

## Example of a resolution submitted to the TMA House of Delegates

*This resolution below by Celia Neavel, MD was presented to, and approved by, the TCMS Delegation for submission to the TMA HOD. The HOD approved the resolution; it was presented as a bill to the Texas State Legislature and was subsequently written into Texas law.*

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### TEXAS MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution

Subject: Adolescent Parent Immunization

Introduced by: Travis County Medical Society

Referred to:

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Whereas, the Texas Medical Association promotes immunizations throughout an individual's lifespan and is dedicated to helping to reduce barriers to immunizations that prevent a fully immunized population; and

Whereas, TMA supports and promotes the recommendations by the Advisory Committee on Immunization Practices (ACIP), including recommendations specific to certain groups including adolescents as well as pregnant and postpartum women; and

Whereas, ACIP recommendations do include the strategy of promoting cocooning, which is an immunization strategy focusing on the parents and caregivers of young infants; and

Whereas, pertussis and influenza are two vaccine preventable diseases that postpartum women who are not vaccinated against can put their young infants at risk of contracting; and

Whereas, Texas law does allow that a minor parent is able to consent to immunization for his or her own children, the law does not universally allow a minor parent to consent to his or her own immunizations;

Whereas, Texas law does recognize that a minor can consent to his or her own medical care if 16 and older and living on his or her own and managing his or her own affairs, is married, is on active duty, is consenting to evaluation and treatment of a reportable contagious disease, or pregnant; and the Texas Department of State Health Services has concluded that Hepatitis B is a reportable disease and that a minor can consent to this vaccine. There is precedent for a minor being able to consent to his or her vaccines in these circumstances; and

Whereas, more than 50,000 Texas teens give birth each year, therefore be it

RESOLVED, That the Texas Medical Association supports legislation that would allow all parents, including minors, to consent for their own vaccines as an important mechanism of preventing the spread of communicable diseases, including those that could harm infants and children.

## **TMA Policy:**

**135.008 Immunizations Administering:** The Texas Medical Association believes that vaccinations for children or adults should be given only under the direction of a physician licensed in Texas, in an appropriate setting and administered after receiving informed consent from each patient, including information on adverse reactions to such shots. In addition, TMA supports immunization programs that target individuals who are most likely to experience complications from the flu or who are at increased risk for exposure. Vaccination of the general public should only take place if the individual meets the defined criteria recommended by the Centers for Disease Control (Board of Trustees, p 17, I-95; reaffirmed CPH Rep. 2-A-08).

**135.014 Adolescent Vaccines:** The Texas Medical Association supports the CDC Advisory Committee on Immunization Practices' recommendations that (1) 11- and 12-year-olds receive a vaccine against meningococcal disease. Catch-up vaccinations should be offered to those entering high school and to college students, especially freshmen; and (2) 12-year-olds receive a booster vaccine against pertussis (CM-ID Rep. 2-A-06).

### **135.016 Influenza Vaccine Recommendations for Health Care Workers: The Texas Medical Association:**

- supports 100-percent influenza vaccination among health care workers. Health care workers opting to decline influenza vaccine offered by the employer should be required to sign a declination waiver to be included in the personnel file. The waiver should include educational information about the danger of nonimmunization and the potential spread of influenza among patients and family members.
- supports the Advisory Committee on Immunization Practices policy recommending that all health care workers who have direct patient contact in hospitals or clinics get a dose of tetanus-diphtheria-pertussis vaccine (Tdap). A two-year interval since the last tetanus-diphtheria vaccine (Td) is suggested but not required. TMA recommends that employers assess for, administer, or secure a declination waiver for Tdap during the period when they are offering the annual influenza vaccine.
- encourages physicians practicing obstetrics quality-of-care measures in private practice (and others, including advance practice nurses and midwives) offer influenza vaccination to pregnant women, especially those during the second or third trimester of pregnancy, or upon postpartum hospital discharge. TMA supports offering these women the option of receiving the tetanus-diphtheria-pertussis vaccine (Tdap) at the time of hospital discharge as well, preferably as a standard delegated medical order (CM-ID Rep. 2-A-08).

**260.080 Vaccine Delivery:** The Texas Medical Association is dedicated to helping assure all Texans are fully vaccinated. TMA recommends several actions to help remove barriers for physicians and add accountability and transparency to all aspects of vaccine delivery.

1. That TMA work with the Texas Legislature to highlight the critical contribution of Texas physicians in reaching the state's public health immunization goals by eliminating vaccine preventable illnesses and also, assuring comprehensive services in the medical home setting. In addition, TMA supports legislation to:

- (a) Eliminate the business tax on vaccines;
- (b) Establish a purchase reference for acquisition of each vaccine recommended for children, based on a standard transparent source, such as the CDC Private Sector Price List;

- (c) Mandate vaccine payment reporting by insurance companies in order to determine if they are covering the true costs of these preventive services; and
- (d) Further universal reporting to the state's immunization registry.

2. That TMA support increased federal funding of the Section 317 program and state funding to increase payment to physicians for the administrative costs of providing immunizations to patients in the Medicaid and Texas Vaccines for Children programs.

3. That TMA work with the Texas Department of State Health Services and other recognized groups to expand and promote resources to assist physician members on how practices can best establish a business and public health case for providing immunizations and determine the tools necessary to negotiate best price (CPH Rep. 1-A-09).

**135.012 Immunization Rates in Texas:** The Texas Medical Association supports the following recommendations to address Texas' low immunization ranking and to ultimately improve the health of Texas children: (1) address immunizations as they relate to bioterrorism; (2) improve the state's current immunization tracking system, ImmTrac; (3) improve immunization education efforts for providers and parents; (4) address public and private vaccine financing issues; (5) increase physician education and participation in the Vaccines for Children program; (6) improve vaccine distribution under the Vaccines for Children program; (7) address vaccine supply shortages; and (8) conduct a study on the statewide purchase of vaccines, known as universal vaccine purchase, as well as on other vaccine delivery alternatives to increase immunization rates (CPH Rep. 1-I-02).

**135.007 Immunization Guidelines:** The Texas Medical Association encourages and supports frequent and regular dissemination of the Uniform Childhood Immunization Schedule recommendations through appropriate media and other means of communication throughout Texas (Amended Res. 280, p 141, A-95; reaffirmed CPH Rep. 2-A-08).

**135.010 Immunization Education Efforts for Texas:** The Texas Medical Association will participate and lead in statewide education efforts for the public, physicians, legislators, and the media to improve immunization rates in the state from 69 percent (NIS 2000 rate for Texas children 19- to 35-months-old) to the Healthy People 2010 goal of 90 percent (Res. 310-A-02).

**55.035 Right to Confidential Care:** The Texas Medical Association upholds the right of adolescents to receive confidential care to protect their health. Evidence indicates that requiring parental involvement in sexual and contraceptive health care reduces access to care without reducing sexual activity or increasing communication between parents and teens. In addition, TMA supports a health care environment that encourages adolescent access to care without involvement by law enforcement officials, except in cases of suspected child physical or sexual abuse as identified by the health care provider using his or her professional judgment (CM-MPH Rep. 2-A-03; reaffirmed CM-CAH Rep. 4-A-10).

**135.018 Pertussis and Cocooning:** The Texas Medical Association (1) actively promote the CDC's Advisory Committee on Immunization Practices recommendations on the use of the tetanus-diphtheria-acellular pertussis (Tdap) vaccine, and provide education and assistance to physicians with strategies for implementing pertussis vaccination in various settings, which includes providing tools to promote Tdap for postpartum women and their families, as well as the use of Tdap in emergency departments; (2) support increased physician awareness regarding payment for diphtheria-tetanus-pertussis (DTaP) and Tdap vaccine under health insurance plans; (3) work with DSHS and local public health agencies to

ensure current infectious disease data, guidance on responding to disease outbreaks, and physician-focused materials are disseminated to physicians (TMA can work with stakeholders to encourage information sharing among public health agencies, hospitals, and health care professionals); (4) work with DSHS on reviewing Texas notifiable condition requirements and recommending enhancements to support improved surveillance of pertussis deaths among infants; and (5) advocate for the allocation of additional DSHS resources for Tdap vaccine that will assist local health departments during outbreaks (CM-CID Rep. 1-A-11).