



Policy on Vaccination Programs – With Interim Revisions

Responsible Officer:	Executive Vice President – University of California Health (UC Health)
Responsible Office:	University of California Health (UCH)
Issuance Date:	12/17/2025
Effective Date:	12/17/2025
Scope:	All University of California locations; faculty and other academic appointees, staff, trainees, students, and others accessing University facilities and programs.

For questions regarding individual employee situations and this policy, please contact your [location's applicable office](#). For individual student questions related to the medical aspects of the policy, please contact your campus [Student Health Services](#).

Campus Contact:	UC Emergency Management
Health System Contact:	UC Health
Email:	VaccinePolicyComments@ucop.edu

TABLE OF CONTENTS

I.	POLICY SUMMARY	2
II.	DEFINITIONS	2
III.	POLICY TEXT	7
IV.	COMPLIANCE/RESPONSIBILITIES	9
V.	PROCEDURES	10
VI.	RELATED INFORMATION	10
VII.	FREQUENTLY ASKED QUESTIONS.....	11
VIII.	REVISION HISTORY	13
IX.	APPENDICES AND PROGRAM ATTACHMENTS.....	14
A.	PROGRAM ATTACHMENT #1: SARS-CoV-2 (COVID-19) Vaccination Program	16
B.	PROGRAM ATTACHMENT #2: Seasonal Influenza Vaccination Program...	20

C.	INTERIM PROGRAM ATTACHMENT #3: Measles, Mumps, and Rubella Vaccination Program.....	25
D.	INTERIM PROGRAM ATTACHMENT #4: Meningococcal (Groups A, C, Y, W) Conjugate Vaccination Program.....	33
E.	INTERIM PROGRAM ATTACHMENT #5: Tetanus, Diphtheria, and Pertussis Vaccination Program.....	41
F.	INTERIM PROGRAM ATTACHMENT #6: Varicella Vaccination Program....	49
G.	INTERIM Program Attachment #7: Tuberculosis Screening Program.....	57

I. POLICY SUMMARY

The purpose of this policy is to facilitate protection of the health and safety of the University community, including its patients as well as its Students, Personnel and all others who work, live, and/or learn in any of the University's Locations or otherwise participate in person in University Programs.

The University strongly recommends that all members of the University community follow vaccine recommendations adopted by the California Department of Public Health (CDPH) and/or their local public health authority or department applicable to their age, medical condition, and other relevant indications.

In addition, this policy and its Program Attachments together may provide for Mandate, Opt-Out, and/or Recommended Vaccination Programs. In a Mandate Program, Covered Individuals are required, subject to limited Exceptions and associated Non-Pharmaceutical Interventions, to be Up-To-Date on specified Vaccines as a condition of Physical Presence at any University Location or Program. In an Opt-Out Program, Covered Individuals are required, subject to Non-Pharmaceutical Interventions, to be Up-To-Date on specified Vaccines or to properly decline such Vaccines as a condition of Physical Presence at any University Location or Program. In a Recommended Program, Covered Individuals are not required to follow vaccination recommendations, and do not need to properly decline such Vaccines as a condition of Physical Presence at any University Location or Program. The applicable Program Attachment indicates whether a Vaccine Program is a Mandate, Opt-Out, or Recommended Program.

II. DEFINITIONS

Compliance Date: The deadline for compliance with a Mandate or Opt-Out Vaccination Program, as specified in the applicable Program Attachment. Unless otherwise specified in a Program Attachment, for new employees whose first date of employment is later, the deadline for initial compliance is within 14 days of the first date of employment; for students starting or returning to campus after the Compliance Date, the deadline is the first date of instruction for the term when they first enroll. Student employees are subject to the deadlines applicable to students.

Contraindications and Precautions: A contraindication or precaution to a Vaccine recognized by the U.S Centers for Disease Control and Prevention (CDC), CDPH, or in the

case of internationally administered Vaccines, the World Health Organization (WHO). Contraindications and Precautions are limited and do not include conditions that are unrelated to Vaccines or injectable therapies, such as food, pet, venom, or environmental allergies, or allergies to oral medications.

Covered Individuals: Unless otherwise specified in a Program Attachment, a Covered Individual includes anyone designated as Personnel or Students under this policy who Physically Access a University Facility or Program in connection with their employment, appointment, or education/training. A person exclusively accessing a Healthcare Location as a patient, or an art, athletics, entertainment, or other publicly accessible venue at a Location as a member of the public, is not a Covered Individual.

Covered Non-Affiliates: A Covered Non-Affiliate is a person who Physically Accesses a University Facility or Program as a Non-Affiliate (other than as an “official volunteer”) under the [Regulations Governing Conduct of Non-Affiliates in the Buildings and on the Grounds of the University of California](#). For purposes of this policy, “Covered Non-Affiliates” also includes K-12 students and children enrolled in day care programs and camps sponsored by the University or operated at a University Facility or Location; as well as individuals enrolled in UC extension programs, continuing education, lifelong learning, seminars, workshops, and other non-degree-granting educational programs, professional development, and/or recreational programs. Refer to section III.B of this policy for additional information regarding Covered Non-Affiliates.

Deferral: A temporary delay of vaccination provided for in a Program Attachment based on a reason other than Medical Exemption, Disability, or Religious Objection. In the case of a Vaccine authorized for emergency use or recently approved, a Program Attachment may provide for Deferral based on pregnancy. In the case of a Vaccine for a disease where evidence suggests that contracting the illness or receiving treatment for the disease provides temporary protection, a Program Attachment may provide for Deferral based on recent illness or treatment.

Disability: A physical or mental disorder or condition that limits a major life activity and any other condition recognized as a disability under applicable law. For purposes of this policy, “disability” includes pregnancy, childbirth, or a related medical condition where reasonable accommodation is consistent with applicable law.

Exception: In the context of a Mandate Program, an Exception is an approval issued by an authorized University official, upon request by a Covered Individual, for that Covered Individual to not receive an otherwise required vaccination. Depending on the situation, Exceptions may be premised on Medical Exemption, Disability, and/or Religious Objection. In appropriate circumstances, Deferrals may be approved. In the context of an Opt-Out Program, an Exception may be premised on a Covered Individual’s informed decision to decline Vaccine, with appropriate notification to the Location Vaccine Authority or designee.

Healthcare Location: A collection of buildings and Personnel that serve as an academic health system or student health or counseling center including hospitals, ambulatory surgery centers, outpatient centers, clinics, or other locations where preventive, diagnostic, therapeutic, or other interventional physical or behavioral healthcare services are provided to UC Health patients, students, employees, or research participants and any associated

educational, research, or administrative facilities and offices. A Healthcare Location refers only to that part of a campus that meets this definition.

Local Public Health Authority (Local PHA): With respect to Recommended Programs only, the public health authority or department in the municipality or county where the Covered Individual's University Location or University Program is sited.

Location (or Facility): Any United States campus, medical center, or facility operated by the University in connection with its research, teaching, or public service (including clinical care) missions or programs, including University housing. A Location does not include a University-owned property that is leased to a third party unless (and only to the extent) a University Program occurs at that property.

Location Vaccine Authority (LVA): The office or person responsible for implementing the requirements set forth in a Program Attachment for a Location, typically the Chief Medical Officer or Occupational Health office at a Medical Center or an Occupational Health or Student Health office at an academic campus. The LVA is a health care provider and its records are considered confidential health records for purposes of the University's privacy policies.

Mandate Program: A Vaccination Program that requires Covered Individuals to be Up-To-Date on Vaccines unless they have received a University-approved Exception.

Medical Exemption: An excuse from receiving an otherwise required Vaccine due to a medical Contraindication or Precaution for each Vaccine that would satisfy the vaccination requirement.

Non-Pharmaceutical Intervention (NPI): An action, other than getting vaccinated or taking medicine, that members of the University community can take to help prevent or slow the spread of contagious illnesses. NPIs may include, for example, staying home, especially when a person is sick or when a member of the person's family or household is sick; quarantining when an unvaccinated person has been exposed to someone else with the illness; avoiding large gatherings; physical/social distancing; wearing personal protective equipment or face coverings; frequent handwashing and cleaning; asymptomatic (surveillance) and symptomatic testing; and, in the event of a disease outbreak, exclusion from the Location or site of the outbreak.

Opt-Out Program: A Vaccination Program that requires Covered Individuals to be Up-To-Date on Vaccines or to formally decline vaccination by completing an opt-out form provided by their Location (a "Vaccine Declination Statement") and submitting it to their Location Vaccine Authority on or before the Compliance Date.

Participation: Participation in a Vaccination Program as required by the applicable Program Attachment, which may include providing certification or proof of being Up-To-Date on vaccination or obtaining a University-approved Exception under this policy in a Mandate Program or properly declining vaccination in an Opt-Out Program. Participation in all Mandate or Opt-Out Vaccination Programs applicable to a Covered Individual is a condition of Physical Presence at any University Location or Program as set forth in this policy. Participation compliance may require annual or recurring obligations, such as repeat vaccinations or boosters consistent with U.S. Food and Drug Administration (FDA)-approved labeling and CDPH recommendations.

Personnel: University faculty, other academic appointees, and staff, including but not limited to visiting, volunteer, without salary, and emeritus/a professors, visiting or volunteer academic appointees, contract, recall, and emeritus/a employees. “Personnel” also includes, for purposes of this policy, official volunteers, as defined in the [Regulations Governing Conduct of Non-Affiliates in the Buildings and on the Grounds of the University of California](#), and participants in post-graduate training programs who are not Students.

Physical Access or Physical Presence (or Physically Access/Accessing or Physically Present): Physical presence at a University Location or Program for any work, research, or education/training related purpose (as distinguished from accessing a Healthcare Location as a patient, or an art, athletics, entertainment, or other publicly accessible venue at a Location as a member of the public). Physical presence includes living in housing furnished by the University, using University amenities such as entertainment venues, museums, libraries, workout facilities, or dining halls or food courts in one’s capacity as Personnel or a Student, or participating in person in a University Program even if not occurring at a Location. Access is not defined by reference to any particular frequency (e.g., daily, weekly, monthly, *ad hoc*).

Program Attachment: An attachment as part of this Policy describing a specific Vaccination Program.

Reasonable Accommodation: An adjustment made to the requirements of a Vaccination Program, including an adjustment for a Covered Individual who has received a University-approved Exception to allow them to be Physically Present without impairing the health and safety objectives of this policy. Covered Individuals with Exceptions may be required to observe specified NPIs as a condition of Physical Presence.

Recommended Program: A Vaccination Program that recommends that Covered Individuals follow vaccine recommendations adopted by CDPH and/or the applicable Local PHA. To the extent there is a conflict in the recommendations of these entities, Covered Individuals should refer to the guidance of their LVA. Participation in a Recommended Program is voluntary and does not require vaccination, Exception, or submission of a Vaccine Declination Statement.

Religious Objection: A Covered Individual’s objection to receiving an otherwise required Vaccine based on that person’s sincerely held religious belief, practice, or observance.

Responsible Office: The office at a Location responsible for processing Exceptions.

Student: The term “Student” has the same meaning as defined in the current version of the Policies Applying to Campus Activities, Organizations and Students (PACAOS) Section 14.40: an individual for whom the University maintains student records and who: (a) is enrolled in or registered with an academic program of the University; (b) has completed the immediately preceding term, is not presently enrolled, and is eligible for reenrollment; or (c) is on an approved educational leave or other approved leave status, or is on filing-fee status. For purposes of this policy, the term “Student” also includes visiting students.

Systemwide Vaccine Authority: The Systemwide Vaccine Authority is the Executive Vice President for UC Health or designee. A person is eligible to serve as the Systemwide Vaccine Authority if the person is Board-Certified in the subspecialty of Infectious Disease by an [American Board of Medical Specialties](#) or an [American Osteopathic Association](#)

[Specialty Certifying Board](#) and maintains a faculty appointment that meets all of the good standing criteria established at that UC Location.

University or UC: The University of California.

University Program: A program or activity operated by the University to support the University's teaching or research mission and generally offered exclusively to University Personnel or Students. Examples of covered Programs that may not be conducted at a Location include the [UC Education Abroad Program](#) and University-sponsored athletics programs.

Up-To-Date: A person is Up-To-Date (or Current) when they have received all doses of a Vaccine as recommended by the CDPH. A person need not obtain doses that are authorized but not explicitly recommended by the CDPH in order to be considered Current/Up-To-Date.

Vaccination Program: A Vaccination Program is a Mandate Program, an Opt-Out Program, or a Recommended Program. Depending on program type, a Vaccination Program is either: (i) a set of rules governing Physical Presence at University Locations or in University Programs intended to reduce the incidence of Vaccine-preventable disease, disability, and death in connection with University Facilities or Programs; or (ii) a recommendation regarding vaccination.

Vaccine: A Vaccine satisfies the requirements of this policy if: (i) the FDA has issued a License or an Emergency Use Authorization (EUA) for the vaccine; or (ii) the WHO has approved Emergency Use Listing (EUL) for the vaccine. If approved by LVA and consistent with any applicable public health mandates, a vaccine administered during a clinical trial but not yet approved, licensed, or authorized may also satisfy the requirements of this policy.

Vaccine Education: Vaccine Education is communication of the following information about a Vaccine-preventable illness through any combination of Vaccine Information Statements, other written information, verbal communications, or online or in-person training programs, as required by the LVA.

1. The potential health consequences of Vaccine-preventable illness for Covered Individuals, family members and other contacts, coworkers, patients, and the community;
2. Occupational exposure to Vaccine-preventable disease;
3. The epidemiology and modes of transmission, diagnosis, and NPIs, consistent with the Covered Individual's level of responsibility in preventing Vaccine-preventable infections;
4. The potential benefits of vaccination; and
5. The safety profile and risks of the Vaccine.

Vaccine Information Statement ("VIS"): An information sheet produced by or including information derived from the CDC, CDPH, and/or UC Health or any of its components, explaining in plain language the benefits and risks of a Vaccine to Vaccine recipients. A VIS generally must be provided to an individual being vaccinated prior to each dose of the Vaccine, in a language they understand. For purposes of this policy, a VIS may also include FDA fact sheets for Vaccine recipients and caregivers.

III. POLICY TEXT

This policy supplements, and does not replace, any policies or guidelines requiring University Personnel, Students, patients, and visitors to observe Non-Pharmaceutical Interventions (NPIs).

A. Vaccination Program. Participation in a Recommended Program is voluntary. As a condition of Physical Presence at a Location or in a University Program, all Covered Individuals must Participate in any other applicable Vaccination Program as described in a Program Attachment by—no later than the Compliance Date—providing proof that they are Up-To-Date with Vaccines or submitting a request for Exception in a Mandate Program or properly declining vaccination in an Opt-Out Program. This requirement may be subject to implementation guidelines and any local procedures for enforcement. The availability of alternative remote work arrangements will depend on systemwide guidance and any local policies or procedures, as well as the nature of the work to be performed.

1. Access to Vaccination. All campuses and medical centers must offer any required vaccination on-site or maintain a list of nearby and accessible off-site locations offering vaccination to Covered Individuals during working and non-working hours. This provision is not intended to restrict a Covered Individual's choice of provider, but to maximize their access to vaccination.

2. Proof of Vaccination or Exception

a. Mandate Programs. Covered Individuals must be Up-To-Date on mandated Vaccines or timely secure a University-approved Exception. They also may be required to submit proof or certification of their vaccination or of a University-approved Exception to their Location Vaccine Authority (LVA), if and as specified in a Program Attachment. Proof or certification of vaccination may be subject to audit.

b. Opt-Out Programs. Covered Individuals must be Up-To-Date on Vaccines or receive Vaccine Education and timely complete and submit a Vaccine Declination Statement to their LVA for each applicable Vaccine. They also may be required to submit proof or certification of their vaccination to their LVA, if and as specified in a Program Attachment. Proof or certification of vaccination may be subject to audit.

c. Recommended Programs. No proof of vaccination, Exception, or Vaccine Declination Statement is required.

3. Request for Exception. A Covered Individual seeking an Exception in a Mandate Program must, no later than the relevant Vaccine's Compliance Date, submit their request to the appropriate Responsible Office. While a request is pending and if it is granted, the Covered Individual must, as a condition of Physical Presence, observe any NPIs as defined by the LVA and no less stringent than applicable public health directives. If an Exception is granted, the issuing office must notify the Covered Individual and the LVA of the approval and the associated expiration date, if any. If an Exception request is denied, the Covered Individual will be notified and, thereafter, will be expected to promptly become Up-To-Date or will be denied Physical Presence at the relevant University Location(s) or Program(s).

- 4. Education.** Any Covered Individual in a Mandate Program or an Opt-Out Program who has not provided proof that they are Up-To-Date on all applicable Vaccines by the specified Compliance Date will receive from the LVA or designee Vaccine Education. This educational requirement is not an alternative to required Participation in a Mandate or Opt-Out Vaccination Program as a condition of Physical Presence at a University Location or Program as set forth above. Additional education may be required consistent with applicable federal, state, or local mandates or accreditation standards.
 - 5. Non-Pharmaceutical Interventions (NPIs).** All Covered Individuals must participate in any NPIs as specified by the relevant University Location or Program. In the event of a disease outbreak, Covered Individuals and Covered Non-Affiliates may be excluded from the Location or site of the outbreak based on their vaccination status.
 - 6. Optional Additional Measures.** Covered Individuals may wear health masks regardless of vaccination status consistent with applicable law even if no mask/face covering mandate is in effect.
- B. Covered Non-Affiliates.** Each University Location and Program will define any requirements for public or other Covered Non-Affiliate Physical Presence (for example, at health facilities, entertainment venues, museums, libraries, workout facilities, dining halls and food courts, day care centers, or camps), no less stringent than applicable public health guidance.
- C. Superseding Public Health Directives.** A federal, state, or local public health agency with jurisdiction may impose a more restrictive/protective vaccine and/or NPI requirement that lawfully supersedes this policy. In the event of a perceived conflict between public health requirements and this Policy, [UC Legal](#) should be consulted.
- D. Tracking and Reporting**
- 1. Vaccination Data.** The LVA or designated units may be required to record and track certain information regarding vaccination in a Covered Individual's confidential health record, consistent with University privacy and security policies including [BFB-IS-3](#) (Electronic Information Security Policy) and consistent with University records policies including [BFB-RMP-1](#) (the University Records Management Program). Such information may include, but not be limited to: (i) proof or certification of vaccination; (ii) date(s) of administration and Vaccine type and manufacturer; and (iii) documentation of an Exception (which may include a Vaccine Declination Statement in an Opt-Out Program). Vaccination Program records must be kept confidential and only accessed for Vaccination Program-related purposes. Vaccination Program records must not be stored in an employee's personnel file.
 - 2. Vaccines Administered by the University**
 - a. Registries.** For vaccinations administered by the University in its capacity as health care provider, appropriate information will be submitted to the [California Immunization Registry](#) (CAIR) or such other registries as may be required by applicable public health agencies or University policy. While Vaccine recipients ordinarily are permitted to opt out from registry reporting in California, CDPH may, in some cases, mandate that all participating vaccinators report certain vaccinations.

Accordingly, the typical opt-out option may not apply.

- b. Adverse Events.** Any adverse events associated with a required Vaccine administered at a Location and reported to the University must be tracked and logged by the LVA or designee and reported to federal and state public health officials using the [Vaccine Adverse Event Reporting System \(VAERS\)](#).
- E. Program Evaluation.** Locations are encouraged and, through a Program Attachment may be required, to evaluate Program Participation on an annual and ongoing basis, including evaluation of equity in Program implementation; reasons identified for non-Participation or untimely Participation; the number and population-level characteristics of Covered Individuals who are not vaccinated; and community outcomes.

IV. COMPLIANCE/RESPONSIBILITIES

- A.** CDC and FDA generally translate VIS into many languages commonly spoken in California and elsewhere in the United States and post these online. Whenever the University is administering a Vaccine in its capacity as health care provider, the relevant VIS should be provided to a person receiving Vaccine in a language that they understand. In the unlikely event relevant VIS translations are unavailable, they should be accompanied when distributed with a document with taglines such as those approved by the [U.S. Department of Health & Human Services](#) to facilitate language access by all affected Personnel and Students. Interpreters should also be made available in person, by video, or by phone during Vaccine clinics.
- B.** Each Location is responsible for: (i) assuring any necessary updates are made to its local Infectious Diseases/Infection Prevention and Control Programs; (ii) establishing Compliance Dates on an annual or ongoing basis, in consultation with epidemiology and infection prevention experts and occupational health representatives as applicable and consistent with any supply limitations; and (iii) assuring implementation of each Vaccination Program at all sites.
 - 1. Implementation includes informing Personnel and Students (as well as Covered Non-Affiliates, as applicable) of (i) any Vaccine requirements and associated Compliance Dates; (ii) dates and Locations for on-site administration (if any); and (iii) for required Vaccines, whether vaccination will be provided at no out-of-pocket cost to them if they receive the Vaccine from the University.
 - 2. Each Location should implement reasonable strategies for Vaccine access, including efforts to ensure vaccination availability during all work shifts and to address Vaccine hesitancy, particularly among groups at most significant risk for contracting Vaccine-preventable disease and suffering severe illness.
- C.** The Chancellors, Lawrence Berkeley National Laboratory Director, and the Vice President of Agriculture and Natural Resources (ANR) are responsible for implementing this policy at their respective locations. Deans, Department Chairs, unit heads, managers, supervisors, student affairs leaders, and others with responsibility for personnel or student management will support Vaccination Program implementation and enforcement as applicable. Consultation with Academic Senate leaders, especially on

the campus, is encouraged with respect to implementation procedures for faculty and other academic appointees.

- D. Noncompliance with this policy may result in educational efforts and/or employment consequences up to and including informal counseling, adverse performance evaluations, corrective action and/or discipline, or disciplinary sanctions for students as outlined in PACAOS 105.00.

For policy-covered staff employees, corrective action and/or discipline is governed by Personnel Policies for Staff Members [62 \(Corrective Action\)](#) and [64 \(Termination and Job Abandonment\)](#); Personnel Policies for Staff Members [II-64 \(Termination of Appointment\)](#), which applies to Senior Management Group (SMG) employees; and as applicable, other policies and procedures.

For policy-covered academic appointees, corrective action and/or discipline is governed by [APM – 015 \(The Faculty Code of Conduct\)](#), [APM - 016 \(University Policy on Faculty Conduct and the Administration of Discipline\)](#), [APM - 150 \(Non-Senate Academic Appointees/Corrective Action and Dismissal\)](#), and as applicable, other policies and procedures.

For represented employees, corrective action and/or discipline is governed by the applicable collective bargaining agreement.

For students, disciplinary procedures are governed by PACAOS.

V. PROCEDURES

Implementation guidelines for this policy may be included in the applicable Program Attachment. To facilitate implementation, each Location may establish local procedures consistent with this policy and the applicable Vaccination Program.

VI. RELATED INFORMATION

- [CDC Advisory Committee on Immunization Practices](#)
- [CDC Immunization Schedules](#)
- [Cal. Health & Safety Code Division 2, Chapter 2, Article 3.5](#)
- California Department of Public Health, [Immunization Branch](#)
- California Department of Public Health, [Licensees Authorized to Administer Vaccines in California](#)
- Infectious Disease Society of America, [Guidelines](#)
- American Academy of Pediatrics, [Immunizations](#)
- American College of Physicians, [Adult Immunization Hub](#)
- [American Medical Association, Opinion 8.7, Routine Universal Immunization of Physicians](#)
- University of California [\[Student\] Immunization Policy](#)

VII. FREQUENTLY ASKED QUESTIONS

1. Does this policy require me to be vaccinated to attend school or work for the University?

This policy strongly encourages all members of the University community to follow vaccine recommendations adopted by CDPH and/or the applicable Local PHA. Only Covered Individuals are required to Participate in Mandate and Opt-Out Vaccination Programs. Participation in Recommended Programs is voluntary. (University Locations and Programs will define any requirements for Covered Non-Affiliates.)

For Mandate Programs: Covered Individuals must stay Up-To-Date on any required Vaccines as a condition to Physical Presence at Locations and in University Programs, unless they have been granted an Exception.

For Opt-Out Programs: Covered Individuals must stay Up-To-Date on any specified Vaccines or receive Vaccine Education and submit a Vaccine Declination Statement to the Location Vaccine Authority as a condition to Physical Presence at Locations and in University Programs.

For Recommended Programs: This policy recommends that Covered Individuals follow vaccination recommendations adopted by CDPH and/or the applicable Local PHA. To the extent there is a conflict in recommendations, Covered Individuals should refer to the guidance of their LVA.

Refer to the applicable Program Attachment for information regarding whether that Vaccination Program is a Mandate Program, an Opt-Out Program, or a Recommended Program. Covered Individuals who receive an Exception in a Mandate Program or who opt out in an Opt-Out Program may be subject to special NPIs.

For certain Covered Individuals, such as health care workers, CDPH or local public health orders may be more restrictive than this policy and the applicable Program Attachment. In those cases, the more restrictive public health order will apply in addition to any other requirements under this policy and the applicable Program Attachment.

2. Does this policy apply to union-represented employees?

Yes, in accordance with any applicable collective bargaining requirements.

3. How will I know if my co-workers or fellow Students are going unvaccinated?

You probably won't know. Because vaccination-related information is private and confidential, the University will not disclose Vaccine status of Covered Individuals except on a need-to-know basis; however, third parties and some Locations may distribute badge attachments, stickers, pins, or other indicators that vaccinated individuals may use to show that they have received the Vaccine.

4. I teach both seminar and lecture classes, and as a result am typically exposed to many students. Will I be informed if someone in my class is not vaccinated?

As will be the case in any public setting, you will not be informed of the vaccination status of individual students and should expect that some may not be vaccinated.

5. Will University of California Health specify which authorized or licensed Vaccine is preferred when more than one is available to prevent a Vaccine-preventable disease?

No.

6. Will Locations provide paid time off for non-exempt employees for the time needed to get a Vaccine covered by a Program Attachment?

Yes. Non-exempt employees and hourly academic appointees may take up to four hours of paid time to obtain each dose of Vaccine needed to stay Up-To-Date in a Mandate or Opt-Out Program and to obtain each dose of Vaccine consistent with a Recommended Program. Using this paid time will not deduct from any paid leave accruals or banks, but these employees and academic appointees must provide advance notice to their supervisor.

7. What if I experience flu-like symptoms or other side effects as a result of a Vaccine and I cannot work as scheduled, or attend classes?

Employees should contact their supervisors, local human resources, or academic personnel offices with questions but as a general matter, available sick leave, vacation, and/or PTO may be used to take time off as needed to recover. Students should contact their faculty/instructors regarding minor illnesses or disability services to address any significant issues.

8. Who will pay for the Vaccine?

All the University's health plans cover CDPH-recommended Vaccines administered by an employee's primary care physician or at a local pharmacy consistent with the terms of the applicable health plan. If the University offers required vaccination on-site, generally there will be no out-of-pocket cost for a Covered Individual to receive the required Vaccine on-site. However, Student Health Services (SHS) only bill and collect from UC Student Health Insurance Plan (SHIP) directly. SHS does not bill and collect from other health insurance plans. Covered Individuals with health insurance plans other than UC SHIP who obtain vaccinations at SHS may be required to pay out of pocket for their vaccinations and then submit requests for reimbursement to their health insurance plans.

9. If I have applied for or been granted an Exception in a Mandate Program or if I have opted out of vaccination in an Opt-Out Program, what Non-Pharmaceutical Interventions (NPIs) will I be required to observe?

A Program Attachment may describe any required NPIs. Additional safety measures may be deemed necessary, depending on the circumstances, by local public health, environmental health and safety, occupational health, or infection prevention authorities, including the Location Vaccine Authority. In that case, you will be informed of any additional requirements.

10. I am at high risk for severe illness if I contract a Vaccine-preventable disease (e.g., immunocompromised) and even though I have been vaccinated, I know that no Vaccine is 100% effective. Do I have to come onsite if not everyone is vaccinated? What accommodations will be made for me?

Please contact your local disability services office to discuss your situation and possible accommodations.

11. Will the University accept internationally approved vaccines even if not authorized or approved in the United States?

Yes, if the Vaccine is authorized by the [World Health Organization](#) (WHO). The WHO [has developed a process](#) for assessing and listing unlicensed vaccines, therapeutics, and diagnostics during public health emergencies. Through that process, a number of vaccines not available in the United States have received Emergency Use Listing (EUL). The University will, consistent with CDC and CDPH guidance, accept proof of vaccination with any internationally administered Vaccine that has been authorized for emergency use by WHO through the EUL process.

12. I am fully remote. Am I a Covered Individual?

You are a Covered Individual at the time you are first Physically Present at a University Location or Program other than as a member of the public (or as a Covered Non-Affiliate). Your Location may also treat you as a Covered Individual if you are authorized to be Physically Present in connection with your employment, appointment, or education or training program.

13. Are trainees Covered Individuals under this policy?

Yes, trainees may be Covered Individuals as either Students or Personnel depending on their circumstances.

14. I am a Covered Individual and my University Location or Program is outside of California. For Recommended Vaccination Programs, what vaccine recommendations should I follow?

If you are a Covered Individual and your University Location or Program is outside of California, the University recommends that you follow the vaccination recommendations adopted by the Local PHA in the municipality or county where your University Location or Program is sited. If there are no recommendations, the University recommends that you follow the vaccine recommendations of the CDPH.

For example, if you are located in Washington, D.C. with the UCDC Program, the University recommends that you follow the recommendations of DC Health, or, if there are no recommendations, the recommendations of the CDPH.

VIII. REVISION HISTORY

December 17, 2025: This policy was updated with interim revisions, including technical edits.

- Added Recommended Vaccination Programs.
- Updated language regarding following vaccination recommendations of the California Department of Public Health and/or the Local Public Health Authority.

June 26, 2024:

- Finalized interim revisions and made clarifying edits, including regarding payment for Vaccines.

August 16, 2023: This policy was updated with interim revisions, including clarifying edits.

- Updated language consistent with current public health usage.
- Moved relevant language regarding vaccination data to Policy Text from Program Attachment.
- Addressed noncompliance in Compliance/Responsibilities instead of in Program Attachment and FAQ.

December 12, 2022: This policy was updated with interim amendments. Minor technical edits were also made for clarity.

November 2, 2022: Technical edits to update the contact information.

August 30, 2022: This policy was updated with interim amendments **effective September 1, 2022.**

- Consolidated all existing vaccination requirements other than the [Student Immunization Policy](#).
- Updated language consistent with current public health usage.
- Extended definition of Covered Non-Affiliate to include K-12 students and children enrolled in day care programs and camps sponsored by the University or operated at a University Facility or Location; as well as individuals enrolled in UC extension programs, continuing education, lifelong learning, seminars, workshops, and other non-degree-granting educational programs, professional development, and/or recreational programs.

July 15, 2021: Extended to Students, effective Fall 2021, and vaccine mandated at that time for all groups subject only to limited Exceptions and Deferrals.

January 15, 2021: Extended from UC Health to all Locations.

December 14, 2020: effective - initial issuance.

This Policy is formatted to meet Web Content Accessibility Guidelines (WCAG) 2.0.

IX. APPENDICES AND PROGRAM ATTACHMENTS

A. Appendices

1. [CDPH Immunization Branch](#)
2. [CDC Vaccine Information Statements](#)
3. [Immunize.org Vaccine Information Statements](#)

B. Program Attachments

1. [SARS-CoV-2 \(COVID-19\) Vaccination Program](#) (Recommended Program)

2. [Seasonal Influenza Vaccination Program](#) (Recommended Program for “Covered Individuals” and Opt-Out Program for “Covered Healthcare Individuals” as defined in the Program Attachment)
3. [Measles, Mumps, and Rubella Vaccination Program](#) (Mandatory Program)
4. [Meningococcal \(Groups A, C, Y, W\) Conjugate Vaccination Program](#) (Mandatory Program)
5. [Tetanus, Diphtheria, and Pertussis Vaccination Program](#) (Mandatory Program)
6. [Varicella Vaccination Program](#) (Mandatory Program)
7. [Tuberculosis Screening Program](#) (Mandatory Program)

A. PROGRAM ATTACHMENT #1: SARS-CoV-2 (COVID-19) Vaccination Program

Vaccine(s)	Targeted Disease or Condition
See https://www.fda.gov/emergency-preparedness-and-response/coronavirus-disease-2019-covid-19/covid-19-vaccines#authorized-vaccines for a list of FDA-approved and FDA-authorized vaccines. See https://extranet.who.int/prequal/vaccines/covid-19-vaccines-who-emergency-use-listing for a list of vaccines with WHO Emergency Use Listing.	SARS-CoV-2 (COVID-19)

- I. **Program Type:** ☐ **Mandatory (Subject to Exceptions Marked Below)**
☒ **Recommended** ☐ **Opt-Out**

II. Purpose/Supporting Data:

The purpose of this SARS-CoV-2 (COVID-19) Vaccination Program is to facilitate protection of the health and safety of the University community, including its patients as well as its Students, Personnel, and all others who work, live, and/or learn in any of the University's Locations or otherwise participate in person in University Programs. The University recommends that Covered Individuals follow COVID-19 vaccination recommendations adopted by the California Department of Public Health (CDPH) and/or the applicable Local Public Health Authority (Local PHA).

Refer to Section VII (Related Information) for additional information supporting implementation of this program, which is incorporated into this Program Attachment by reference.

III. Compliance Date: N/A

Some Covered Individuals may be subject to COVID-19 vaccination requirements under applicable law and/or applicable public health directives. In such cases, those vaccination requirements will apply.

IV. Evidence Required: N/A

V. Non-Pharmaceutical Interventions (NPIs):

All members of the Location's community may be required by applicable public health authorities or the LVA in response to a public health emergency or during a localized outbreak to observe special NPIs, including, but not limited to, the following: (i) wearing face-coverings, medical-grade masks, and other protective equipment; (ii) isolation and quarantine; (iii) physical/social distancing; (iv) frequent washing and cleaning; (v) asymptomatic (surveillance/screening) and symptomatic testing; and (vi) in the event of a disease outbreak, exclusion from the Location or site of the outbreak and compliance with the Location's return to work policies and procedures.

VI. Systemwide Implementation Guidelines: ☐ Attached ☒ None

VII. Related Information

- [FDA, COVID-19 Vaccines \(includes fact sheets and translations\)](#)

- [COVID-19 Vaccination Clinical and Professional Resources, CDC](#)
- [Interim Clinical Considerations for Use of COVID-19 Vaccines in the United States](#)
- [CDC Immunization Schedules](#)
- [CDC and Infectious Diseases Society of America, Vaccines & Immunity](#)
- [American Academy of Pediatrics, COVID-19 Vaccines in Infants, Children & Adolescents](#)
- [American College of Obstetricians and Gynecologists, COVID-19 Vaccination Considerations for Obstetric-Gynecologic Care](#)
- [American Society of Transplantation, COVID-19 Resources for Transplant Community](#)
- [Congregation for the Doctrine of the Faith, Note on the Morality of Using Some Anti-COVID-19 Vaccines](#) (December 21, 2020)

VIII. Frequently Asked Questions

1. I am a Covered Individual. How do I know what COVID-19 vaccines are recommended for me?

The California Department of Public Health (CDPH) maintains current guidance on COVID-19 vaccination. You should also refer to any vaccine recommendations of the Local PHA in the municipality or county where your University Location or University Program is sited. To the extent there is a conflict in the recommendations of these entities, UC recommends following the guidance of the LVA. If your University Location or Program is outside of California, please refer to FAQ 14 in Section VII of the Policy.

2. Why did UC change the COVID-19 vaccination program from Opt-Out to Recommended?

The [federal Public Health Emergency](#) ended on May 11, 2023, along with the COVID-19 vaccination requirements for federal employees and federal contractors. [California's COVID-19 State of Emergency ended on February 28, 2023](#), and the [California Department of Public Health rescinded its health care worker vaccination requirement](#) effective April 3, 2023.

With the changes to federal and state public health guidance and widespread participation in the University's COVID-19 Vaccination Program, in August 2023, the University determined that it was appropriate to move to a systemwide opt-out program for all Covered Individuals. The University concluded that the combination of previous COVID-19 vaccination and naturally occurring immunity provides a large majority of the University community with adequate protection to reduce the public health risk faced during earlier stages of the pandemic.

With changes to federal and state public health guidance and current evidence, the University has determined that it is appropriate to move to a systemwide program that recommends COVID-19 vaccination for Covered Individuals. The University will continue to review current evidence and evaluate the need for adjustments to the COVID-19 Vaccination Program accordingly. In the event applicable law or applicable public health orders impose stricter vaccination requirements, the University will

continue to require compliance with those stricter requirements.

3. Will the University's COVID-19 Vaccination Program change?

The University will continue to review current evidence and evaluate the need for adjustments to the COVID-19 Vaccination Program accordingly.

4. Are there any COVID-19 vaccination requirements that apply to me besides the University's COVID-19 Vaccination Program?

Some Covered Individuals might be subject to COVID-19 vaccination requirements under applicable law and/or applicable public health directives. For example, health care workers might be subject to COVID-19 vaccination requirements under CDPH or local public health orders. Covered Individuals subject to COVID-19 vaccination requirements under applicable law and/or applicable public health directives or orders must comply with those requirements. Please contact your Location if you have questions about what COVID-19 vaccination requirements apply to you.

IX. Revision History

December 17, 2025: Updated with interim revisions, including technical edits.

- Amended COVID-19 Vaccination Program from an Opt-Out Program to a Recommended Program, consistent with CDPH guidance, subject to more restrictive requirements under applicable law and/or applicable public health directives. Removed Vaccine Declination Statement and related content.

June 26, 2024:

- Finalized interim revisions and updated model Vaccine Declination Statement.

August 16, 2023 (issued with interim revisions):

- Amended COVID-19 vaccination requirement to permit Covered Individuals to decline COVID-19 vaccination after receiving Vaccine Education, subject to more restrictive federal, state, or local public health requirements. Removed model forms and other content regarding Exception process.
- Updated language consistent with current public health usage, removed outdated content, and made clarifying edits.
- Removed Implementation Guidelines on Exceptions and Employee Compliance, moved relevant language regarding vaccination data to Policy Text, and addressed noncompliance in Compliance/Responsibilities.
- Updated compliance deadlines and removed previous compliance deadlines, including the initial implementation deadline for Fall 2021.
- Authorized Locations to determine any evidence required to prove COVID-19 vaccination, which may include certification or self-attestation.

December 12, 2022:

- Amended booster requirement beginning Fall 2022 to permit eligible Covered Individuals to decline the booster after receiving Vaccine Education, subject to more restrictive federal, state, or local public health requirements.

University of California – Policy on Vaccination Programs – With Interim Revisions

- Authorized Locations (other than Healthcare Locations) to permit self-attestation as evidence of receiving the booster.
- Clarified that booster compliance may be assessed annually between July and December, rather than at the moment an additional dose or booster is recommended.

August 30, 2022:

- Converted from COVID-specific vaccine policy to Program Attachment.
- Amended Program Evaluation requirement to encourage rather than require Healthcare Locations to evaluate Program Participation on an annual and ongoing basis.
- Extended compliance deadline for new employees to permit longer interval period between doses in alignment with the CDC guidance current as of August 30, 2022.

July 15, 2021: Extended COVID-19 vaccine policy to Students, effective Fall 2021, and vaccine mandated at that time for all groups subject only to limited Exceptions and Deferrals.

January 15, 2021: Extended COVID-19 vaccine policy from UC Health to all Locations.

Initial issuance effective: December 14, 2020.

B. PROGRAM ATTACHMENT #2: Seasonal Influenza Vaccination Program

Vaccine(s)	Targeted Disease or Condition
See https://www.cdc.gov/flu/prevent/different-flu-vaccines.htm for details.	Seasonal Influenza

I. Definitions:

For the purposes of this program attachment only, the following special definitions apply.

A “**Covered Healthcare Individual**” includes anyone designated by their Healthcare Location as being subject to that Healthcare Location’s Opt-Out Program.

A “**Covered Individual**” otherwise includes anyone designated as Personnel or Students under this policy who Physically Access a University Facility or Program in connection with their employment, appointment, or education/training and who are not Covered Healthcare Individuals.

A person exclusively accessing a Healthcare Location as a patient, or an art, athletics, entertainment, or other publicly accessible venue at a Location as a member of the public, is not a Covered Individual or a Covered Healthcare Individual.

II. Program Type: ☐ Mandatory (Subject to Exceptions Marked Below)

☒ Recommended (for Covered Individuals) ☒ Opt-Out (for Covered Healthcare Individuals)

III. Purpose/Supporting Data:

According to the California Department of Public Health (CDPH), vaccination against the seasonal respiratory disease influenza or “flu” has long been accepted as a safe and effective way to prevent millions of illnesses and thousands of related doctor and hospital visits every year. In recent years, [flu vaccines have reduced the risk of flu-associated hospitalizations among older adults by about 40% on average](#). A [2018 study](#) showed that from 2012 to 2015, flu vaccination among adults reduced the risk of being admitted to an intensive care unit (ICU) with flu by 82 percent. Flu vaccination has been associated with [lower rates of some cardiac events](#) among people with heart disease, especially among those who had had a cardiac event in the past year. It can mitigate against worsening and hospitalization for flu-related chronic lung disease. It has also been shown in [separate studies](#) to be associated with reduced hospitalizations among people with [diabetes](#) and [chronic lung disease](#). A [2018 study](#) that covered influenza seasons from 2010-2016 showed that getting a flu shot reduced a pregnant woman’s risk of being hospitalized with flu by an average of 40 percent.

Flu vaccination has been shown in several studies to reduce severity of illness in people who become ill after they get vaccinated. For example, a [2017 study](#) showed that flu vaccination reduced deaths, ICU admissions, ICU length of stay, and overall duration of hospitalization among hospitalized flu patients. A [2018 study](#) showed that among adults hospitalized with flu, vaccinated patients were 59 percent less likely to be admitted to the ICU than those who had not been vaccinated. Among adults in the

ICU with flu, vaccinated patients on average spent 4 fewer days in the hospital than those who were not vaccinated. Finally, by getting vaccinated, a person can protect those around them, including those who are more vulnerable to serious flu illness.

With respect to influenza guidance in healthcare settings, CDPH defers to local public health authorities in California.

Refer to Section VII (Related Information) for additional information supporting Implementation of this program, which is incorporated into this Program Attachment by reference.

The University recommends that Covered Individuals follow seasonal influenza vaccination recommendations adopted by CDPH.

For these reasons, Healthcare Locations may implement their own local Opt-Out Programs, consistent with this Policy and Program Attachment and consistent with local public health authority guidance and local needs and may designate the Covered Healthcare Individuals who are subject to that Healthcare Location's Opt-Out Program based upon the role of a Covered Healthcare Individual at the Healthcare Location.

IV. Compliance Date:

Covered Healthcare Individuals: Annually, established by their Healthcare Location to be no later than the deadline set forth by the Local Public Health Authority in the county where the Healthcare Location is sited or no later than December 31 for Healthcare Locations in counties without deadlines.

Covered Individuals: N/A

On or before the Compliance Date, Covered Healthcare Individuals must, as required by their Healthcare Location's Opt-Out Program: (i) receive Vaccine Education concerning influenza and vaccination as a preventive measure; and (ii) receive or affirmatively decline influenza vaccination. Those who choose to decline influenza vaccination must complete a Vaccine Declination Statement provided by their Healthcare Location on or before the Compliance Date. Consistent with their Opt-Out Program, Healthcare Locations may require Covered Healthcare Individuals who are not vaccinated **to** observe additional Non-Pharmaceutical Interventions (NPIs) (e.g., masks or specialized personal protective equipment; routine testing) as directed by the Location Vaccine Authority (LVA) to mitigate risk to members of the University community, patients, and others with whom they interact. Covered Healthcare Individuals who initially decline the influenza Vaccine but later decide to become vaccinated may receive the Vaccine through on-site or off-site providers at any time and may notify the LVA.

Some Covered Healthcare Individuals and Covered Individuals may be subject to more restrictive Seasonal Influenza vaccination requirements under applicable law and/or applicable public health directives. In such cases, those vaccination requirements will apply in addition to any other requirements under this Seasonal Influenza Vaccination Program.

V. Evidence Required:

Covered Healthcare Individuals: To be determined by the LVA.

Covered Individuals: N/A

VI. Non-Pharmaceutical Interventions (NPIs):

All members of the Location's community may be required by applicable public health authorities or the LVA in response to a public health emergency or during a localized outbreak to observe special NPIs, including, but not limited to, the following: (i) wearing face-coverings, medical-grade masks, and other protective equipment; (ii) isolation and quarantine; (iii) physical/social distancing; (iv) frequent washing and cleaning; (v) asymptomatic (surveillance/screening) and symptomatic testing; and (vi) in the event of a disease outbreak, exclusion from the Location or site of the outbreak and compliance with the Location's return to work policies and procedures.

VII. Systemwide Implementation Guidelines: ☐ Attached ☒ None

VIII. Related Information:

- CDC, [Seasonal Influenza Vaccination Resources for Health Professionals](#)
- CDPH, [Influenza \(Flu\), RSV, and Other Respiratory Diseases](#)

IX. Frequently Asked Questions:

1. I am a new University of California employee at a Healthcare Location, and I've been told I'm a Covered Healthcare Individual who must comply with the Seasonal Influenza Vaccination Program. What is my deadline for complying?

Complying with the Seasonal Influenza Vaccination Program as an Opt-Out Program ("Flu Vaccination Program") is a condition of employment. You must provide proof of being current on seasonal influenza vaccination or properly decline such vaccination by no later than the applicable deadline each year, which is established by your Healthcare Location. Your first deadline to comply with the Flu Vaccination Program depends on when your first date of employment is in relation to the flu season.

If your first date of employment is during the flu season before the Compliance Date set by your Healthcare Location, then you must first comply with the Flu Vaccination Program by that Compliance Date. For example, if your first date of employment is October 1, and your Healthcare Location has a Compliance Date of December 31, then you must first comply with the Flu Vaccination Program by December 31 of that year.

- a. If your first date of employment is on or after May 1 (or a different end date set by your Healthcare Location), then you must first comply with the Flu Vaccination Program by your Healthcare Location's Compliance Date for the next flu season. For example, if your first date of employment is May 2 and your Healthcare Location is using May 1 as the end date, then you must first comply with the Flu Vaccination Program by your Healthcare Location's Compliance Date for the following flu season.

- b. If your first date of employment is on or after the Compliance Date at your Healthcare Location but before May 1 (or the different end date set by your Healthcare Location), then you must first comply with the Flu Vaccination Program within 14 calendar days of your first date of employment. For example, if your first date of employment is January 2, then you must first comply with the Flu Vaccination Program by January 16 of that year.

You must then comply with the Flu Vaccination Program annually by the Compliance Date set at your Healthcare Location. Student employees are subject to the deadlines applicable to students.

2. I am an employee who is subject to a Healthcare Location's Opt-Out Program, but I am not working during flu season. Do I still need to comply with the Seasonal Influenza Vaccination Program?

No, but if you must Physically Access the Healthcare Location in your capacity as a Covered Healthcare Individual at any time between your Healthcare Location's Compliance Date and May 1 (or a different end date set by your Healthcare Location), then you must comply.

3. I am a Covered Individual who is not subject to a Healthcare Location's Opt-Out Program. How do I know what Seasonal Influenza vaccines are recommended for me?

The CDPH maintains current guidance on influenza vaccination, but defers to local public health authorities in providing recommendations regarding the influenza vaccination. You should also refer to any vaccine recommendations of the Local PHA in the municipality or county where your University Location or University Program is sited. To the extent there is a conflict in the recommendations of these entities, UC recommends following the guidance of the LVA. If your University Location or Program is outside of California, please refer to FAQ 14 in Section VII of the Policy.

X. Revision History:

December 17, 2025: Updated with interim revisions, including technical edits.

- Amended Seasonal Influenza Vaccination Program from an Opt-Out Program for all Covered Individuals to a Recommended Program for Covered Individuals, subject to more restrictive requirements under applicable law and/or applicable public health directives.
- Authorized Healthcare Locations to implement local Opt-Out Programs for applicable Covered Healthcare Individuals consistent with this Policy and Program Attachment and consistent with local public health authority guidance and local needs, subject to more restrictive requirements under applicable law and/or applicable public health directives.
- Changed annual Compliance Date for Covered Healthcare Individuals from November 1 to the deadline set forth by the applicable local public health authority or December 31 for Healthcare Locations in counties without deadlines.

June 26, 2024:

- Finalized interim revisions and changed influenza Compliance Date from December 1 to November 1, annually.

August 16, 2023 (issued with interim revisions): Updated FAQs for clarity regarding compliance deadlines. Removed outdated content.

August 30, 2022: Executive Order Converted to Program Attachment

October 8, 2021: Executive Order Issued Extending Program to all Campuses

September 29, 2020: Revised July 31, 2020 Executive Order

July 31, 2020: Executive Order Issued Extending Program to all Campuses

First Effective Date: Longstanding at UC Medical Centers

C. **INTERIM PROGRAM ATTACHMENT #3: Measles, Mumps, and Rubella Vaccination Program**

Vaccine(s)	Targeted Disease(s) or Condition(s)
See https://www.fda.gov/vaccines-blood-biologics/vaccines/measles-mumps-and-rubella-virus-vaccine-live for details on the M-M-R II vaccine and https://www.fda.gov/vaccines-blood-biologics/priorix for details on the PRIORIX vaccine.	Measles, Mumps, and Rubella

- I. **Program Type:** ☒ **Mandatory (Subject to Exceptions Marked Below)**
☐ **Recommended** ☐ **Opt-Out**

II. **Purpose/Supporting Data**

The purpose of this Measles, Mumps, and Rubella (MMR) Vaccination Program is to facilitate protection of the health and safety of the University community, including its Students, Personnel, and all others who work, live, and/or learn in any of the University's Locations or otherwise participate in person in University Programs. These three vaccine-preventable illnesses are spread by respiratory transmission, and therefore can pose a risk to other individuals, including Covered Individuals, attending classes, living in residence halls, using other University facilities, or attending University events. The University strongly recommends that all members of the University community immediately obtain the MMR vaccine if they have not already.

This MMR Vaccination Program requires any Covered Individual, as defined in this Program Attachment, subject to limited Exceptions and associated Non-Pharmaceutical Interventions (NPIs), to be Up-To-Date on MMR vaccination, or provide proof of immunity for measles, mumps, and rubella by the Compliance Date specified in this Program Attachment as a condition of Physical Presence at a Location or in a University Program. Covered Individuals subject to additional or more restrictive MMR vaccination requirements under applicable law and/or applicable public health directives must also comply with those requirements.

Student Health Services (SHS) at each campus is responsible for collecting evidence of compliance with this MMR Vaccination Program from Covered Individuals and for evaluating any requests for Exceptions as described in this Program Attachment. SHS must submit compliance data to their campus Registrar's Office, so that these Offices can institute registration holds for any Covered Individual who has not complied with these requirements.

Campus Registrars are responsible for initiating holds that restrict class enrollment and registration for any Covered Individual who has not complied with these requirements. Continued noncompliance with this Program Attachment may result in educational consequences up to and including disciplinary sanctions as outlined in PACAOS 105.00.

Campus IT is responsible for creating and maintaining interfaces between the SHS electronic medical record (EMR) system and the Registrars' system to facilitate

information transfer needed to connect Covered Individuals with the secured data entry set on the EMR, and to place and remove registration holds.

Covered Individuals who are not Up-To-Date must observe any NPIs as directed by the Location Vaccine Authority (LVA) to mitigate risk to members of the University community, patients, and others with whom they may interact. Covered Individuals who initially request an Exception but later decide to become vaccinated may receive the MMR vaccine at any time and may notify the LVA.

Refer to Section X (Related Information) for linked webpages containing additional information that supports implementation of this program, including the applicable public health recommendations, which are incorporated by reference into this Program Attachment, as those may be amended or updated from time to time.

For purposes of this Program Attachment, Covered Individuals include anyone designated as Students under this policy who Physically Access a University Facility or Program in connection with their education/training. Personnel are not Covered Individuals, but Personnel who are also Students are Covered Individuals in their Student role. A person exclusively accessing a Healthcare Location as a patient, or an art, athletics, entertainment, or other publicly accessible venue at a Location as a member of the public, is not a Covered Individual.

III. **Compliance Date**

Locations must implement this MMR Vaccination Program by January 1, 2025.

For Covered Individuals matriculating after Fall 2024, the Compliance Date is the first day of instruction for the term for which they first enroll. Any Covered Individual who has not provided proof of compliance on or before the registration period for their second term of enrollment will not be allowed to register unless and until the Covered Individual complies with the vaccination requirement or is granted an Exception. Locations may specify additional deadlines.

Covered Individuals matriculating Fall 2024 or who matriculated prior to Fall 2024 should consult with their local SHS regarding deadlines and requirements for compliance.

On or before the applicable Compliance Date, Covered Individuals must: (1) provide proof of the MMR vaccination as required to be Up-To-Date; (2) provide proof of immunity; or (3) submit a request for an Exception.

A. Permitted Exceptions (Refer to Model Forms)

☒ *Medical Exemption* (Medical Contraindications or Precautions to each Vaccine that would satisfy the vaccination requirement.)

☒ *Religious Objection* (A Covered Individual's objection to receiving an otherwise required Vaccine based on that person's sincerely held religious belief, practice, or observance.)

☒ *Disability* (A physical or mental disorder or condition that limits a major life activity and any other condition recognized as a disability under applicable law. For purposes of this Vaccination Program, "disability" includes pregnancy, childbirth, or a related medical condition where reasonable accommodation is

consistent with applicable law.)

B. Exception Requests

A Covered Individual seeking an Exception must, no later than the Compliance Date, submit their request to the Medical Director at the SHS on the Covered Individual's home campus. While a request is pending and if it is granted, the Covered Individual must, as a condition of Physical Presence, observe NPIs defined by the LVA no less stringent than applicable public health directives and any University or Location guidelines. If an Exception is granted, the LVA must notify the Covered Individual and SHS of the approval and the associated expiration date, if any. If a request for an Exception is denied, the Covered Individual will be notified and, thereafter, unless the Covered Individual appeals the decision or requests a different Exception, the Covered Individual will be expected to promptly provide proof of MMR vaccination as required to be Up-To-Date or proof of immunity or will be denied Physical Presence at the relevant University Location(s) or Program(s).

A Covered Individual has the right to appeal the denial of their Exception request. The Covered Individual must submit an appeal request, along with the relevant Exception request form to the Medical Director of their campus SHS; the appeal request and the accompanying Exception request form will be reviewed by the LVA, and the LVA will subsequently issue a decision. A Covered Individual who submits an appeal will be allowed to register for classes throughout the academic period in which the appeal is being reviewed, decided, and communicated and may be subject to NPIs during that time. If the LVA denies the Covered Individual's appeal, the Covered Individual will not be allowed to register for classes the following term unless the Covered Individual complies with the vaccination requirement or subsequently requests and is granted a University-approved Exception.

IV. Evidence Required

Covered Individuals must submit proof of vaccination or immunity to measles, mumps, and rubella or of a University-approved Exception to their SHS, by providing either: (i) official documentation issued by a State vaccine registry or an official medical record, or (ii) in the case of one who has received a University-approved Exception, documentation that an Exception has been granted. Proof of immunity and Exceptions may be subject to audit.

All Covered Individuals must enter their vaccination history and/or disease-specific antibody titers directly into their electronic medical record (EMR) via a secure interface on or before the first day of instruction for their first term of enrollment. This is accessed either through a link on the student portal on the campus Registrar's website or directly via the SHS website. Covered Individuals must also submit documentation of vaccinations received, or titers indicating immunity to disease, directly to the SHS via secure document upload, fax, mail, or hand delivery on or before the first day of instruction of their first academic term. Verification of Covered Individual-entered immunization history will be performed on some or all of the self-entered data.

V. Access to Vaccines

Covered Individuals are strongly encouraged to complete MMR vaccination prior to arriving at their campus, and to submit their vaccination history and documentation in advance so they do not experience a delay in registration. Covered Individuals may have the option to obtain the MMR vaccination at the SHS where they are enrolled or at a community pharmacy or clinic.

Vaccination costs are covered by all health insurance plans, as required by the Affordable Care Act. UC Student Health Insurance Plan (SHIP) covers and pays for vaccinations provided at the SHS or at in-network pharmacies or clinics. However, SHS only bills and collects from UC SHIP directly; SHS does not bill and collect from other health insurance plans. Covered Individuals with health insurance plans other than UC SHIP who obtain vaccinations at SHS may be required to pay out-of-pocket for their vaccinations and then submit requests for reimbursement to their health insurance plans. Covered Individuals with health insurance plans other than SHIP may obtain vaccinations from their primary care provider or a community pharmacy to avoid paying for the cost of these vaccinations up front at the SHS.

VI. Non-Pharmaceutical Interventions (NPIs)

Covered Individuals may be required by applicable public health authorities or the LVA in response to a public health emergency or during a localized outbreak to observe NPIs, including, but not limited to, the following: (i) wearing face-coverings, medical-grade masks, and other protective equipment; (ii) isolation and quarantine; (iii) physical/social distancing; (iv) frequent washing and cleaning; and (v) asymptomatic (surveillance/screening) and symptomatic testing.

Covered Individuals who are not Up-To-Date on the MMR vaccination may be subject to NPIs above and beyond those who have demonstrated compliance. In the event of a disease outbreak, Covered Individuals who are not Up-To-Date on the MMR vaccination may be excluded from the Location or site of the outbreak.

VII. Vaccine Education

All Covered Individuals who are not Up-To-Date on the MMR vaccination or who have not provided proof of compliance with this MMR Vaccination Program by the Compliance Date must participate in any Vaccine Education required by the LVA. During a public health emergency or during a localized outbreak, all Covered Individuals may be required to participate in additional systemwide or local Vaccine Education programs. Additional Vaccine Education may be required by the LVA consistent with applicable federal, state, or local laws, regulations, or accreditation standards.

VIII. Systemwide Implementation Guidelines: ☐ Attached ☒ None

IX. Program Evaluation

This MMR Vaccination Program is intended to maintain the MMR vaccination uptake rate among Covered Individuals in order to preserve herd immunity in the University community. In the event that the uptake rate at a particular University Location drops below the recommended level to preserve herd immunity (as dictated by the local public health authority), or as otherwise recommended or required by the local public

health authority in response to a localized outbreak, the University may modify this Program Attachment to protect the health and safety of its Covered Individuals and the University community. Locations are encouraged, but not required, to evaluate Program Participation on an annual and ongoing basis.

X. Related Information

- [CDC, MMR Vaccination: What Everyone Should Know](#)
- [CDC, MMR Vaccine Information Statement](#)
- [CDC Immunization Schedules](#)
- [CDPH, Recommendations for Immunization and Screening Requirements for California Colleges and Universities](#)
- [American College Health Association \(ACHA\) Guidelines: Immunization Recommendations for College Students](#)
- [ACIP Vaccine Recommendations and Guidelines](#)
- [FDA, Vaccination is the Best Protection Against Measles](#)

XI. Frequently Asked Questions

1. How does UC determine which vaccines and screening to require?

The University reviews the recommendations of the California Department of Public Health (CDPH), CDPH's [Recommendations for Immunization and Screening Requirements for California Colleges & Universities](#), the recommendations of the Centers for Disease Control and Prevention (CDC), CDC's Advisory Committee for Immunization Practices (ACIP) [Vaccine Recommendations and Guidelines](#), and the American College Health Association (ACHA) Guidelines: [Immunization Recommendations for College Students](#). However, the University reserves the right to modify these requirements pending revisions to the recommendations by CDPH, ACHA, or ACIP. Additional revisions may be made in response to significant public health events, such as a pandemic or other public health emergency. Please see [UC Immunization Requirements and Recommendations](#) for information on required and recommended vaccines. In general, these requirements pertain to those vaccine-preventable illnesses that can be spread by respiratory secretions (saliva, coughing, sneezing), and pose a risk to others who might become ill due to classroom or residential contact.

Note: Covered Individuals may subject to more restrictive vaccination requirements under applicable law and/or applicable public health directives. In such cases, the more restrictive vaccination requirements will apply in addition to any other requirements under these Vaccination Program Attachments.

2. Why did UC implement the MMR Vaccination Program?

The University's 2016 [Student Immunization Policy](#) was issued in response to an increase in outbreaks of vaccine-preventable illnesses that had occurred on UC campuses and the reemergence of illnesses once thought to have nearly disappeared. In particular, contemporaneous outbreaks of measles had resulted

in hospitalizations, and cases of mumps across the country had threatened the health and fertility of non-immune students. Although the three diseases that are the focus of the MMR vaccine are considered “mild,” they can cause serious illness, lifelong complications, and even death. This Program Attachment incorporates the MMR vaccination requirement from the 2016 Policy as an addendum to the systemwide Policy on Vaccination Programs.

3. What if the required MMR vaccination was not available in my home country before coming to UC?

Please check with your local campus SHS for information regarding the timeline for registration holds if you were not able to meet MMR vaccination requirements before your arrival to UC for this reason.

4. I/my family have concerns regarding the safety of vaccines and have chosen not to be vaccinated. Will I be prevented from attending classes at UC if I do not obtain the required vaccines?

Covered Individuals who have not provided evidence of the required vaccination or immunity to all diseases for which vaccination is required, and who have not received a University-approved Exception, will not be able to register for classes. Locations may impose additional restrictions, so please check with your local campus SHS for more information.

5. I had an allergic reaction to a vaccination. Am I still required to be vaccinated to enter UC?

It is very important that the doctor/nurse practitioner/physician assistant who cared for you at that time document what happened to you when you had the problem with vaccination. If you had a true “allergic reaction,” then SHS will need to know which vaccination caused the problem, and whether you were able to become immune to that illness. You will need to complete a “[Medical Exemption Request Form](#),” and submit it to the Medical Director at your campus SHS.

6. What is the process for requesting an Exception?

Covered Individuals with a medical condition that prevents them from being safely vaccinated may apply for a Medical Exemption by having a licensed, treating medical provider [specifically a physician (MD or DO), nurse practitioner (NP), or physician assistant (PA)] complete the University’s [Medical Exemption Request Form](#). Covered Individuals must then submit the completed form to the Medical Director at the SHS on their home campus. Requests that specify a contraindication or precaution to a Vaccine recognized by the CDC, CDPH, or in the case of internationally administered Vaccines, the World Health Organization, and that indicate the specific nature and probable duration of the medical condition or circumstances that contraindicate immunization with the vaccine(s) will meet criteria for approval. Medical Exemption requests outside of these categories will be denied.

Covered Individuals should use the Disability Exception Request Form to request an exception based on that Covered Individual’s disability or disabilities, and then submit the completed form to the Medical Director at the SHS on their home

campus.

Likewise, Covered Individuals should use the Religious Exception Request Form to request an Exception based on Religious Objection, and then submit the completed form to the Medical Director at the SHS on their home campus.

7. My Exception Request was denied. Can I appeal that decision?

If your request for an Exception is denied, you have a right to appeal the decision to the LVA by submitting an appeal request, along with the relevant Exception Request Form, to the Medical Director of your campus SHS. Covered Individuals who have submitted appeals will be able to attend courses during the quarter/semester that their appeals are undergoing review and may be subject to additional NPIs.

8. Will I be able to get the vaccines I need from Student Health Services on my campus?

Covered Individuals are *strongly encouraged* to complete all necessary vaccinations and/or testing prior to arriving at their campus, and to submit their vaccination history and documentation in advance to minimize the chance that they will experience a delay in registration if vaccination requirements have not already been met. Where necessary, Covered Individuals may alternatively request the necessary vaccinations at the SHS where they are enrolled. While all of the campus Student Health Services stock and administer the required vaccinations, the University strongly encourages you to receive these vaccines *before* arriving at UC. Covered Individuals should be prepared to request these vaccines from retail pharmacies or community medical providers.

9. I don't have the SHIP or UC SHIP Insurance Plan, and didn't get my vaccinations or testing done by my regular medical provider at home – how can I request that my outside insurance cover some or all of the costs to get vaccinations or testing done at SHS?

Vaccination costs are covered by all health insurance plans, as required by the Affordable Care Act. However, currently, the campus SHS centers do not bill insurance plans other than their respective Student Health Insurance Plans (SHIP or UC SHIP) available on your campus - which means you would need to pay out-of-pocket for these immunizations. If you do not have SHIP or UC SHIP and decide to obtain vaccinations at the SHS on your campus, SHS will provide you with an itemized list of charges for you to send to your insurance company to request reimbursement. While many insurance companies will retroactively reimburse their members for services already obtained, some require prior authorization. If you do not have SHIP or UC SHIP it is important for you to check with your insurance company before receiving services at SHS to verify your coverage.

Alternatively, Covered Individuals without SHIP insurance plans may obtain vaccinations from their primary care provider in order to avoid paying the full cost for these vaccinations or tests at the SHS.

XII. Model Forms and Exhibits

[University of California Religious Exception Request Form](#)

[University of California Disability Exception Request Form](#)

XIII. Revision History

December 17, 2025: Technical revisions.

September 27, 2024: Technical revisions to revise hyperlinks and clarify FAQ #1.

June 26, 2024: Initial issuance of Interim Program Attachment requiring Locations to implement this MMR Vaccination Program by January 1, 2025.

D. INTERIM PROGRAM ATTACHMENT #4: Meningococcal (Groups A, C, Y, W) Conjugate Vaccination Program

Vaccine(s)	Targeted Disease(s) or Condition(s)
See https://www.fda.gov/vaccines-blood-biologics/vaccines/menactra for details on the Menactra vaccine, https://www.fda.gov/vaccines-blood-biologics/vaccines/menveo for details on the Menveo vaccine, and https://www.fda.gov/vaccines-blood-biologics/menquadfi for details on the MenQuadfi vaccine.	Meningococcal (Groups A, C, Y, W) Conjugate (MenACWY)

- I. **Program Type:** ☒ **Mandatory (Subject to Exceptions Marked Below)**
☐ **Recommended** ☐ **Opt-Out**

II. Purpose/Supporting Data

The purpose of this Meningococcal (Groups A, C, Y, W) Conjugate (MenACWY) Vaccination Program is to facilitate protection of the health and safety of the University community, including its Students, Personnel, and all others who work, live, and/or learn in any of the University's Locations or otherwise participate in person in University Programs. These vaccine-preventable illnesses are spread by respiratory transmission, and therefore can pose a risk to other individuals, including Covered Individuals, attending classes, living in residence halls, using other University facilities, or attending University events. The University strongly recommends that all members of the University community immediately obtain the MenACWY vaccine if they have not already.

This MenACWY Vaccination Program requires any Covered Individual, as defined in this Program Attachment, subject to limited Exceptions and associated Non-Pharmaceutical Interventions (NPIs), to be Up-To-Date on MenACWY vaccination, or provide proof of immunity for meningococcal groups A, C, Y, and W by the Compliance Date specified in this Program Attachment as a condition of Physical Presence at a Location or in a University Program. Covered Individuals subject to additional or more restrictive MenACWY vaccination requirements under applicable law and/or applicable public health directives must also comply with those requirements.

Student Health Services (SHS) at each campus is responsible for collecting evidence of compliance with this MenACWY Vaccination Program from Covered Individuals and for evaluating any requests for Exceptions as described in this Program Attachment. SHS must submit compliance data to their campus Registrar's Office, so that these Offices can institute registration holds for any Covered Individual who has not complied with these requirements.

Campus Registrars are responsible for initiating holds that restrict class enrollment and registration for any Covered Individual who has not complied with these requirements. Continued noncompliance with this Program Attachment may result in educational consequences up to and including disciplinary sanctions as outlined in PACAOS 105.00.

Campus IT is responsible for creating and maintaining interfaces between the SHS electronic medical record (EMR) system and the Registrars' system to facilitate information transfer needed to connect Covered Individuals with the secured data entry set on the EMR, and to place and remove registration holds.

Covered Individuals who are not Up-To-Date must observe any NPIs as directed by the Location Vaccine Authority (LVA) to mitigate risk to members of the University community, patients, and others with whom they may interact. Covered Individuals who initially request an Exception but later decide to become vaccinated may receive the MenACWY vaccine at any time and may notify the LVA.

Refer to Section X (Related Information) for linked webpages containing additional information that supports implementation of this program, including the applicable public health recommendations, which are incorporated by reference into this Program Attachment, as those may be amended or updated from time to time.

For purposes of this Program Attachment, Covered Individuals include anyone designated as Students under this policy who Physically Access a University Facility or Program in connection with their education/training. Personnel are not Covered Individuals, but Personnel who are also Students are Covered Individuals in their Student role. A person exclusively accessing a Healthcare Location as a patient, or an art, athletics, entertainment, or other publicly accessible venue at a Location as a member of the public, is not a Covered Individual.

III. Compliance Date

Locations must implement this MenACWY Vaccination Program by January 1, 2025.

For Covered Individuals matriculating after Fall 2024, the Compliance Date is the first day of instruction for the term for which they first enroll. Any Covered Individual who has not provided proof of compliance on or before the registration period for their second term of enrollment will not be allowed to register unless and until the Covered Individual complies with the vaccination requirement or is granted an Exception. Locations may specify additional deadlines.

Covered Individuals matriculating Fall 2024 or who matriculated prior to Fall 2024 should consult with their local SHS regarding deadlines and requirements for compliance.

On or before the applicable Compliance Date, Covered Individuals must: (1) provide proof of the MenACWY vaccination as required to be Up-To-Date; (2) provide proof of immunity; or (3) submit a request for an Exception.

A. Permitted Exceptions (Refer to Model Forms)

☒ *Medical Exemption* (Medical Contraindications or Precautions to each Vaccine that would satisfy the vaccination requirement.)

☒ *Religious Objection* (A Covered Individual's objection to receiving an otherwise required Vaccine based on that person's sincerely held religious belief, practice, or observance.)

☒ *Disability* (A physical or mental disorder or condition that limits a major life activity and any other condition recognized as a disability under applicable law.)

For the purposes of this Vaccination Program, “disability” includes pregnancy, childbirth, or a related medical condition where reasonable accommodation is consistent with applicable law.)

B. Exception Requests

A Covered Individual seeking an Exception must, no later than the Compliance Date, submit their request to the Medical Director at the SHS on the Covered Individual’s home campus. While a request is pending and if it is granted, the Covered Individual must, as a condition of Physical Presence, observe NPIs defined by the LVA no less stringent than applicable public health directives and any University or Location guidelines. If an Exception is granted, the LVA must notify the Covered Individual and SHS of the approval and the associated expiration date, if any. If a request for an Exception is denied, the Covered Individual will be notified and, thereafter, unless the Covered Individual appeals the decision or requests a different Exception, the Covered Individual will be expected to promptly provide proof of MenACWY vaccination as required to be Up-To-Date or proof of immunity or will be denied Physical Presence at the relevant University Location(s) or Program(s).

A Covered Individual has the right to appeal the denial of their Exception request. The Covered Individual must submit an appeal request, along with the relevant Exception request form to the Medical Director of their campus SHS; the appeal request and the accompanying Exception request form will be reviewed by the LVA, and the LVA will subsequently issue a decision. A Covered Individual who submits an appeal will be allowed to register for classes throughout the academic period in which the appeal is being reviewed, decided, and communicated and may be subject to NPIs during that time. If the LVA denies the Covered Individual’s appeal, the Covered Individual will not be allowed to register for classes the following term unless the Covered Individual complies with the vaccination requirement or subsequently requests and is granted a University-approved Exception.

IV. Evidence Required

Covered Individuals must submit proof of vaccination or immunity to meningococcal groups A, C, Y, and W or of a University-approved Exception to their SHS, by providing either: (i) official documentation issued by a State vaccine registry or an official medical record, or (ii) in the case of one who has received a University-approved Exception, documentation that an Exception has been granted. Proof of immunity and Exceptions may be subject to audit.

All Covered Individuals must enter their vaccination history and/or disease-specific antibody titers directly into their electronic medical record (EMR) via a secure interface on or before the first day of instruction for their first term of enrollment. This is accessed either through a link on the student portal on the campus Registrar’s website or directly via the SHS website. Covered Individuals must also submit documentation of vaccinations received, or titers indicating immunity to disease, directly to the SHS via secure document upload, fax, mail, or hand delivery on or before the first day of instruction of their first academic term. Verification of Covered

Individual-entered immunization history will be performed on some or all of the self-entered data.

V. Access to Vaccines

Covered Individuals are strongly encouraged to complete MenACWY vaccination prior to arriving at their campus, and to submit their vaccination history and documentation in advance so they do not experience a delay in registration. Covered Individuals may have the option to obtain the MenACWY vaccination at the SHS where they are enrolled or at a community pharmacy or clinic.

Vaccination costs are covered by all health insurance plans, as required by the Affordable Care Act. UC Student Health Insurance Plan (SHIP) covers and pays for vaccinations provided at the SHS or at in-network pharmacies or clinics. However, SHS only bills and collects from UC SHIP directly; SHS does not bill and collect from other health insurance plans. Covered Individuals with health insurance plans other than UC SHIP who obtain vaccinations at SHS may be required to pay out-of-pocket for their vaccinations and then submit requests for reimbursement to their health insurance plans. Covered Individuals with health insurance plans other than SHIP may obtain vaccinations from their primary care provider or a community pharmacy to avoid paying for the cost of these vaccinations up front at the SHS.

VI. Non-Pharmaceutical Interventions (NPIs)

Covered Individuals may be required by applicable public health authorities or the LVA in response to a public health emergency or during a localized outbreak to observe NPIs, including, but not limited to, the following: (i) wearing face-coverings, medical-grade masks, and other protective equipment; (ii) isolation and quarantine; (iii) physical/social distancing; (iv) frequent washing and cleaning; and (v) asymptomatic (surveillance/screening) and symptomatic testing.

Covered Individuals who are not Up-To-Date on the MenACWY vaccination may be subject to NPIs above and beyond those who have demonstrated compliance. In the event of a disease outbreak, Covered Individuals who are not Up-To-Date on the MenACWY vaccination may be excluded from the Location or site of the outbreak.

VII. Vaccine Education

All Covered Individuals who are not Up-To-Date on the MenACWY vaccination or who have not provided proof of compliance with this MenACWY Vaccination Program by the Compliance Date must participate in any Vaccine Education required by the LVA. During a public health emergency or during a localized outbreak, all Covered Individuals may be required to participate in additional systemwide or local Vaccine Education programs. Additional Vaccine Education may be required by the LVA consistent with applicable federal, state, or local laws, regulations, or accreditation standards.

VIII. Systemwide Implementation Guidelines: ☐ Attached ☒ None

IX. Program Evaluation

This MenACWY Vaccination Program is intended to maintain the MenACWY vaccination uptake rate among Covered Individuals in order to preserve herd

immunity in the University community. In the event that the uptake rate at a particular University Location drops below the recommended level to preserve herd immunity (as dictated by the local public health authority), or as otherwise recommended or required by the local public health authority in response to a localized outbreak, the University may modify this Program Attachment to protect the health and safety of its Covered Individuals and the University community. Locations are encouraged, but not required, to evaluate Program Participation on an annual and ongoing basis.

X. Related Information

- [CDC, Meningococcal Vaccination](#)
- [CDC, Meningococcal ACWY Vaccine Information Statement](#)
- [CDC Immunization Schedules](#)
- [CDPH, Recommendations for Immunization and Screening Requirements for California Colleges and Universities](#)
- [American College Health Association \(ACHA\) Guidelines: Immunization Recommendations for College Students](#)
- [ACIP Vaccine Recommendations and Guidelines](#)

XI. Frequently Asked Questions

1. How does UC determine which vaccines and screening to require?

The University reviews the recommendations of the California Department of Public Health (CDPH), CDPH's [Recommendations for Immunization and Screening Requirements for California Colleges & Universities](#), the recommendations of the Centers for Disease Control and Prevention (CDC), CDC's Advisory Committee for Immunization Practices (ACIP) [Vaccine Recommendations and Guidelines](#), and the American College Health Association (ACHA) Guidelines: [Immunization Recommendations for College Students](#). However, the University reserves the right to modify these requirements pending revisions to the recommendations by CDPH, ACHA, or ACIP. Additional revisions may be made in response to significant public health events, such as a pandemic or other public health emergency. Please see [UC Immunization Requirements and Recommendations](#) for information on required and recommended vaccines. In general, these requirements pertain to those vaccine-preventable illnesses that can be spread by respiratory secretions (saliva, coughing, sneezing), and pose a risk to others who might become ill due to classroom or residential contact.

Note: Covered Individuals may subject to more restrictive vaccination requirements under applicable law and/or applicable public health directives. In such cases, the more restrictive vaccination requirements will apply in addition to any other requirements under these Vaccination Program Attachments.

2. Why did UC implement the MenACWY Vaccination Program?

The University's 2016 [Student Immunization Policy](#) was issued in response to an

increase in outbreaks of vaccine–preventable illnesses that had occurred on UC campuses and the reemergence of illnesses once thought to have nearly disappeared. The meningococcal diseases that are the focus of the MenACWY vaccine can cause serious illness, lifelong complications, and even death. This Program Attachment incorporates the MenACWY vaccination requirement from the 2016 Policy as an addendum to the systemwide Policy on Vaccination Programs.

3. What if the required MenACWY vaccination was not available in my home country before coming to UC?

Please check with your local campus SHS for information regarding the timeline for registration holds if you were not able to meet MenACWY vaccination requirements before your arrival to UC for this reason.

4. I/my family have concerns regarding the safety of vaccines and have chosen not to be vaccinated. Will I be prevented from attending classes at UC if I do not obtain the required vaccines?

Covered Individuals who have not provided evidence of the required vaccination or immunity to all diseases for which vaccination is required, and who have not received a University-approved Exception, will not be able to register for classes. Locations may impose additional restrictions, so please check with your local campus SHS for more information.

5. I had an allergic reaction to a vaccination. Am I still required to be vaccinated to enter UC?

It is very important that the doctor/nurse practitioner/physician assistant who cared for you at that time document what happened to you when you had the problem with vaccination. If you had a true “allergic reaction,” then SHS will need to know which vaccination caused the problem, and whether you were able to become immune to that illness. You will need to complete a “[Medical Exemption Request Form](#),” and submit it to the Medical Director at your campus SHS.

6. What is the process for requesting an Exception?

Covered Individuals with a medical condition that prevents them from being safely vaccinated may apply for a Medical Exemption by having a licensed, treating medical provider [specifically a physician (MD or DO), nurse practitioner (NP), or physician assistant (PA)] complete the University’s Medical Exemption Request Form. Covered Individuals must then submit the completed form to the Medical Director at the SHS on their home campus. Requests that specify a contraindication or precaution to a Vaccine recognized by the CDC, CDPH, or in the case of internationally administered Vaccines, the World Health Organization, and that indicate the specific nature and probable duration of the medical condition or circumstances that contraindicate immunization with the vaccine(s) will meet criteria for approval. Medical Exemption requests outside of these categories will be denied.

Covered Individuals should use the Disability Exception Request Form to request an exception based on that Covered Individual’s disability or disabilities, and then

submit the completed form to the Medical Director at the SHS on their home campus.

Likewise, Covered Individuals should use the Religious Exception Request Form to request an Exception based on Religious Objection, and then submit the completed form to the Medical Director at the SHS on their home campus.

7. My Exception Request was denied. Can I appeal that decision?

If your request for an Exception is denied, you have a right to appeal the decision to the LVA by submitting an appeal request, along with the relevant Exception Request Form, to the Medical Director of your campus SHS. Covered Individuals who have submitted appeals will be able to attend courses during the quarter/semester that their appeals are undergoing review and may be subject to additional NPIs.

8. Will I be able to get the vaccines I need from Student Health Services on my campus?

Covered Individuals are *strongly encouraged* to complete all necessary vaccinations and/or testing prior to arriving at their campus, and to submit their vaccination history and documentation in advance to minimize the chance that they will experience a delay in registration if vaccination requirements have not already been met. Where necessary, Covered Individuals may alternatively request the necessary vaccinations at the SHS where they are enrolled. While all of the campus Student Health Services stock and administer the required vaccinations, the University strongly encourages you to receive these vaccines *before* arriving at UC. Covered Individuals should be prepared to request these vaccines from retail pharmacies or community medical providers.

9. I don't have the SHIP or UC SHIP Insurance Plan, and didn't get my vaccinations or testing done by my regular medical provider at home – how can I request that my outside insurance cover some or all of the costs to get vaccinations or testing done at SHS?

Vaccination costs are covered by all health insurance plans, as required by the Affordable Care Act. However, currently, the campus SHS centers do not bill insurance plans other than their respective Student Health Insurance Plans (SHIP or UC SHIP) available on your campus - which means you would need to pay out-of-pocket for these immunizations. If you do not have SHIP or UC SHIP and decide to obtain vaccinations at the SHS on your campus, SHS will provide you with an itemized list of charges for you to send to your insurance company to request reimbursement. While many insurance companies will retroactively reimburse their members for services already obtained, some require prior authorization. If you do not have SHIP or UC SHIP it is important for you to check with your insurance company before receiving services at SHS to verify your coverage.

Alternatively, Covered Individuals without SHIP insurance plans may obtain vaccinations from their primary care provider in order to avoid paying the full cost for these vaccinations or tests at the SHS.

XII. Model Forms and Exhibits

[University of California Religious Exception Request Form](#)

[University of California Disability Exception Request Form](#)

XIII. Revision History

December 17, 2025: Technical revisions.

September 27, 2024: Technical revisions to revise hyperlinks and clarify FAQ #1.

June 26, 2024: Initial issuance of Interim Program Attachment requiring Locations to implement this MenACWY Vaccination Program by January 1, 2025.

E. **INTERIM PROGRAM ATTACHMENT #5: Tetanus, Diphtheria, and Pertussis Vaccination Program**

Vaccine(s)	Targeted Disease(s) or Condition(s)
See https://www.fda.gov/vaccines-blood-biologics/vaccines/adacel for details on the Adacel vaccine and https://www.fda.gov/vaccines-blood-biologics/vaccines/boostrix for details on the Boostrix vaccine.	Tetanus, Diphtheria, and Pertussis

- I. **Program Type:** ☒ **Mandatory (Subject to Exceptions Marked Below)**
☐ **Recommended** ☐ **Opt-Out**

II. **Purpose/Supporting Data**

The purpose of this Tetanus, Diphtheria, and Pertussis (Tdap) Vaccination Program is to facilitate protection of the health and safety of the University community, including its Students, Personnel, and all others who work, live, and/or learn in any of the University's Locations or otherwise participate in person in University Programs. Two of these three vaccine-preventable illnesses are spread by respiratory transmission, and therefore can pose a risk to other individuals, including Covered Individuals, attending classes, living in residence halls, using other University facilities, or attending University events. The University strongly recommends that all members of the University community immediately obtain the Tdap vaccine if they have not already.

This Tdap Vaccination Program requires any Covered Individual, as defined in this Program Attachment, subject to limited Exceptions and associated Non-Pharmaceutical Interventions (NPIs), to be Up-To-Date on Tdap vaccination, or provide proof of immunity for tetanus, diphtheria, and pertussis by the Compliance Date specified in this Program Attachment as a condition of Physical Presence at a Location or in a University Program. Covered Individuals subject to additional or more restrictive Tdap vaccination requirements under applicable law and/or applicable public health directives must also comply with those requirements.

Student Health Services (SHS) at each campus is responsible for collecting evidence of compliance with this Tdap Vaccination Program from Covered Individuals and for evaluating any requests for Exceptions as described in this Program Attachment. SHS must submit compliance data to their campus Registrar's Office, so that these Offices can institute registration holds for any Covered Individual who has not complied with these requirements.

Campus Registrars are responsible for initiating holds that restrict class enrollment and registration for any Covered Individual who has not complied with these requirements. Continued noncompliance with this Program Attachment may result in educational consequences up to and including disciplinary sanctions as outlined in PACAOS 105.00.

Campus IT is responsible for creating and maintaining interfaces between the SHS electronic medical record (EMR) system and the Registrars' system to facilitate information transfer needed to connect Covered Individuals with the secured data entry set on the EMR, and to place and remove registration holds.

Covered Individuals who are not Up-To-Date must observe any NPIs as directed by the Location Vaccine Authority (LVA) to mitigate risk to members of the University community, patients, and others with whom they may interact. Covered Individuals who initially request an Exception but later decide to become vaccinated may receive the Tdap vaccine at any time and may notify the LVA.

Refer to Section X (Related Information) for linked webpages containing additional information that supports implementation of this program, including the applicable public health recommendations, which are incorporated by reference into this Program Attachment, as those may be amended or updated from time to time.

For purposes of this Program Attachment, Covered Individuals include anyone designated as Students under this policy who Physically Access a University Facility or Program in connection with their education/training. Personnel are not Covered Individuals, but Personnel who are also Students are Covered Individuals in their Student role. A person exclusively accessing a Healthcare Location as a patient, or an art, athletics, entertainment, or other publicly accessible venue at a Location as a member of the public, is not a Covered Individual.

III. Compliance Date

Locations must implement this Tdap Vaccination Program by January 1, 2025.

For Covered Individuals matriculating after Fall 2024, the Compliance Date is the first day of instruction for the term for which they first enroll. Any Covered Individual who has not provided proof of compliance on or before the registration period for their second term of enrollment will not be allowed to register unless and until the Covered Individual complies with the vaccination requirement or is granted an Exception. Locations may specify additional deadlines.

Covered Individuals matriculating Fall 2024 or who matriculated prior to Fall 2024 should consult with their local SHS regarding deadlines and requirements for compliance.

On or before the applicable Compliance Date, Covered Individuals must: (1) provide proof of the Tdap vaccination as required to be Up-To-Date; (2) provide proof of immunity; or (3) submit a request for an Exception.

A. Permitted Exceptions (Refer to Model Forms)

☒ *Medical Exemption* (Medical Contraindications or Precautions to each Vaccine that would satisfy the vaccination requirement.)

☒ *Religious Objection* (A Covered Individual's objection to receiving an otherwise required Vaccine based on that person's sincerely held religious belief, practice, or observance.)

☒ *Disability* (A physical or mental disorder or condition that limits a major life activity and any other condition recognized as a disability under applicable law. For purposes of this Vaccination Program, "disability" includes pregnancy, childbirth, or a related medical condition where reasonable accommodation is consistent with applicable law.)

B. Exception Requests

A Covered Individual seeking an Exception must, no later than the Compliance Date, submit their request to the Medical Director at the SHS on the Covered Individual's home campus. While a request is pending and if it is granted, the Covered Individual must, as a condition of Physical Presence, observe NPIs defined by the LVA no less stringent than applicable public health directives and any University or Location guidelines. If an Exception is granted, the LVA must notify the Covered Individual and SHS of the approval and the associated expiration date, if any. If a request for an Exception is denied, the Covered Individual will be notified and, thereafter, unless the Covered Individual appeals the decision or requests a different Exception, the Covered Individual will be expected to promptly provide proof of Tdap vaccination as required to be Up-To-Date or proof of immunity or will be denied Physical Presence at the relevant University Location(s) or Program(s).

A Covered Individual has the right to appeal the denial of their Exception request. The Covered Individual must submit an appeal request, along with the relevant Exception request form to the Medical Director of their campus SHS; the appeal request and the accompanying Exception request form will be reviewed by the LVA, and the LVA will subsequently issue a decision. A Covered Individual who submits an appeal will be allowed to register for classes throughout the academic period in which the appeal is being reviewed, decided, and communicated and may be subject to NPIs during that time. If the LVA denies the Covered Individual's appeal, the Covered Individual will not be allowed to register for classes the following term unless the Covered Individual complies with the vaccination requirement or subsequently requests and is granted a University-approved Exception.

IV. Evidence Required

Covered Individuals must submit proof of vaccination or immunity to tetanus, diphtheria, and pertussis or of a University-approved Exception to their SHS, by providing either: (i) official documentation issued by a State vaccine registry or an official medical record, or (ii) in the case of one who has received a University-approved Exception, documentation that an Exception has been granted. Proof of immunity and Exceptions may be subject to audit.

All Covered Individuals must enter their vaccination history and/or disease-specific antibody titers directly into their electronic medical record (EMR) via a secure interface on or before the first day of instruction for their first term of enrollment. This is accessed either through a link on the student portal on the campus Registrar's website or directly via the SHS website. Covered Individuals must also submit documentation of vaccinations received, or titers indicating immunity to disease, directly to the SHS via secure document upload, fax, mail, or hand delivery on or before the first day of instruction of their first academic term. Verification of Covered Individual-entered immunization history will be performed on some or all of the self-entered data.

V. Access to Vaccines

Covered Individuals are strongly encouraged to complete Tdap vaccination prior to arriving at their campus, and to submit their vaccination history and documentation in advance so they do not experience a delay in registration. Covered Individuals may have the option to obtain the Tdap vaccination at the SHS where they are enrolled or at a community pharmacy or clinic.

Vaccination costs are covered by all health insurance plans, as required by the Affordable Care Act. UC Student Health Insurance Plan (SHIP) covers and pays for vaccinations provided at the SHS or at in-network pharmacies or clinics. However, SHS only bills and collects from UC SHIP directly; SHS does not bill and collect from other health insurance plans. Covered Individuals with health insurance plans other than UC SHIP who obtain vaccinations at SHS may be required to pay out-of-pocket for their vaccinations and then submit requests for reimbursement to their health insurance plans. Covered Individuals with health insurance plans other than SHIP may obtain vaccinations from their primary care provider or a community pharmacy to avoid paying for the cost of these vaccinations up front at the SHS.

VI. Non-Pharmaceutical Interventions (NPIs)

Covered Individuals may be required by applicable public health authorities or the LVA in response to a public health emergency or during a localized outbreak to observe NPIs, including, but not limited to, the following: (i) wearing face-coverings, medical-grade masks, and other protective equipment; (ii) isolation and quarantine; (iii) physical/social distancing; (iv) frequent washing and cleaning; and (v) asymptomatic (surveillance/screening) and symptomatic testing.

Covered Individuals who are not Up-To-Date on the Tdap vaccination may be subject to NPIs above and beyond those who have demonstrated compliance. In the event of a disease outbreak, Covered Individuals who are not Up-To-Date on the Tdap vaccination may be excluded from the Location or site of the outbreak.

VII. Vaccine Education

All Covered Individuals who are not Up-To-Date on the Tdap vaccination or who have not provided proof of compliance with this Tdap Vaccination Program by the Compliance Date must participate in any Vaccine Education required by the LVA. During a public health emergency or during a localized outbreak, all Covered Individuals may be required to participate in additional systemwide or local Vaccine Education programs. Additional Vaccine Education may be required by the LVA consistent with applicable federal, state, or local laws, regulations, or accreditation standards.

VIII. Systemwide Implementation Guidelines: ☐ Attached ☒ None

IX. Program Evaluation

This Tdap Vaccination Program is intended to maintain the Tdap vaccination uptake rate among Covered Individuals in order to preserve herd immunity in the University community. In the event that the uptake rate at a particular University Location drops below the recommended level to preserve herd immunity (as dictated by the local public health authority), or as otherwise recommended or required by the local public

health authority in response to a localized outbreak, the University may modify this Program Attachment to protect the health and safety of its Covered Individuals and the University community. Locations are encouraged, but not required, to evaluate Program Participation on an annual and ongoing basis.

X. Related Information

- [CDC, Tetanus Vaccination](#)
- [CDC, Diphtheria Vaccination](#)
- [CDC, Pertussis \(Whooping Cough\) Vaccination](#)
- [CDC, Diphtheria, Tetanus, and Whooping Cough Vaccination](#)
- [CDC, Tdap \(Tetanus, Diphtheria, Pertussis\) Vaccine Information Statement](#)
- [CDC Immunization Schedules](#)
- [CDPH, Recommendations for Immunization and Screening Requirements for California Colleges and Universities](#)
- [American College Health Association \(ACHA\) Guidelines: Immunization Recommendations for College Students](#)
- [ACIP Vaccine Recommendations and Guidelines](#)

XI. Frequently Asked Questions

1. How does UC determine which vaccines and screening to require?

The University reviews the recommendations of the California Department of Public Health (CDPH), CDPH's [Recommendations for Immunization and Screening Requirements for California Colleges & Universities](#), the recommendations of the Centers for Disease Control and Prevention (CDC), CDC's Advisory Committee for Immunization Practices (ACIP) [Vaccine Recommendations and Guidelines](#), and the American College Health Association (ACHA) Guidelines: [Immunization Recommendations for College Students](#). However, the University reserves the right to modify these requirements pending revisions to the recommendations by CDPH, ACHA, or ACIP. Additional revisions may be made in response to significant public health events, such as a pandemic or other public health emergency. Please see [UC Immunization Requirements and Recommendations](#) for information on required and recommended vaccines. In general, these requirements pertain to those vaccine-preventable illnesses that can be spread by respiratory secretions (saliva, coughing, sneezing), and pose a risk to others who might become ill due to classroom or residential contact.

Note: Covered Individuals may subject to more restrictive vaccination requirements under applicable law and/or applicable public health directives. In such cases, the more restrictive vaccination requirements will apply in addition to any other requirements under these Vaccination Program Attachments.

2. Why did UC implement the Tdap Vaccination Program?

The University's 2016 [Student Immunization Policy](#) was issued in response to an

increase in outbreaks of vaccine–preventable illnesses that had occurred on UC campuses and the reemergence of illnesses once thought to have nearly disappeared. Although the three diseases that are the focus of the Tdap vaccine are considered “mild,” they can cause serious illness, lifelong complications, and even death. This Program Attachment incorporates the Tdap vaccination requirement from the 2016 Policy as an addendum to the systemwide Policy on Vaccination Programs.

3. What if the required Tdap vaccination was not available in my home country before coming to UC?

Please check with your local campus SHS for information regarding the timeline for registration holds if you were not able to meet Tdap vaccination requirements before your arrival to UC for this reason.

4. I/my family have concerns regarding the safety of vaccines and have chosen not to be vaccinated. Will I be prevented from attending classes at UC if I do not obtain the required vaccines?

Covered Individuals who have not provided evidence of the required vaccination or immunity to all diseases for which vaccination is required, and who have not received a University-approved Exception, will not be able to register for classes. Locations may impose additional restrictions, so please check with your local campus SHS for more information.

5. I had an allergic reaction to a vaccination. Am I still required to be vaccinated to enter UC?

It is very important that the doctor/nurse practitioner/physician assistant who cared for you at that time document what happened to you when you had the problem with vaccination. If you had a true “allergic reaction,” then SHS will need to know which vaccination caused the problem, and whether you were able to become immune to that illness. You will need to complete a “[Medical Exemption Request Form](#),” and submit it to the Medical Director at your campus SHS.

6. What is the process for requesting an Exception?

Covered Individuals with a medical condition that prevents them from being safely vaccinated may apply for a Medical Exemption by having a licensed, treating medical provider [specifically a physician (MD or DO), nurse practitioner (NP), or physician assistant (PA)] complete the University’s [Medical Exemption Request Form](#). Covered Individuals must then submit the completed form to the Medical Director at the SHS on their home campus. Requests that specify a contraindication or precaution to a Vaccine recognized by the CDC, CDPH, or in the case of internationally administered Vaccines, the World Health Organization, and that indicate the specific nature and probable duration of the medical condition or circumstances that contraindicate immunization with the vaccine(s) will meet criteria for approval. Medical Exemption requests outside of these categories will be denied.

Covered Individuals should use the Disability Exception Request Form to request an exception based on that Covered Individual’s disability or disabilities, and then

submit the completed form to the Medical Director at the SHS on their home campus.

Likewise, Covered Individuals should use the Religious Exception Request Form to request an Exception based on Religious Objection, and then submit the completed form to the Medical Director at the SHS on their home campus.

7. My Exception Request was denied. Can I appeal that decision?

If your request for an Exception is denied, you have a right to appeal the decision to the LVA by submitting an appeal request, along with the relevant Exception Request Form, to the Medical Director of your campus SHS. Covered Individuals who have submitted appeals will be able to attend courses during the quarter/semester that their appeals are undergoing review and may be subject to additional NPIs.

8. Will I be able to get the vaccines I need from Student Health Services on my campus?

Covered Individuals are *strongly encouraged* to complete all necessary vaccinations and/or testing prior to arriving at their campus, and to submit their vaccination history and documentation in advance to minimize the chance that they will experience a delay in registration if vaccination requirements have not already been met. Where necessary, Covered Individuals may alternatively request the necessary vaccinations at the SHS where they are enrolled. While all of the campus Student Health Services stock and administer the required vaccinations, the University strongly encourages you to receive these vaccines *before* arriving at UC. Covered Individuals should be prepared to request these vaccines from retail pharmacies or community medical providers.

9. I don't have the SHIP or UC SHIP Insurance Plan, and didn't get my vaccinations or testing done by my regular medical provider at home – how can I request that my outside insurance cover some or all of the costs to get vaccinations or testing done at SHS?

Vaccination costs are covered by all health insurance plans, as required by the Affordable Care Act. However, currently, the campus SHS centers do not bill insurance plans other than their respective Student Health Insurance Plans (SHIP or UC SHIP) available on your campus - which means you would need to pay out-of-pocket for these immunizations. If you do not have SHIP or UC SHIP and decide to obtain vaccinations at the SHS on your campus, SHS will provide you with an itemized list of charges for you to send to your insurance company to request reimbursement. While many insurance companies will retroactively reimburse their members for services already obtained, some require prior authorization. If you do not have SHIP or UC SHIP it is important for you to check with your insurance company before receiving services at SHS to verify your coverage.

Alternatively, Covered Individuals without SHIP insurance plans may obtain vaccinations from their primary care provider in order to avoid paying the full cost for these vaccinations or tests at the SHS.

XII. Model Forms and Exhibits

[University of California Religious Exception Request Form](#)

[University of California Disability Exception Request Form](#)

XIII. Revision History

December 17, 2025: Technical revisions.

September 27, 2024: Technical revisions to revise hyperlinks and clarify FAQ #1.

June 26, 2024: Initial issuance of Interim Program Attachment requiring Locations to implement this Tdap Vaccination Program by January 1, 2025.

F. **INTERIM** PROGRAM ATTACHMENT #6: Varicella Vaccination Program

Vaccine(s)	Targeted Disease(s) or Condition(s)
See https://www.fda.gov/vaccines-blood-biologics/vaccines/varivax-refrigerated-and-frozen-formulations for details on the VARIVAX vaccine.	Varicella (Chickenpox)

- I. **Program Type:** ☒ **Mandatory (Subject to Exceptions Marked Below)**
☐ **Recommended** ☐ **Opt-Out**

II. **Purpose/Supporting Data**

The purpose of this Varicella (VZV) Vaccination Program is to facilitate protection of the health and safety of the University community, including its Students, Personnel, and all others who work, live, and/or learn in any of the University's Locations or otherwise participate in person in University Programs. This vaccine-preventable illness is spread by respiratory transmission, and therefore can pose a risk to other individuals, including Covered Individuals, attending classes, living in residence halls, using other University facilities, or attending University events. The University strongly recommends that all members of the University community immediately obtain the VZV vaccine if they have not already.

This VZV Vaccination Program requires any Covered Individual, as defined in this Program Attachment, subject to limited Exceptions and associated Non-Pharmaceutical Interventions (NPIs), to be Up-To-Date on VZV vaccination, or provide proof of immunity to varicella by the Compliance Date specified in this Program Attachment as a condition of Physical Presence at a Location or in a University Program. Covered Individuals subject to additional or more restrictive VZV vaccination requirements under applicable law and/or applicable public health directives must also comply with those requirements.

Student Health Services (SHS) at each campus is responsible for collecting evidence of compliance with this VZV Vaccination Program from Covered Individuals and for evaluating any requests for Exceptions as described in this Program Attachment. SHS must submit compliance data to their campus Registrar's Office, so that these Offices can institute registration holds for any Covered Individual who has not complied with these requirements.

Campus Registrars are responsible for initiating holds that restrict class enrollment and registration for any Covered Individual who has not complied with these requirements. Continued noncompliance with this Program Attachment may result in educational consequences up to and including disciplinary sanctions as outlined in PACAOS 105.00.

Campus IT is responsible for creating and maintaining interfaces between the SHS electronic medical record (EMR) system and the Registrars' system to facilitate information transfer needed to connect Covered Individuals with the secured data entry set on the EMR, and to place and remove registration holds.

Covered Individuals who are not Up-To-Date must observe any NPIs as directed by the Location Vaccine Authority (LVA) to mitigate risk to members of the University community, patients, and others with whom they may interact. Covered Individuals

who initially request an Exception but later decide to become vaccinated may receive the VZV vaccine at any time and may notify the LVA.

Refer to Section X (Related Information) for linked webpages containing additional information that supports implementation of this program, including the applicable public health recommendations, which are incorporated by reference into this Program Attachment, as those may be amended or updated from time to time.

For purposes of this Program Attachment, Covered Individuals include anyone designated as Students under this policy who Physically Access a University Facility or Program in connection with their education/training. Personnel are not Covered Individuals, but Personnel who are also Students are Covered Individuals in their Student role. A person exclusively accessing a Healthcare Location as a patient, or an art, athletics, entertainment, or other publicly accessible venue at a Location as a member of the public, is not a Covered Individual.

III. Compliance Date

Locations must implement this VZV Vaccination Program by January 1, 2025.

For Covered Individuals matriculating after Fall 2024, the Compliance Date is the first day of instruction for the term for which they first enroll. Any Covered Individual who has not provided proof of compliance on or before the registration period for their second term of enrollment will not be allowed to register unless and until the Covered Individual complies with the vaccination requirement or is granted an Exception. Locations may specify additional deadlines.

Covered Individuals matriculating Fall 2024 or who matriculated prior to Fall 2024 should consult with their local SHS regarding deadlines and requirements for compliance.

On or before the applicable Compliance Date, Covered Individuals must: (1) provide proof of the VZV vaccination as required to be Up-To-Date; (2) provide proof of immunity; or (3) submit a request for an Exception.

A. Permitted Exceptions (Refer to Model Forms)

☒ *Medical Exemption* (Medical Contraindications or Precautions to each Vaccine that would satisfy the vaccination requirement.)

☒ *Religious Objection* (A Covered Individual's objection to receiving an otherwise required Vaccine based on that person's sincerely held religious belief, practice, or observance.)

☒ *Disability* (A physical or mental disorder or condition that limits a major life activity and any other condition recognized as a disability under applicable law. For purposes of this Vaccination Program, "disability" includes pregnancy, childbirth, or a related medical condition where reasonable accommodation is consistent with applicable law.)

B. Exception Requests

A Covered Individual seeking an Exception must, no later than the Compliance Date, submit their request to the Medical Director at the SHS on the Covered

Individual's home campus. While a request is pending and if it is granted, the Covered Individual must, as a condition of Physical Presence, observe NPIs defined by the LVA no less stringent than applicable public health directives and any University or Location guidelines. If an Exception is granted, the LVA must notify the Covered Individual and SHS of the approval and the associated expiration date, if any. If a request for an Exception is denied, the Covered Individual will be notified and, thereafter, unless the Covered Individual appeals the decision or requests a different Exception, the Covered Individual will be expected to promptly provide proof of VZV vaccination as required to be Up-To-Date or proof of immunity or will be denied Physical Presence at the relevant University Location(s) or Program(s).

A Covered Individual has the right to appeal the denial of their Exception request. The Covered Individual must submit an appeal request, along with the relevant Exception request form to the Medical Director of their campus SHS; the appeal request and the accompanying Exception request form will be reviewed by the LVA, and the LVA will subsequently issue a decision. A Covered Individual who submits an appeal will be allowed to register for classes throughout the academic period in which the appeal is being reviewed, decided, and communicated and may be subject to NPIs during that time. If the LVA denies the Covered Individual's appeal, the Covered Individual will not be allowed to register for classes the following term unless the Covered Individual complies with the vaccination requirement or subsequently requests and is granted a University-approved Exception.

IV. Evidence Required

Covered Individuals must submit proof of vaccination or immunity to varicella or of a University-approved Exception to their SHS, by providing either: (i) official documentation issued by a State vaccine registry or an official medical record, or (ii) in the case of one who has received a University-approved Exception, documentation that an Exception has been granted. Proof of immunity and Exceptions may be subject to audit.

All Covered Individuals must enter their vaccination history and/or disease-specific antibody titers directly into their electronic medical record (EMR) via a secure interface on or before the first day of instruction for their first term of enrollment. This is accessed either through a link on the student portal on the campus Registrar's website or directly via the SHS website. Covered Individuals must also submit documentation of vaccinations received, or titers indicating immunity to disease, directly to the SHS via secure document upload, fax, mail, or hand delivery on or before the first day of instruction of their first academic term. Verification of Covered Individual-entered immunization history will be performed on some or all of the self-entered data.

V. Access to Vaccines

Covered Individuals are strongly encouraged to complete VZV vaccination prior to arriving at their campus, and to submit their vaccination history and documentation in advance so they do not experience a delay in registration. Covered Individuals

may have the option to obtain the VZV vaccination at the SHS where they are enrolled or at a community pharmacy or clinic.

Vaccination costs are covered by all health insurance plans, as required by the Affordable Care Act. UC Student Health Insurance Plan (SHIP) covers and pays for vaccinations provided at the SHS or at in-network pharmacies or clinics. However, SHS only bills and collects from UC SHIP directly; SHS does not bill and collect from other health insurance plans. Covered Individuals with health insurance plans other than UC SHIP who obtain vaccinations at SHS may be required to pay out-of-pocket for their vaccinations and then submit requests for reimbursement to their health insurance plans. Covered Individuals with health insurance plans other than SHIP may obtain vaccinations from their primary care provider or a community pharmacy to avoid paying for the cost of these vaccinations up front at the SHS.

VI. Non-Pharmaceutical Interventions (NPIs)

Covered Individuals may be required by applicable public health authorities or the LVA in response to a public health emergency or during a localized outbreak to observe NPIs, including, but not limited to, the following: (i) wearing face-coverings, medical-grade masks, and other protective equipment; (ii) isolation and quarantine; (iii) physical/social distancing; (iv) frequent washing and cleaning; and (v) asymptomatic (surveillance/screening) and symptomatic testing.

Covered Individuals who are not Up-To-Date on the VZV vaccination may be subject to NPIs above and beyond those who have demonstrated compliance. In the event of a disease outbreak, Covered Individuals who are not Up-To-Date on the VZV vaccination may be excluded from the Location or site of the outbreak.

VII. Vaccine Education

All Covered Individuals who are not Up-To-Date on the VZV vaccination or who have not provided proof of compliance with this VZV Vaccination Program by the Compliance Date must participate in any Vaccine Education required by the LVA. During a public health emergency or during a localized outbreak, all Covered Individuals may be required to participate in additional systemwide or local Vaccine Education programs. Additional Vaccine Education may be required by the LVA consistent with applicable federal, state, or local laws, regulations, or accreditation standards.

VIII. Systemwide Implementation Guidelines: ☐ Attached ☒ None

IX. Program Evaluation

This VZV Vaccination Program is intended to maintain the VZV vaccination uptake rate among Covered Individuals in order to preserve herd immunity in the University community. In the event that the uptake rate at a particular University Location drops below the recommended level to preserve herd immunity (as dictated by the local public health authority), or as otherwise recommended or required by the local public health authority in response to a localized outbreak, the University may modify this Program Attachment to protect the health and safety of its Covered Individuals and the University community. Locations are encouraged, but not required, to evaluate Program Participation on an annual and ongoing basis.

X. Related Information

- [CDC, Chickenpox/Varicella Vaccination](#)
- [CDC, Varicella \(Chickenpox\) Vaccine Information Statement](#)
- [CDC Immunization Schedules](#)
- [CDPH, Recommendations for Immunization and Screening Requirements for California Colleges and Universities](#)
- [American College Health Association \(ACHA\) Guidelines: Immunization Recommendations for College Students](#)
- CDC [ACIP Vaccine Recommendations and Guidelines](#)

XI. Frequently Asked Questions

1. How does UC determine which vaccines and screening to require?

The University reviews the recommendations of the California Department of Public Health (CDPH), CDPH's [Recommendations for Immunization and Screening Requirements for California Colleges & Universities](#), the recommendations of the Centers for Disease Control and Prevention (CDC), CDC's Advisory Committee for Immunization Practices (ACIP) [Vaccine Recommendations and Guidelines](#), and the American College Health Association (ACHA) Guidelines: [Immunization Recommendations for College Students](#). However, the University reserves the right to modify these requirements pending revisions to the recommendations by CDPH, ACHA, or ACIP. Additional revisions may be made in response to significant public health events, such as a pandemic or other public health emergency. Please see [UC Immunization Requirements and Recommendations](#) for information on required and recommended vaccines. In general, these requirements pertain to those vaccine-preventable illnesses that can be spread by respiratory secretions (saliva, coughing, sneezing), and pose a risk to others who might become ill due to classroom or residential contact.

Note: Covered Individuals may subject to more restrictive vaccination requirements under applicable law and/or applicable public health directives. In such cases, the more restrictive vaccination requirements will apply in addition to any other requirements under these Vaccination Program Attachments.

2. Why did UC implement the VZV Vaccination Program?

The University's 2016 [Student Immunization Policy](#) was issued in response to an increase in outbreaks of vaccine-preventable illnesses that had occurred on UC campuses and the reemergence of illnesses once thought to have nearly disappeared. Although varicella (chickenpox), the focus of the VZV vaccine, is considered "mild," it can cause serious illness, lifelong complications, and even death. This Program Attachment incorporates the VZV vaccination requirement from the 2016 Policy as an addendum to the systemwide Policy on Vaccination Programs.

3. What if the required VZV vaccination was not available in my home country before coming to UC?

Please check with your local campus SHS for information regarding the timeline for registration holds if you were not able to meet VZV vaccination requirements before your arrival to UC for this reason.

4. I/my family have concerns regarding the safety of vaccines and have chosen not to be vaccinated. Will I be prevented from attending classes at UC if I do not obtain the required vaccines?

Covered Individuals who have not provided evidence of the required vaccination or immunity to all diseases for which vaccination is required, and who have not received a University-approved Exception, will not be able to register for classes. Locations may impose additional restrictions, so please check with your local campus SHS for more information.

5. I had an allergic reaction to a vaccination. Am I still required to be vaccinated to enter UC?

It is very important that the doctor/nurse practitioner/physician assistant who cared for you at that time document what happened to you when you had the problem with vaccination. If you had a true “allergic reaction,” then SHS will need to know which vaccination caused the problem, and whether you were able to become immune to that illness. You will need to complete a [“Medical Exemption Request Form,”](#) and submit it to the Medical Director at your campus SHS.

6. What is the process for requesting an Exception?

Covered Individuals with a medical condition that prevents them from being safely vaccinated may apply for a Medical Exemption by having a licensed, treating medical provider [specifically a physician (MD or DO), nurse practitioner (NP), or physician assistant (PA)] complete the University’s Medical Exemption Request Form. Covered Individuals must then submit the completed form to the Medical Director at the SHS on their home campus. Requests that specify a contraindication or precaution to a Vaccine recognized by the CDC, CDPH, or in the case of internationally administered Vaccines, the World Health Organization, and that indicate the specific nature and probable duration of the medical condition or circumstances that contraindicate immunization with the vaccine(s) will meet criteria for approval. Medical Exemption requests outside of these categories will be denied.

Covered Individuals should use the Disability Exception Request Form to request an exception based on that Covered Individual’s disability or disabilities, and then submit the completed form to the Medical Director at the SHS on their home campus.

Likewise, Covered Individuals should use the Religious Exception Request Form to request an Exception based on Religious Objection, and then submit the completed form to the Medical Director at the SHS on their home campus.

7. My Exception Request was denied. Can I appeal that decision?

If your request for an Exception is denied, you have a right to appeal the decision to the LVA by submitting an appeal request, along with the relevant Exception Request Form, to the Medical Director of your campus SHS. Covered Individuals who have submitted appeals will be able to attend courses during the quarter/semester that their appeals are undergoing review and may be subject to additional NPIs.

8. Will I be able to get the vaccines I need from Student Health Services on my campus?

Covered Individuals are *strongly encouraged* to complete all necessary vaccinations and/or testing prior to arriving at their campus, and to submit their vaccination history and documentation in advance to minimize the chance that they will experience a delay in registration if vaccination requirements have not already been met. Where necessary, Covered Individuals may alternatively request the necessary vaccinations at the SHS where they are enrolled. While all of the campus Student Health Services stock and administer the required vaccinations, the University strongly encourages you to receive these vaccines *before* arriving at UC. Covered Individuals should be prepared to request these vaccines from retail pharmacies or community medical providers.

9. I don't have the SHIP or UC SHIP Insurance Plan, and didn't get my vaccinations or testing done by my regular medical provider at home – how can I request that my outside insurance cover some or all of the costs to get vaccinations or testing done at SHS?

Vaccination costs are covered by all health insurance plans, as required by the Affordable Care Act. However, currently, the campus SHS centers do not bill insurance plans other than their respective Student Health Insurance Plans (SHIP or UC SHIP) available on your campus - which means you would need to pay out-of-pocket for these immunizations. If you do not have SHIP or UC SHIP and decide to obtain vaccinations at the SHS on your campus, SHS will provide you with an itemized list of charges for you to send to your insurance company to request reimbursement. While many insurance companies will retroactively reimburse their members for services already obtained, some require prior authorization. If you do not have SHIP or UC SHIP it is important for you to check with your insurance company before receiving services at SHS to verify your coverage.

Alternatively, Covered Individuals without SHIP insurance plans may obtain vaccinations from their primary care provider in order to avoid paying the full cost for these vaccinations or tests at the SHS.

XII. Model Forms and Exhibits

[University of California Religious Exception Request Form](#)

[University of California Disability Exception Request Form](#)

XIII. Revision History

December 17, 2025: Technical revisions.

September 27, 2024: Technical revisions to revise hyperlinks and clarify FAQ #1.

June 26, 2024: Initial issuance of Interim Program Attachment requiring Locations to implement this VZV Vaccination Program by January 1, 2025.

G. **INTERIM** Program Attachment #7: Tuberculosis Screening Program

Vaccine(s)	Targeted Disease(s) or Condition(s)
See https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/TB-Risk-Assessment.aspx for information on the California Department of Public Health (CDPH) California Tuberculosis Risk Assessment for College and University Students.	Tuberculosis

I. **Program Type:** ☒ **Mandatory** ☐ **Recommended** ☐ **Opt-Out**

II. **Purpose/Supporting Data**

The purpose of this Tuberculosis (TB) Screening Program is to facilitate protection of the health and safety of the University community, including its Students, Personnel, and all others who work, live and/or learn in any of the University's Locations or otherwise participate in person in University Programs. This illness is spread by respiratory transmission, and therefore can pose a risk to other individuals, including Covered Individuals, attending classes, living in residence halls, using other University facilities, or attending University events.

This TB Screening Program requires any Covered Individual, as defined in this Program Attachment, to complete an online screening questionnaire for tuberculosis, based on guidance from the California Department of Public Health, by the Compliance Date specified in this Program Attachment as a condition of Physical Presence at a Location or in a University Program. Any Covered Individual who is assessed as potentially at higher risk for TB infection, based on their responses to the screening questionnaire, will be required to undergo further evaluation and testing by their medical provider. Results of this evaluation must be submitted to the Student Health Services (SHS) at the campus where the Covered Individual plans to enroll. Covered Individuals subject to additional or more restrictive TB screening, evaluation, or testing requirements under applicable law and/or applicable public health directives must also comply with those requirements.

SHS at each campus is responsible for collecting evidence of compliance with this TB Screening Program from Covered Individuals. SHS must submit compliance data to their campus Registrar's Office, so that these Offices can institute registration holds for any Covered Individual who has not complied with these requirements.

Campus Registrars are responsible for initiating holds that restrict class enrollment and registration for any Covered Individual who has not complied with these requirements. Continued noncompliance with this Program Attachment may result in educational consequences up to and including disciplinary sanctions as outlined in PACAOS 105.00.

Campus IT is responsible for creating and maintaining interfaces between the SHS electronic medical record (EMR) system and the Registrars' system to facilitate information transfer needed to connect Covered Individuals with the secured data entry set on the EMR, and to place and remove registration holds.

Covered Individuals who are assessed to be at higher risk for TB infection must observe any NPIs as directed by the Location Vaccine Authority (LVA) to mitigate risk to members of the University community, patients, and others with whom they

may interact.

Refer to Section IX (Related Information) for linked webpages containing additional information that supports implementation of this program, including the applicable public health recommendations, which are incorporated by reference into this Program Attachment, as those may be amended or updated from time to time.

For purposes of this Program Attachment, Covered Individuals include anyone designated as Students under this Policy who seeks Physically Access to a University Facility or Program in connection with their education/training. Personnel are not Covered Individuals, but Personnel who are also Students are Covered Individuals in their Student role. A person exclusively accessing a Healthcare Location as a patient, or an art, athletics, entertainment, or other publicly accessible venue at a Location as a member of the public, is not a Covered Individual.

III. Compliance Date

Locations must implement this TB Screening Program by January 1, 2025.

For Covered Individuals matriculating after Fall 2024, the Compliance Date is the first day of instruction for the term for which they first enroll. Any Covered Individual who has not provided proof of compliance on or before the registration period for their second term of enrollment will not be allowed to register unless and until the Covered Individual complies with the screening requirement. Locations may specify additional deadlines.

Covered Individuals matriculating Fall 2024 or who matriculated prior to Fall 2024 should consult with their local SHS regarding deadlines and requirements for compliance.

On or before the applicable Compliance Date, Covered Individuals must complete the online screening questionnaire and provide proof of compliance to their local SHS.

IV. Evidence Required

Covered Individuals must submit their completed TB Risk Assessment Questionnaire Form in their electronic medical record (EMR) via a secure interface prior to their first term of enrollment. This is accessed either through a link on the student portal on the campus Registrar's website or directly via the SHS website.

V. Non-Pharmaceutical Interventions (NPIs)

Covered Individuals may be required by applicable public health authorities or the LVA in response to a public health emergency or during a localized outbreak to observe NPIs, including, but not limited to, the following: (i) wearing face-coverings, medical-grade masks, and other protective equipment; (ii) isolation and quarantine; (iii) physical/social distancing; (iv) frequent washing and cleaning; and (v) asymptomatic (surveillance/screening) and symptomatic testing.

Covered Individuals who are assessed to be at higher risk for TB infection may be subject to NPIs above and beyond those who are assessed to be at lower risk. In the event of a disease outbreak, Covered Individuals who are assessed to be at higher risk for TB infection may be excluded from the Location or site of the outbreak.

VI. Vaccine Education

All Covered Individuals who have not provided proof of compliance with this TB Screening Program by the Compliance Date must participate in any Vaccination Education or other public health education required by the LVA. During a public health emergency or during a localized outbreak, all Covered Individuals may be required to participate in additional systemwide or local Vaccine Education programs. Additional Vaccine Education may be required consistent with applicable federal, state, or local laws, regulations, or accreditation standards.

VII. Systemwide Implementation Guidelines: ☒ Attached ☐ None

VIII. Program Evaluation

This TB Screening Program is intended to survey the risk of latent TB among Covered Individuals in order to preserve herd immunity in the University community. Based on the results of the TB Risk Assessment Questionnaire Form, each SHS is authorized to identify certain Covered Individuals for latent TB infection (LTBI) testing; questions about this process and the testing itself should be directed to the Covered Individual's respective SHS. Locations are encouraged, but not required, to evaluate Program Participation on an annual and ongoing basis.

IX. Related Information

- [Centers for Disease Control and Prevention \(CDC\), About Tuberculosis \(TB\)](#)
- [CDC, Tuberculosis Vaccination](#) (note: not widely used in the United States)
- [World Health Organization \(WHO\), Tuberculosis: Systematic Screening](#)
- [CDC Immunization Schedules](#)
- [CDPH, Recommendations for Immunization and Screening Requirements for California Colleges and Universities](#)
- [American College Health Association \(ACHA\) Guidelines: Immunization Recommendations for College Students](#)
- [CDC ACIP Vaccine Recommendations and Guidelines](#)

X. Frequently Asked Questions

1. How does UC determine which vaccines and screening to require?

The University reviews the recommendations of the California Department of Public Health (CDPH), CDPH's [Recommendations for Immunization and Screening Requirements for California Colleges & Universities](#), the recommendations of the Centers for Disease Control and Prevention (CDC), CDC's Advisory Committee for Immunization Practices (ACIP) [Vaccine Recommendations and Guidelines](#), and the American College Health Association (ACHA) Guidelines: [Immunization Recommendations for College Students](#). However, the University reserves the right to modify these requirements pending revisions to the recommendations by CDPH, ACHA, or ACIP. Additional revisions may be made in response to significant public health events, such as a pandemic or other public health emergency. Please see [UC Immunization Requirements](#)

[and Recommendations](#) for information on required and recommended vaccines. In general, these requirements pertain to those vaccine-preventable illnesses that can be spread by respiratory secretions (saliva, coughing, sneezing), and pose a risk to others who might become ill due to classroom or residential contact.

2. Why did UC implement the Policy on Vaccination Programs and this Program Attachment?

The University's 2016 [Student Immunization Policy](#) was issued in response to an increase in outbreaks of vaccine-preventable illnesses that had occurred on UC campuses and the reemergence of illnesses once thought to have nearly disappeared. In addition, thousands of students were exposed to active tuberculosis (spread by respiratory transmission) across several campuses prior to adoption of the 2016 Policy. Tuberculosis can cause serious illness, lifelong complications, and even death. This Program Attachment incorporates the TB Screening requirement from the 2016 Policy as an addendum to the systemwide Policy on Vaccination Programs.

XI. Revision History

December 17, 2025: Technical revisions.

September 27, 2024: Technical revisions to revise hyperlinks and clarify FAQ #1.

June 26, 2024: Initial issuance of Interim Program Attachment requiring Locations to implement this TB Screening Program by January 1, 2025.

ATTACHMENT 1: Systemwide Implementation Guidelines: California Department of Public Health California Tuberculosis Risk Assessment for College and University Students

Link here:

<https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/TBCB-CA-College-Student-TB-Risk-Assessment.pdf>

Screenshots below:



California Tuberculosis Risk Assessment College and University Students



- Use this tool to identify asymptomatic **college or university students** for latent TB infection (LTBI) testing.
- **Do not repeat testing** unless there are **new risk factors** since the last negative test.
- Do not treat for LTBI until active TB has been excluded:
For patients with TB symptoms or abnormal chest x-ray consistent with active TB disease, evaluate for active TB disease with a chest x-ray, symptom screen, and if indicated, sputum AFB smears, cultures and nucleic acid amplification testing.
A negative tuberculin skin test or interferon gamma release assay does not rule out active TB disease.

LTBI testing is recommended if any of the 3 boxes below are checked.

☐ **Birth, travel, or residence** in a country with an elevated TB rate for at least 1 month

- Includes any country other than the United States, Canada, Australia, New Zealand, or a country in western or northern Europe
- Interferon Gamma Release Assay is preferred over Tuberculin Skin Test for non-U.S.-born persons ≥ 2 years old

☐ **Immunosuppression**, current or planned

HIV infection, organ transplant recipient, treated with TNF-alpha antagonist (e.g., infliximab, etanercept, others), steroids (equivalent of prednisone ≥ 15 mg/day for ≥ 1 month) or other immunosuppressive medication

☐ **Close contact** to someone with infectious TB disease during lifetime

Treat for LTBI if LTBI test result is positive and active TB disease is ruled out.

☐ **None**; no TB testing is indicated at this time

Provider: _____

Assessment Date: _____

Patient Name: _____

Date of Birth: _____

See the **College and University Students Risk Assessment User Guide** for more information about using this tool.
To ensure you have the most current version, go to the **RISK ASSESSMENT** page at <https://www.cdph.ca.gov/tbcb>

September 2019





CA College and University Students TB Risk Assessment User Guide



Avoid testing persons at low risk

Routine testing of low risk populations is not recommended and may result in unnecessary evaluations and treatment because of falsely positive test results.

Local recommendations and other risk factors

The core elements listed in the College/University TB Risk Assessment are meant to identify students who need screening for TB. These were selected in order to focus testing on patients at highest risk. This risk assessment does not supersede any mandated testing. Examples of these populations include: healthcare workers, residents or employees of correctional institutions, substance abuse treatment facilities, homeless shelters, and others. Local recommendations should also be considered in testing decisions. Local TB control programs can customize this risk assessment according to local recommendations. **Providers should check with local TB control programs for local recommendations.**

United States Preventive Services Task Force (USPSTF)

The USPSTF has recommended testing foreign born persons born-in or former residents of a country with an elevated tuberculosis rate and persons who live in or have lived in high-risk congregate settings such as homeless shelters and correctional facilities. Because the increased risk of exposure to TB in congregate settings varies substantially by facility and local health jurisdiction, clinicians are encouraged to follow local recommendations when considering testing among persons from these congregate settings. USPSTF did not review data supporting testing among close contacts to infectious TB nor among persons who are immunosuppressed because these persons are recommended to be screened by public health programs or by clinical standard of care.

Most patients with LTBI should be treated

Because testing of persons at low risk of TB infection should not be done, persons that test positive for LTBI should generally be treated once active TB disease has been ruled out with a chest radiograph and, if indicated, sputum smears, cultures, and nucleic acid amplification testing (NAAT) have been performed. However, clinicians should not be compelled to treat low risk persons with a positive test for LTBI.

When to repeat a risk assessment testing

Repeat risk assessments should be based on the activities and risk factors specific to the student. Colleges and universities may decide on the need for repeat screening based on the activities and risk factors specific to their student body. Students who volunteer or work in health care settings might require annual testing and should be considered separately.

Re-testing should only be done in persons who previously tested negative, and have new risk factors since the last assessment. In general, this would include new close contact with an infectious TB case or new immunosuppression, but could also include foreign travel in certain circumstances.

Negative test for latent TB does not rule out active TB

It is important to remember that a negative TST or IGRA result does not rule out active TB. In fact, a negative TST or IGRA in a patient with active TB can be a sign of extensive disease and poor outcome.

Previous or inactive tuberculosis

Persons with a previous chest radiograph showing findings consistent with previous or inactive TB should be tested for LTBI and evaluated for active TB disease.

IGRA preference in BCG vaccinated students

Because IGRA has increased specificity for TB infection in persons vaccinated with BCG, IGRA is preferred over the TST tuberculin skin test in these persons.

Emphasis on short course for treatment of LTBI

Shorter regimens for treating LTBI have been shown to be more likely to be completed and the 12-dose regimen has been shown to be as effective as 9 months of isoniazid. Use of these shorter regimens is preferred in most patients. Drug-drug interactions and contact to drug resistant TB are frequent reasons these regimens cannot be used.

Medication	Frequency	Duration
Rifampin	Daily	4 months
Isoniazid + rifapentine*	Weekly	12 weeks

*The CDC currently recommends DOT for this regimen; however, data has shown that SAT is noninferior to DOT in the United States. Many clinicians are using SAT or modified DOT.

CDPH LTBI Treatment Fact Sheets: Fact sheets are available for three treatment regimens on the California Tuberculosis Branch website, on the LTBI Treatment page at: <https://cdph.ca.gov/TB-LTBI-Treatment>

What if students refuse LTBI treatment when indicated?

Refusal should be documented. Offers of treatment should be made at future encounters with medical services if still indicated. Annual chest radiographs are not recommended in asymptomatic students. If treatment is later accepted, TB disease should be excluded and CXR repeated if it has been more than 3 months from the initial evaluation.

Symptoms that should trigger evaluation for active TB

Patients with any of the following symptoms that are otherwise unexplained should be evaluated for active TB: cough for more than 2-3 weeks, fevers, night sweats, weight loss, hemoptysis or excessive fatigue.

No state requirements for LTBI screening in college or university students

These recommendations are considered best practices by the CDPH TCB and are not legally mandated.

Resource: American College Health Association Guidelines on tuberculosis screening available online: http://www.acha.org/documents/resources/guidelines/ACHA_Tuberculosis_Screening_2017.pdf

Abbreviations: DOT=Directly observed therapy; IGRA= Interferon gamma release assay (e.g., QuantiFERON-TB Gold, T-SPOT.TB); BCG=Bacillus Calmette-Guérin; TST= tuberculin skin test; LTBI=latent TB infection

