



Association of  
Immunization  
Managers

## AIM Legislative Round-up: March 7, 2024

Critical votes are occurring in state legislatures across the country on vaccine-related legislation. Lawmakers are considering bills that could significantly impact vaccine policies and public health in numerous states. A summary of new legislative movement over the last two weeks is provided below.

Are you being asked to develop talking points or provide testimony for a vaccine-related bill? Visit our [Policy Toolkit](#) or reach out to [Brent Ewig](#) for individualized support.

### Legislation Passed First Chamber (32 bills):

- **AL HB 2-** Would prohibit minors from consenting to their own vaccination without parental consent unless emancipated or living apart from their parents.
- **AL SB 59-** Would allow dependents of military members to use military medical records as evidence of immunization for school requirements.
- **AZ HB 2058-** Would specify that students over the age of 18 can submit their own personal belief exemption to school required vaccines.
- **AZ HB 2063-** Would require that communications related to school vaccine requirements include information about obtaining an exemption.
- **AZ HB 2257-** Would prohibit using one's vaccination status when making foster care placement decisions.
- **AZ HB 2514-** Would create a Parental Bill of Rights, one component of which emphasizes the right of parents to exempt their children from immunizations.
- **CO HB 25-1027-** Would make a variety of changes to immunization statutes, including allowing PAs to create immunization certificates and extending school deadlines.
- **HI HB 72-** Would require that pharmacy technicians be registered to perform their duties (including administering vaccinations).
- **HI SB 1434-** Would establish a Universal Purchase Program for vaccines in the state using insurer assessed funds.
- **ID H 131-** Would require blood donations to be labeled if the donor had received a COVID-19 or other mRNA vaccine, allowing requests based on such labeling.
- **ID H 290-** Would remove the responsibility of the board of health to determine the school/daycare vaccine schedule, instead listing certain vaccines directly in the statute (and specifying exemption information).
- **ID H 91-** Would repeal the Idaho Childhood Immunization Policy Commission.
- **ID S 1023-** Would prohibit the mandate of any medical intervention by the state.
- **ID S 1038-** Would prohibit the state from being compelled to engage in the enforcement of requirements or mandates issued by WHO.
- **IN SB 96-** Would allow pharmacists to administer any ACIP recommended vaccine.
- **KS SB 29-** Would repeal public health officials' authority to require students isolate/quarantine due to their vaccination status.

- **MO HB 943-** Would add chikungunya vaccines to the list that pharmacists are able to administer to those 7 years and older.
- **MS HB 1066-** Would provide a 30-day grace period for children of military families to adhere to school vaccination requirements.
- **MS HB 1127-** Would establish the COVID-19 Mississippi Local Provider Innovation Grant Program.
- **MT LC 1384-** Would direct the health department to seek a Medicaid waiver to cover all immunizations for individuals experiencing homelessness.
- **MT LC 2892-** Would require the department to provide a form that each school would be required to submit with deidentified vaccine/exemption information.
- **ND HB 1391-** Would prohibit discrimination in employment based on "health status" (defined to include vaccination refusal).
- **ND HB 1454-** Would prohibit any vaccine requirements unless vaccine manufacturers have full liability for the product.
- **ND HB 1458-** Would define any recombinant, attenuated or modified virus as "self-spreading," prohibiting the release of such products (including vaccines).
- **ND SB 2555-** Would state the health officer serves at the pleasure of the governor in relation to their capacity, role, and decision-making authority.
- **NH HB 524-** Would repeal the statute establishing the New Hampshire Vaccine Association (responsible for universal vaccine purchase program management).
- **SC S 2-** Would specify the requirements of informed consent for vaccination.
- **TN SB 1272-** Would state a child in state custody cannot be denied admission to any school if they haven't been immunized or don't have immunization records.
- **TN SB 680-** Would require that any school parental communications about vaccines also include information about Type 1 and Type 2 Diabetes.
- **UT HB 228-** Would remove any expiration of student vaccine exemption forms and require that schools transfer such exemption if a student changes school.
- **UT HB 84-** Would require any food intended for human consumption that contains vaccine or vaccine material be considered a drug.
- **WV SB 460-** Would add religious and philosophical exemptions for school vaccine requirements, prohibiting students from being excluded for lack of vaccination.

#### **Legislation Newly Introduced (64 bills):**

- Eleven new bills involve covering the **cost of vaccines**, including requiring private insurer coverage (MI SB 107, GA SB 262, & TX HB 3735), specifying provider reimbursement rates (AR HB 1619, NY S 5852, & RI HB 5627), and establishing universal state health plans that cover vaccines (VT H 433, FL SB 1752, & FL HB 1603).
- Nine new bills involve **vaccine requirements and exemptions**, including prohibiting COVID-19 vaccine requirements (OR SB 1100, ME LD 871, & RI HB 5856), prohibiting any new vaccine requirements (TX HB 3304), broadening vaccine requirement exemptions (WV HB 2732 & WV HB 2729), and removing vaccine requirement exemptions (NY S 5700).

- Nine new bills seek to expand the **ability of various professions to vaccinate**, including pharmacists (TX HB 5340), nursing students (NY S 5706), physical therapists (OR HB 3824), medical assistants (NY S 5720), advanced practice registered nurses (TX SB 1859 & TX HB 3794), certified EMTs (MN SF 2128), and certified professional midwives (RI SB 478 & RI HB 5858).
- Seven new bills would affect **vaccine communications**, mostly prohibiting or restricting communications around vaccines (WV HB 3019, AL HB 367, TX HB 3472, TX HB 3852, TN SB 1031, & WA SB 5781).
- Other introduced bills seek to prohibit the use of **mRNA vaccines** (TX SB 1887, TX HB 3737, & TX HB 3465), prohibit **discrimination** based on one's vaccination status (RI SB 469, FL SB 1299, TX HB 3957, & TX HB 3392), remove or restrict certain **public health authority** (FL SB 1372 & TX HB 3440) and make vaccine **manufacturers liable** for vaccine injury (IA HF 712 & TX HB 3441).

#### **Legislation Failed (5 bills):**

- WY HB 96 would have prohibited discrimination based on COVID-19 vaccine status and prohibited any communications suggesting COVID-19 vaccines were required, allowing for civil suit if violated.
- MS HB 335 & MS HB 336 would have established the MAGnet Community Health Disparity Program to address minority COVID-19 vaccine administration disparities in the state.
- ND HB 1467 would have required the health department to create and publish a state-level version of VAERS.
- MS HB 617 would have allowed homeschool students to participate in public school athletics if they met the same immunization requirements.

**Please note:** AIM is striving to monitor fast-moving state legislative developments. The information included in this summary may not be comprehensive and is subject to change. If you are aware of missing information, **please contact AIM Chief Government Relations and Policy Officer Brent Ewig ([bewig@immunizationmanagers.org](mailto:bewig@immunizationmanagers.org))**.