that all CDC/ACIP-recommended vaccines should be included for all Medicare enrollees, including those in traditional Medicare and in Medicare Advantage programs, with no out-of-pocket cost. (HOD 2015)

ISMS supports the concept of increased government funding for immunizations of school children. (HOD 1987; Last BOT Review 2014)

ISMS supports expanding Illinois' Immunization Code to include the pneumococcal vaccine for daycare entry. (HOD 2012; Last BOT Review 2014)

Board of Trustees approved sending a letter to the IDPH Immunization Registry Administrator, the Chicago Area Immunization Campaign, the Illinois Chapter of the American Academy of Pediatrics, and the Illinois Academy of Family Physicians with feedback regarding the I-CARE registry system. (BOT 2009-OCT)

Illinois residents should be provided access to all medically indicated immunizations. Physicians are requested to provide this protection or to encourage the local public health agency to perform this function, and to encourage enforcement of current immunization laws. In addition, physicians should be encouraged to participate in epidemiological studies (especially as related to “search and destroy” methods for communicable diseases) which have been endorsed by the local or state medical society. ISMS continues to support the need for physical examinations of, and updating of immunizations for, school children in the State of Illinois on school entry, at 5th grade and 9th grade levels, in keeping with preventive medicine measures presently in existence in the state. Measures to assure compliance of the school health mandates by

school districts in Illinois should be maintained. Every school district should be consulted by health departments planning any mass immunization campaign. In counties where there is no public health department, the Illinois Department of Public Health should contact either the county medical society or local physicians (whichever is appropriate) for coordination of the immunization program. If private facilities are utilized during a mass immunization campaign, normal reimbursement procedures may be employed, but no charge shall be made for the cost of vaccine paid for by the federal government. (HOD 1991 Amended; Last BOT Review 2014)

Illinois residents should be provided access to all medically indicated immunizations. Physicians are requested to provide this protection or to encourage the local public health agency to perform this function, and to encourage enforcement of current immunization laws. In addition, physicians should be encouraged to participate in epidemiological studies (especially as related to “search and destroy” methods for communicable diseases) which have been endorsed by the local or state medical society. ... (HOD 1991 Amended)