HOUSE No. 2151

The Commonwealth of Massachusetts

PRESENTED BY:

Paul J. Donato

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act promoting community immunity.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
Paul J. Donato	35th Middlesex	1/19/2023
Rebecca L. Rausch	Norfolk, Worcester and Middlesex	1/20/2023
Jack Patrick Lewis	7th Middlesex	1/25/2023
David Henry Argosky LeBoeuf	17th Worcester	1/31/2023
Carmine Lawrence Gentile	13th Middlesex	2/7/2023
James B. Eldridge	Middlesex and Worcester	2/14/2023
Vanna Howard	17th Middlesex	2/14/2023
Samantha Montaño	15th Suffolk	2/14/2023
Erika Uyterhoeven	27th Middlesex	2/22/2023

HOUSE No. 2151

By Representative Donato of Medford, a petition (accompanied by bill, House, No. 2151) of Paul J. Donato and others relative to immunizations against infectious disease which give rise to a declared public health state of emergency. Public Health.

The Commonwealth of Alassachusetts

In the One Hundred and Ninety-Third General Court (2023-2024)

An Act promoting community immunity.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

- SECTION 1. Chapter 76 of the General Laws is hereby amended by striking out section
- 2 15, as appearing in the 2020 Official Edition, and inserting in place thereof the following
- 3 section:-
- 4 Section 15. All schools shall comply with the requirements established in chapter 111P.
- 5 SECTION 2. Said chapter 76, as so appearing, is hereby further amended by striking out
- 6 section 15C and inserting in place thereof the following section:-
- 7 Section 15C. All institutions of higher learning shall comply with the requirements
- 8 established in chapter 111P.
- 9 SECTION 3. Section 15D of said chapter 76, as so appearing, is hereby repealed.

10	SECTION 4. Section 24N of chapter 111 of the General Laws, as appearing in the 2020
11	Official Edition, is hereby amended, in line 32, by inserting after the word "24M" the following
12	words:-, and to administer chapter 111P.
13	SECTION 5. The General Laws are hereby amended by inserting after chapter 1110 the
14	following chapter:-
15	CHAPTER 111P.
16	COMMUNITY IMMUNITY.
17	Section 1. This chapter shall be known and may be cited as the Community Immunity
18	Act.
19	Section 2. As used in this chapter, the following words shall have the following meanings
20	unless the context clearly requires otherwise:-
21	"Covered program", (a) a child care center, an early education and care program, a family
22	child care home, a large family child care home, a public preschool program, or a school-aged
23	child care program, as defined in section 1A of chapter 15D; (b) a school, whether public, private
24	or charter, that provides education to students in any combination of grade levels from
25	kindergarten to grade 12, inclusive, and including, but not limited to, any school activity open to
26	children who are otherwise instructed in accordance with section 1 of chapter 76; (c) a
27	recreational camp; or (d) an institution of higher education, whether public or private.
28	"Department", the department of public health.
29	"Exemption", written acknowledgement from the department that a participant is excused
30	from the schedule.

"Herd immunity", population-wide resistance to the spread of an infectious disease within that population, resulting from a sufficient percentage of people receiving one or more immunizations against the disease.

"Immunization", an inoculation administered for the purpose of making a person resistant to an infectious disease.

"Participant", a person who engages in 1 or more activities of a covered program through enrollment or other registration process.

"Provider", a health care provider licensed by an agency, board or division of the commonwealth who, acting within their scope of practice, may lawfully administer an immunization.

"Responsible adult", a parent or legal guardian of a participant, a participant who is an emancipated minor, or a participant who has achieved the age of majority.

"Schedule", the immunization administration schedule established by the department and consistent with generally accepted medical practice.

Section 3. To enroll in a covered program, a participant's records shall include: (a) documentation of immunizations in accordance with the schedule; (b) an exemption acknowledgement letter issued by the department, consistent with this chapter; (c) evidence that the participant is in the process of obtaining immunizations with the objective of compliance with the schedule; (d) for public schools only, evidence that the participant moved into the commonwealth not more than 90 days before the date of enrollment and the responsible adult is making a good faith effort to obtain the necessary immunization documentation or exemption

acknowledgement; or (e) evidence that more than 30 days have elapsed since a declaration of exemption form was submitted to the department. A private covered program may implement immunization requirements more stringent than those set forth in this chapter; provided, that the program creates and maintains a written immunization policy, which shall be made available to all responsible adults; and provided further, that no private covered program shall refuse to accept medical exemptions.

Section 4. There shall be two types of immunization exemptions: (a) medical, for a participant whose medical conditions or circumstances preclude the administration of an immunization, as determined in the best medical judgment of a provider; and (b) religious, for a participant who holds, or whose family holds, sincere religious beliefs conflicting with immunizations.

Section 5. The department shall prepare and maintain separate standardized declaration of exemption forms for medical and religious exemptions to required vaccinations. The department shall make the forms available to covered programs and the public online and, as necessary, in

hard copy. Covered programs shall provide a declaration of exemption form to a responsible adult or a participant only upon request.

Section 6. The declaration of medical exemption form shall include, without limitation:

(i) a checklist of generally accepted contraindications to immunizations that shall be completed by a provider; (ii) a statement that the provider has an established provider-patient relationship with the participant; (iii) a request for the signature of the provider; (iv) a request for a unique government-issued professional identification number assigned to the provider; (v) a request for the signature of the responsible adult; and (vi) requests for dates for all signatures.

Section 7. The declaration of religious exemption form shall include, without limitation:

(i) a statement that the participant or responsible adult has a sincere religious belief conflicting with immunizations; (ii) a certification that the responsible adult has provided a complete and accurate copy of the religious exemption declaration to the participant's primary health care provider, including the provider's name and contact information; (iii) an acknowledgement of receipt from a provider on the participant's primary health care team; and (iv) a request for the dated signature of the responsible adult. The form shall include a statement from the department that refusing to immunize is against public health policy and may result in serious illness or death of the participant or others. The department may provide alternative requirements to clauses (ii) and (iii) of this section if a participant does not have a primary health care provider. The form shall not require disclosure of a participant's particular religious beliefs.

Section 8. A responsible adult shall submit a completed declaration of exemption form to the department for review. The department shall determine the method of submission, whether electronic, hard copy, or both.

Section 9. The department shall review each declaration of exemption form submitted in accordance with this chapter. The department shall acknowledge each validly executed and accurately completed form with a letter indicating that the participant is exempt from required vaccinations and including the expiration date of the exemption. If the declaration of exemption form is improperly completed, the department shall advise the responsible adult of the remedial action necessary for resubmission.

Section 10. Whenever practicable, the department shall review and issue a response in accordance with section 9 of this chapter not more than 30 days after receipt of the declaration of

exemption form. An exemption acknowledged by the department shall be valid for a period of not more than 1 year from the final signature date on the declaration. The department may, in its sole discretion, require covered programs to exclude exempted participants during a public health emergency.

Section 11. All covered programs shall annually report total numbers of participants who have been immunized and participants who are exempt from immunization requirements, delineated

by exemption type, as applicable, to the department, in a method determined by the department, and shall distribute the data from the report to all responsible adults electronically or in hard copy. Distribution shall not be required if it would result in disclosure of personal information as defined in section 1 of chapter 93H or otherwise violate applicable privacy laws.

Section 12. The department shall annually publish immunizations and exemptions data, delineated by exemption type, as applicable, for each covered program and school district on its website and may publish such data in hard copy. The department may also publish data by municipality, county, or other geographic designation, or by other criteria in its discretion. Publication shall not be required whenever doing so would result in disclosure of personal information as defined in section 1 of chapter 93H or otherwise violate applicable privacy laws. The department shall directly disseminate electronic copies of any published data to the school physician or nurse assigned to any public covered program pursuant to section 53 of chapter 71.

Section 13. Any covered program that has not achieved herd immunity shall be designated as an elevated risk program. Any covered program that fails to report immunization and exemption rates consistent with this chapter shall be designated an elevated risk program.

Elevated risk program designations shall remain in place until the department, in its sole discretion, determines that the covered program has sufficiently improved immunity rates in the covered program population. The department shall maintain a public, online list of elevated risk programs.

Section 14. The department shall create a notice to responsible adults about an elevated risk designation. An elevated risk program shall issue the notice to all responsible adults for participants or those seeking enrollment in the program during the period in which the designation is in place not more than 10 days after receiving an elevated risk program designation. The department may require elevated risk programs to organize and invite all responsible adults to a presentation by the department about immunization safety, immunization efficacy and herd immunity. Whenever practicable, the presentation shall be conducted within 45 days after the designation is received.

Section 15. The department shall develop and make available online an informational pamphlet about immunization safety and immunization efficacy. The department shall distribute the informational pamphlet, either electronically or in hard copy, to every responsible adult who submits a declaration of exemption form pursuant to this chapter. All elevated risk programs shall distribute the informational pamphlet, either electronically or in hard copy, to all responsible adults for participants or those seeking enrollment in the program during the period in which the designation is in place.

Section 16. The department shall promulgate regulations to implement this chapter, except that the department of early education and care, department of elementary and secondary education,

and department of higher education shall promulgate regulations to implement application of this chapter to covered programs falling within each department's jurisdiction.

Section 17. In conjunction with and as facilitated by the departments listed in section 16 of this chapter, as well as partnerships with trusted community-based organizations and local public health departments, health care providers, or clergy, the department shall conduct outreach to support the delivery of medically accurate information about immunizations, including but not limited to the availability of programs funded through the Vaccine Purchase Trust Fund established in section 24N of chapter 111. Such outreach shall focus on, but not be limited to, immunization gap populations in under-vaccinated communities.

Section 18. The department shall collect and report data on immunizations against any infectious disease which has given rise to a declared public health state of emergency in the commonwealth. Daily immunization data reports, which the department shall publish on its website, shall include the number of individuals receiving the immunization, delineated by age and geographic location, including municipal, county, and statewide counts. The department shall collect infectious disease immunization data by key socioeconomic and demographic indicators, including race, gender, ethnicity, disability, sexual orientation and gender identity, primary language, occupation, household income, residence in elder care facilities and other congregate care settings, and housing status, and report such data on its website not less than weekly, except where publication would result in disclosure of personal information as defined in section 1 of chapter 93H or would otherwise violate applicable privacy laws.

160	SECTION 6. Section 12F of chapter 112 of the General Laws, as appearing in the 2020
161	Official Edition, is hereby amended by striking out, in lines 14 and 15, the words "have come in
162	contact with" and inserting in place thereof the following words:- be at risk of contracting.
163	SECTION 7. Said section 12F of said chapter 112, as so appearing, is hereby further
164	amended by inserting after the word "diagnosis", in line 18, the following word:-, prevention.
165	SECTION 8. Chapter 5 of the Acts of 1995 is hereby amended by striking out section
166	122.
167	SECTION 9. Sections 1 through 5, inclusive, of this act shall take effect on July 1, 2025.
168	Remaining sections of this act shall take effect upon its passage.