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H.622

Introduced by Representatives LaLonde of South Burlington, Brumsted of  
Shelburne, Chase of Colchester, Houghton of Essex, Scheu of  
Middlebury, Squirrell of Underhill, Till of Jericho, and  
Townsend of South Burlington

Referred to Committee on

Date:

Subject: Health; public health; immunizations; religious exemption

Statement of purpose of bill as introduced: This bill proposes to suspend the  
religious exemption to the immunization requirement with respect to a specific  
school or child care facility in the event that the immunization rate for a  
required immunization is below the 95 percent threshold at that school or child  
care facility.

An act relating to suspending the religious exemption to immunization

It is hereby enacted by the General Assembly of the State of Vermont:

Sec. 1. 18 V.S.A. § 1122 is amended to read:

§ 1122. EXEMPTIONS

(a) Notwithstanding subsections 1121(a) and (b) of this title, a person may  
remain in school or in a child care facility without a required immunization:

1           (1) If the person or, in the case of a minor, the person's parent or  
2 guardian presents a form created by the Department and signed by a licensed  
3 health care practitioner authorized to prescribe vaccines or a health clinic  
4 stating that the person is in the process of being immunized. The person may  
5 continue to attend school or a child care facility for up to six months while the  
6 immunization process is being accomplished.

7           (2) If a licensed health care practitioner who is authorized to prescribe  
8 vaccines certifies in writing that a specific immunization is or may be  
9 detrimental to the person's health. A certifying health care practitioner shall  
10 specify the required immunization in question as well as the probable duration  
11 of the condition or circumstance that is or may be detrimental to the person's  
12 health. Any exemption certified under this subdivision shall terminate when  
13 the condition or circumstance cited no longer applies.

14           (3) If the person or, in the case of a minor, the person's parent or  
15 guardian annually provides a signed statement to the school or child care  
16 facility on a form created by the Department that the person, parent, or  
17 guardian:

18           (A) holds religious beliefs opposed to immunization; and

19           (B) has reviewed evidence-based educational material provided by  
20 the Department regarding immunizations, including:

1 (i) information about the risks of adverse reactions to  
2 immunization;

3 (ii) information that failure to complete the required vaccination  
4 schedule increases risk to the person and others of contracting or carrying a  
5 vaccine-preventable infectious disease; and

6 (iii) information that there are persons with special health needs  
7 attending schools and child care facilities who are unable to be vaccinated or  
8 who are at heightened risk of contracting a vaccine-preventable communicable  
9 disease and for whom such a disease could be ~~life-threatening~~ life threatening.

10 (b) The Department of Health may provide by rule for further exemptions  
11 to immunization based upon sound medical practice.

12 (c) A form signed pursuant to subdivision (a)(3) of this section and the fact  
13 that such a form was signed shall not be:

14 (1) construed to create or deny civil liability for any person; or

15 (2) admissible as evidence in any civil proceeding.

16 (d) In the event that a school or child care facility's immunization rate  
17 drops below 95 percent for any required immunization, use of the religious  
18 exemption set forth in subdivision (a)(3) of this section shall be suspended  
19 with respect to that immunization until the Commissioner of Health determines  
20 that the school or child care facility's immunization rate has achieved or  
21 exceeded the 95 percent threshold.

1        (e) As used in this section, “health care practitioner” means a person  
2        licensed by law to provide professional health care services to an individual  
3        during the course of that individual’s medical care or treatment.

4        Sec. 2. EFFECTIVE DATE

5        This act shall take effect on July 1, 2020.