



Medical Exemption Requirements for Child Care and School Admission

California Department of Public Health Immunization Branch

January 26, 2021



Webinar Tech Tips!

 Today's webinar is being audio-broadcasted – a one way communication via your computer speaker.

• During the webinar, please submit comments/questions via the Q&A panel.



Today's Webinar . . .

- Will be available for on-demand viewing at ShotsForSchool.org next week (early February 2021). The slides will also be available at that time.
- Is intended for MDs/DO who may potentially issue medical exemptions in California. A medical exemption webinar for school staff will be conducted in the coming months.



Webinar Topics

- Overview of new medical exemption requirements
- How to use the CAIR Medical Exemption website
- Medical exemption resources



Medical Exemptions: What's New

Effective January 1, 2021, all new medical exemptions (MEs) must be issued through the CAIR-ME web site.

Existing MEs issued before 2021:

- Are valid for continuing and transfer students until the earliest of the following dates:
 - When the child enrolls in the next grade span (TK/K-6th grade or 7th-12th grade).
 - The expiration date specified in a temporary medical exemption.
 - Revocation of the exemption because the issuing physician has been subject to disciplinary action from the physician's licensing entity.
- Are not filed in the CAIR-ME web site



Medical Exemptions: What's New

- CDPH will review exemptions in CAIR-ME when:
 - Child care facility/school sites report immunization rates <95% or do not report immunization rates
 - Physicians submit 5 or more MEs in a calendar year
 - Review is deemed necessary to protect public health
- Allows CDPH to revoke exemptions issued in CAIR-ME and parents to appeal the revocation
- Prevents physicians from submitting new MEs if they are on probation or have a pending accusation for immunization-related practices or are deemed a public health risk.



Medical Exemptions: What's New

Medical exemptions should be consistent with the relevant standard of care or meet applicable criteria from:

- Centers for Disease Control and Prevention (CDC)
- Advisory Committee on Immunization Practices (ACIP)
- American Academy of Pediatrics (AAP)



CAIR-ME Website Homepage: https://CAIR.cdph.ca.gov/exemptions



Overview of Process for Issuing a ME





Registering for a CAIR-ME Account



ion process inutes.

The entire registration process takes less than 2 minutes.



attendance.

CREATE A PHYSICIAN CAIR-ME ACCOUNT: STEP 1: Go to the CAIR-ME web site: <u>https://CAIR.cdph.ca.gov/exemptions</u> and click on the "Register" button

TIPS:

- Recommended browsers:
 - Google Chrome OR Microsoft Edge
- Enable pop-ups for CAIR-ME site

California Immunization Registry Medical Exemption Web Site User Access Agreement

Medical Exemptions from Immunizations

CAIR Medical Exemption Web Site User Terms & Conditions

The California Immunization Registry (CAIR) is a secure, computerized online information system developed to assist medical providers and other approved agencies to track and review immunization information and TB test results for individuals, assess immunization needs and remind/recall patients, avoid unnecessary or redundant immunizations, and control disease outbreaks. As part of the California Immunization Registry, the Medical Exemption (CAIR-ME) web site allows medical providers to enter medical exemptions from immunizations for school and child care and permits other approved agencies to track the status of these exemptions. Information in CAIR is only available to authorized users. Based on the access level approved, this Agreement will allow the User to access, view, add, or modify medical exemption information in CAIR-ME via the web interface.

California Health and Safety Code Section 120440 limits access to the California Immunization Registry (CAIR) to authorized users who require the information for the purpose of providing immunization services as specified.

As a condition of authorized access to the California Immunization Registry Medical Exemption web site, I agree:

- To comply with California Health and Safety Code Section 120440 regarding immunization registry use, as well as State and Federal laws and HIPAA regulations regarding maintaining the confidentiality of
 patient information.
- To access information in CAIR-ME only as needed to perform immunization/exemption-related activities for individuals presenting to my organization for services or enrollment for school/child care.
- To keep my user password confidential.

- · To only use my own password to access CAIR-ME.
- · To maintain the privacy and confidentiality of information in CAIR-ME.
- To ensure no misuse or wrongful disclosure of information in CAIR-ME.
- To report any activity that may compromise the protection and privacy of the information in CAIR-ME.
- To not communicate, publish, and/or otherwise provide or make public any information regarding persons enrolled in the registry and their immunization status, except:
 - 1. To patients who request their own immunization records,
 - 2. To individuals authorized by law to access immunization registry information, or
 - When records are presented with no associated identifying information.

To assure appropriate usage of CAIR-ME, a permanent electronic record will be created that will log each User's access into any registry client record. Any unauthorized release of confidential information by a User may revoke the User's access to CAIR-ME.

I Agree to the User Access Agreement

STEP 2: Click the "I Agree to the User Agreement" button



STEP 3: Enter your email address and click "Send verification code." Do not close the window.

Cancel	
Email Address	
Send verification code	
New Password	
Confirm New Password	
Create	

STEP 4: Check your email. Enter the 6-digit verification code from your email and click the "Verify Code" button.

∢ Ca	California Department of PublicHealth
	Verification code has been sent. Please copy it to the input box below.
ſ	
	Verification Code
	Verify code Send new code
	New Password
ſ	Confirm New Password

STEP 5: Create a Password

- Must be a minimum of 8 characters
- Must contain at least 3 of the following:
 - Uppercase letter
 - Lowercase letter
 - Number
 - Symbol

	California Department of PublicHealth
The	e code has been verified. You can now continue.
	Change
•••••	
•••••	
	Create



Welcome! Select a User Role.

Your account has been created for the California Immunization Registry Medical Exemption web site. Let's set up your user profile.

Are you registering as a parent or guardian, a physician, or a school or child care facility user?







STEP 7: Authenticate your license

- Click on "Transfer to IDEAL" and fill out the required fields.
- Only enter numbers in the Medical License Field
- Click the "Authenticate License" button to complete the validation and return to CAIR-ME



Set Up Your User Profile

The User Profile Page allows a Physician user to view their own profile and allows the Help Desk and Administrator user to view user profile details for the Physician user.

ail Address: Medical License Number:	20A				
hone Number: *	Phone Number (555) 555-5555		Extension		
ly Addresess:					Add Another Address
Address	City	State	Zip Code	Default?	Remove
	BAKERSFIELD	CA	93311-1164	۲	
123 Main Street Suite 71	Sacramento	CA	95814	0	8

STEP 8: Update your User Profile

- Your name, license number and address are managed by the CA Department of Consumer Affairs and medical licensing board
- You may add and maintain up to 4 additional practice site addresses



Click here to hide th	ne left menu Clic	k here to update your profile		
	A Medical Exemptions from Immunizations for School & C	Child Care	tog Out	
A Dashboard	My Dashboard	logged in	0	To protect patient
Click the dashboard button to return to this	Issue a Medical Exemption Start with the medical exemption request submitted by a paren bere Search By Number or Child's Last Name *	nt or guardian. To see a list of information needed to issue the me Figure Compton Parent d	dical exemption, click oesn't have an email address? Start a new exemption <u>here</u>	confidentiality, always log out when you aren't using the site
page	My Medical Exemptions Click on the row below to view and update an existing medical Clear Search Filters(T) ME Number Child's Name Search by ME Nu Search by First or Last Name	exemption. Date of Birth Parent/Guardian Issued Date Search by Date of II Search by First or Las_ Search by Date	ME Status	
	100007 burbus abbi	11/02/0000 konsula com 01/15/0021	CODU Revolut	

Your dashboard shows information about your MEs, including their status. Other physician users cannot see your exemptions.





Physician's Dashboard

Issue a Medical Exemption

Start with the medical exemption (ME) request form created by a parent/guardian. To see a lie

Search By Number or Child's Last Name * 100434

100434 - CHILD, Child (04/05/2020)

Start Exemption

ISSUING A MEDICAL EXEMPTION:

Step 1: The parent must request ME through CAIR-ME first. You can then search by the child's name or the Medical Exemption Request number provided by the parent. Once you locate the child, click the "Start Exemption" button.

NOTE: If the search does not bring up the child's name and ME Request Number, the parent has not submitted a request through CAIR-ME. Stop here and have the parent submit an ME request through CAIR-ME.



STEP 2: Fill out the medical exemption fields. There are 6 ME tabs for you to fill out and a tab for review.

Child's Name: XXX XXX		Date of B	irth: 01/01/2005	ME Number: 100714	ME Status: Part A
Child and Parent Int	formation School/Child	Care Facility Information	Physician Information	Medical Conditions	Supporting Docume 💙
Child Information					
Name: Date of Birth:	XXX XXX 01/01/2005 Mother's First Name *	TAB 1 :	CHILD AND PAR	ENT INFORMAT	TON TAB
Mother's First Name:	rani	- Rev Par	view the informa ent Information'	tion included ur ' tab and update	nder the "Child and e as needed.

• Click the "Save and Continue" box at the bottom of each ME tab. This will save the information you entered and automatically advance you to the next tab.





TAB 2: SCHOOL/CHILD CARE FACILITY INFORMATION TAB

- One school or child care facility must be listed on the ME. You can add an additional site by clicking the "Add Another School or Child Care Facility" button and selecting the school/facility.
- From the drop-down menu, select the child's grade span.
- Enter the actual or estimated date of admission (The ME may not be issued more than 12 months prior to admission.)
- Click the "Save and Continue" button.



Child's Name: Sandy Beach Parent1	Date of Birth: 0
Child and Parent Information School/Child Care Facility Info	rmation Physician Information Medical Conc
Physician Information	Date you started treating the patient * Are you the child's Primary Care Physician? Yes No
Issuing Physician Address * 1256 Skycrest Dr Apartment #6 WALNUT CREEK, CA 94595-1852	Primary Care Physician (PCP)
Date you started treating the patient *	Medical License Number * Physicians licensed by a California medical board may be found using the Department of Consumer Affairs' search website found <u>here</u> .
Are you the child's Primary Care Physician? Yes No Save and Continue	PCP Last Name *Address Line 1 *
	Address Line 2
	State *
	Zip Code * Phone Number * Extension
	PCP Email Address
	Reason you are submitting this exemption form instead of the Primary Care Physician *

COPH CAR Medical Exemptions from Immunizations for School & Child Care

TAB 3: PHYSICIAN INFORMATION TAB

- You may select any of your saved addresses.
- Enter the date you started treating the patient.
- Indicate whether you are the child's PCP. If you are not, complete the fields for the PCP.
- Click the "Save and Continue" button.

CAIR Medi	cal Exemptions					
	mmuniz Add a Me	Add a Medical Condition				
Child's Name:	Medical Basis for Sandy Beacl Severe Immu	Exemption * nodeficiency	*			
Child and Pare	ent Informatio Description o On chemothe	f Condition * 🔋				
Medical Co	nditions					
Please add all	Exempted Vaccin medical conc MMR, VAR/V	es * ZV	•			
Add Condition	ion 1/19/2021	Ē				
Save and Cont	tinue Condition is:	* inent prary (exemption expires withir	12 months of issuance)			
	Exemption Expira 1/19/2022	tion Date *				
© 2021 – California	a Department	Cancel				



TAB 4: MEDICAL CONDITIONS TAB

- Click the "Add Condition" button.
- From the drop-down menu, select from the following medical conditions:
 - Anaphylaxis
 - Encephalopathy
 - Severe Immunodeficiency
 - Other (Specify)
- Enter a brief description of the condition
- Select the exempted vaccines and record the onset date for the condition.
- Identify whether the condition is permanent or temporary. If it is temporary, identify the date when the ME expires (may not exceed 12 months)
- Click the "Add" button.
- Multiple conditions can be added by repeating the process.
- When you are done entering conditions, click the "Save and Continue" button.

Child's Name: Sandy Beach Parent1		Date of Birth: 05/15/2015		ME Number: 100661		ME Status: Draft	
Child and Parent Information	School/Child Care Facility Information	Physician Information	Medical Conditions	Supporting Documents	Attest & Authorize	Review	
Upload Supporting Documentation							
You may upload medical records and other documents to support the medical exemption. Supporting documents are visible to the California Department of Public Health, California Health and Human Services Agency, the Medical Board of California as needed for review of the medical exemption. You may upload up to 10 documents in PDF format less than 5,000 KB file size each.							

Select files to upload	Browse
Upload Supporting Documents	
Save and Continue	

TAB 5: SUPPORTING DOCUMENTS TAB

You have the option to upload supporting medical records and documents.

- Use the "Browse" button to find files on your desktop.
- The files you select will be listed on the page.
- Click the "Upload Supporting Documents" button to upload them to CAIR-ME.
- Once you finish uploading files, click the "Save and Continue" button.



TAB 6: ATTESTATION AND AUTHORIZATION TAB

- Review these statements. By checking the boxes, you agree to all of the terms listed.
- Click the "Save and Continue" button.



R Medical Exemptions from Immunizations for School & Child Care

<	Child and Parent Information School/Child Care Facility Inf	formation	Physicia
Atte	st & Authorize		
Вус	checking the boxes below, you agreed to all terms listed.		
Att	testation		
	I certify that the statements and information contained in this form accurate, and complete.	n are true,	
	I have complied with, and informed the parent or guardian of, all a requirements of California Health and Safety Code Section 12037:	pplicable 2.	
	I have conducted a physical examination and evaluation of the chi with the relevant standard of care.	ild consisten	nt
	I have not charged for this form or for a physical examination relat renewal of a temporary medical exemption.	ted to the	
Au	thorization		
	I authorize the California Department of Public Health to contact r purposes of California Health and Safety Code Section 120372 an release of records related to the medical exemption to CDPH, the Board of California, and the Osteopathic Medical Board of Californ	ne for the Id for the Medical nia.	

Child's Name: Sandy Beach Parent1		Date of Birth:	05/15/2015	ME Nu	mber: 100661	ME Status: Draft		
A are Facility Information	Physician Information	Medical Conditions	Supporting Docum	nents	Attest & Authorize	Review	>	
	850 Emory Redding, CA 96001 (530) 229-8454 LaurieMEReview+parent1@gmai I.com				TAB 7: REV• The Rev	IEW TAB view tab show	/s you	all
School Information	Not Co	mplete			informa	tion you have	e ente	red. It will
School/Child Care Facility:	Shasta Lake 4620 Vallecito St. Shasta Lake, CA 96019-9348 (110221)				All required entered	ired fields in before a tab	each t is cor	ab must be nplete and
Grade Span: Admission Date:					 Click on tab. 	the pencil sy	mbol	to return to a
Physician Information	Not Co	mplete						
Issuing Physician:	TIMOTHY UYEKI	CA License Number: Phone Number:	A 50491 (209) 364-4505					



Medical Condition Information

Medical Basis for Exemption:	Severe Immunodeficiency
Description Of Condition:	On chemotherapy for solid tumore
Patient Medically Exempt for:	MMR, VAR/VZV
Onset Date:	01/19/2021
Exemption Expiration Date:	Temporary, expiring 1/19/2022

Supporting Documents Attestation and Authorization Attestation Complete Authorization Complete Issue Medical Exemption Usue Medical Exemption



Issued Medical Exemption Confirmation

Medical Exemption number 100661 has been issued.

Please print the Medical Exemption and provide it to the child's parent/guardian to file with the school or child care facility.

Print Issued Medical Exemption

Return to Dashboard

Step 3: Print the Medical Exemption

- Click the "Print Issued Medical Exemption" button.
- The ME has two pages—provide both pages to the parent.
- Advise the parent to make copies of the ME for their records and to provide to school and child care facilities. If the parents lose the ME, they will need to obtain a copy from you, the issuing physician.



Need Help?

Assistance with Medical Exemptions:

Medicalexemptions@cdph.ca.gov

IT issues with the web site:

Medicalexemptions@cdph.ca.gov CAIR-ME Help Desk: (844) 699-4225



How do I document a history of chickenpox for school admission?

For school admission, a child with a "history of chickenpox" will need an exemption issued through CAIR-ME. Written documentation on the yellow card, blue card, CAIR records, or a note is not sufficient.



I have a patient that needs a medical exemption, and the parents do not have an email address. How do the parents start the process of requesting a medical exemption?

Option 1: Parents can go online and obtain an email address. They can then create a CAIR-ME account and request the medical exemption.

Option 2: During the visit, you can log in to CAIR-ME, fill out the parents' section and confirm they agree to the authorizations on the Child & Parent Information tab. If you use this option, the parents will not be able to add an email address later, cannot check the ME status in CAIR-ME, and can only receive ME status updates via (postal) mail.



How early may a physician issue a medical exemption in CAIR-ME before a child first enters a grade span starting in 2021?

A medical exemption may be issued in CAIR-ME no more than 12 months before a child first enters a grade span (grade spans are birth-preschool, TK/K-6th grade and 7th-12th grade).



Can I print a copy of the Medical Exemption form and complete it by hand?

No. The medical exemption form can only be completed, issued, and printed from CAIR-ME. Only the issuing physician can print a medical exemption.



Can I use my CAIR2 login to access CAIR-ME?

No. Access to CAIR-ME requires a separate login. Medical exemptions issued in CAIR-ME are not visible in CAIR2 at this time. Notes entered in CAIR2 on a patient record, such has history of chickenpox, are not a valid medical exemption.



Medical Exemption Resources

- Shots for School web site: <u>https://www.shotsforschool.org/</u>
- ACIP Contraindications and Precautions: <u>https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/contraindications.html</u>
- AAP Immunization Resources Best Practices: <u>https://www.aap.org/en-us/Documents/immunizations_nvac_standard_5and6.pdf</u>
- AAP Red Book: <u>https://redbook.solutions.aap.org/</u>
- CDC Pink Book: https://www.cdc.gov/vaccines/pubs/pinkbook/index.html
- Immunization Action Coalition: https://www.immunize.org/askexperts/



Questions and Answers



Thank You for Protecting Californians!



