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Testimony on House Bill 2121 Regarding Reporting the Administration of Vaccines to the State Registry

Senate Committee on Public Health and Welfare

Jennifer VandeVelde Director of the Bureau of Disease Control and Prevention Kansas Department of Health and Environment

March 14, 2017

Madam Chair and members of the committee, I am Jennifer VandeVelde, Director of the Bureau of Disease Control and Prevention for the Kansas Department of Health and Environment (KDHE). Thank you for the opportunity to discuss House Bill 2121. We believe this bill would help provide critical and necessary information regarding vaccines in the State of Kansas.

As you are likely aware, WebIZ has been our statewide immunization registry since August, 2005. WebIZ currently has interfaces with 22 electronic health vendors, with an additional 25 electronic health vendors currently in the process of completing the enrollment process. These vendors, along with facilities entering directly into WebIZ, collectively represent 1,565 facilities, which translates to approximately 2,731,740 total patients included in WebIZ, with that number growing each day. While most providers have seized the opportunity to participate in WebIZ, we do not yet have complete reporting of vaccines. It is this lack of complete reporting that HB2121 would alleviate, resulting in many positive outcomes, including:

- Decreased chance of improper vaccination (due to complete vaccination histories being available to providers)
- Fewer delays in validating vaccination history for schools, which will result in fewer days of missed school for children who would otherwise be excluded until proof of vaccination can be provided.
- Decreased risk of avoidable adverse vaccine events: because contraindications, including allergies, are carried forward in WebIZ, providers would be alerted to these conditions, even if the patient or parent had forgotten to advise the provider.
- Easier access to vaccination records not only for providers, but also for patients and parents.
- Finally, complete reporting would provide the information needed for KDHE to accurately assess, understand, and respond to actual coverage rates for vaccines in Kansas. Current program activities are based on survey data from the National Immunization Survey. This data is a sampling of our population, which is naturally a less reliable source of information.

We want to ensure that providers are given ample time, opportunity, and assistance to complete the process of working with WebIZ. We respectfully request a timeframe of three to five years to ensure that our staff are able to provide all necessary assistance to providers not currently engaged with WebIZ.

If passed, we do not estimate any additional costs to KDHE in the implementation of the bill.