

## ADMINISTRATIVE RULES Fiscal Estimate & Economic Impact Analysis

<b>1. Type of Estimate and Analysis</b> <input checked="" type="checkbox"/> Original <input type="checkbox"/> Updated <input type="checkbox"/> Corrected	<b>2. Date</b> 05/06/2019
<b>3. Administrative Rule Chapter, Title and Number (and Clearinghouse Number if applicable)</b> DHS 144	
<b>4. Subject</b> Immunization of Students	
<b>5. Fund Sources Affected</b> <input type="checkbox"/> GPR <input type="checkbox"/> FED <input type="checkbox"/> PRO <input type="checkbox"/> PRS <input type="checkbox"/> SEG <input type="checkbox"/> SEG-S	<b>6. Chapter 20, Stats. Appropriations Affected</b> N/A
<b>7. Fiscal Effect of Implementing the Rule</b> <input checked="" type="checkbox"/> No Fiscal Effect <input type="checkbox"/> Increase Existing Revenues <input type="checkbox"/> Increase Costs <input type="checkbox"/> Decrease Costs <input type="checkbox"/> Indeterminate <input type="checkbox"/> Decrease Existing Revenues <input type="checkbox"/> Could Absorb Within Agency's Budget	
<b>8. The Rule Will Impact the Following (Check All That Apply)</b> <input type="checkbox"/> State's Economy <input type="checkbox"/> Specific Businesses/Sectors <input type="checkbox"/> Local Government Units <input type="checkbox"/> Public Utility Rate Payers <input type="checkbox"/> Small Businesses <b>(if checked, complete Attachment A)</b>	
<b>9. Estimate of Implementation and Compliance to Businesses, Local Governmental Units and Individuals, per s. 227.137(3)(b)(1).</b> \$0	
<b>10. Would Implementation and Compliance Costs Businesses, Local Governmental Units and Individuals Be \$10 Million or more Over Any 2-year Period, per s. 227.137(3)(b)(2)?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>11. Policy Problem Addressed by the Rule</b> The department, through the Division of Public Health, is charged with carrying out a statewide immunization program. Essential to this charge of protecting individuals from vaccine preventable diseases is to identify and immunize those students who are still susceptible to measles, mumps, rubella, polio, hepatitis B, varicella, diphtheria, tetanus, pertussis, and meningococcal disease upon admission to an elementary, middle, junior or senior high school or a child care center, or Haemophilus influenzae b and pneumococcal infection upon admission to a child care center, in order to prevent transmission of these diseases.	
<b>12. Summary of the Businesses, Business Sectors, Associations Representing Business, Local Governmental Units, and Individuals that may be Affected by the Proposed Rule that were Contacted for Comments.</b> The department formed an Advisory Committee consisting of representatives from the Wisconsin Department of Public Instruction, Wisconsin Chapter of the American Academy of Pediatrics, Wisconsin Department of Health Services Medicaid Program, Wisconsin Association of Local Health Departments and Boards, Wisconsin Academy of Family Physicians, Wisconsin Association of School Nurses, Wisconsin Medical Society, and Pharmacy Society of Wisconsin. Proposed rule revision language was drafted based on the recommendations of this committee. All advisory committee meetings were held as open meetings. They were informed via email when the proposed rule order was made available to the public.  The department also published a solicitation in the Administrative Register, requesting information and advice from businesses, associations representing businesses, local governmental units, and individuals who may be affected by the proposed rules. All comments received by the department, were used to analyze and determine the economic impact that the rules would have on businesses, individuals, public utility rate payers, local governmental units, and the state's economy as a whole.  The department also sent out a GovD email update informing immunization stakeholders of the proposed rule order and solicitation for public comments. Immunization stakeholders include, but are not limited to, school districts, local health	

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departments, tribes, health care providers enrolled in the VFC program, and health care providers and staff who have self selected to be on the immunization email list serv.

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13. Identify the Local Governmental Units that Participated in the Development of this EIA.  
See 12., above.

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14. Summary of Rule's Economic and Fiscal Impact on Specific Businesses, Business Sectors, Public Utility Rate Payers, Local Governmental Units and the State's Economy as a Whole (Include Implementation and Compliance Costs Expected to be Incurred)

There are no implementation or fiscal impacts on specific businesses, business sectors, public utility rate payers, local governmental units and the state's economy as a whole. There are no implementation or compliance costs expected to be incurred from this rule change.

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15. Benefits of Implementing the Rule and Alternative(s) to Implementing the Rule

No reasonable alternatives exist to the rulemaking. The current rule is outdated with national immunization guidance given by the Advisory Committee on Immunization Practices (ACIP). The proposed rule is meant to align with current ACIP recommendations.

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16. Long Range Implications of Implementing the Rule

Proposed changes will decrease communicable diseases by ensuring children and students are identified and immunized against vaccine preventable diseases.

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17. Compare With Approaches Being Used by Federal Government

There are no known federal approaches that address the activities to be regulated by the proposed rules.

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18. Compare With Approaches Being Used by Neighboring States (Illinois, Iowa, Michigan and Minnesota)

Similar to the proposed rule, Illinois, Iowa, Michigan, and Minnesota all require at least one dose of meningococcal conjugate vaccine at either 6th or 7th grade. All states but Michigan require a booster dose either at the appropriate age of 16-18 years or grade 12, as is proposed in the proposed rule.

Similar to the proposed rule, Illinois, Iowa, Michigan, and Minnesota all require Tdap vaccine for students entering 7th grade.

Similar to the proposed rule, Illinois, Iowa, Michigan, and Minnesota all require a health care provider's documentation of varicella disease, instead of parental reporting.

Similar to the proposed rule, Illinois, Iowa, Michigan, and Minnesota refer to the Council of State and Territorial Epidemiologists case definitions and the Centers for Disease Control and Prevention guidance and recommendations in regards to disease outbreak definitions.

Similar to the proposed rule, Illinois, Iowa, Michigan, and Minnesota all have similar reporting requirements of vaccine preventable diseases.

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19. Contact Name Stephanie Schauer	20. Contact Phone Number 608-264-9884
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### ATTACHMENT A

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1. Summary of Rule's Economic and Fiscal Impact on Small Businesses (Separately for each Small Business Sector, Include Implementation and Compliance Costs Expected to be Incurred)

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2. Summary of the data sources used to measure the Rule's impact on Small Businesses

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3. Did the agency consider the following methods to reduce the impact of the Rule on Small Businesses?

- Less Stringent Compliance or Reporting Requirements
  - Less Stringent Schedules or Deadlines for Compliance or Reporting
  - Consolidation or Simplification of Reporting Requirements
  - Establishment of performance standards in lieu of Design or Operational Standards
  - Exemption of Small Businesses from some or all requirements
  - Other, describe:
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4. Describe the methods incorporated into the Rule that will reduce its impact on Small Businesses

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5. Describe the Rule's Enforcement Provisions

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6. Did the Agency prepare a Cost Benefit Analysis (if Yes, attach to form)

- Yes    No
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