

**HOUSE . . . . . No. 2151**

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**The Commonwealth of Massachusetts**

PRESENTED BY:

***Paul J. Donato and Rebecca L. Rausch***

*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:
<i>Paul J. Donato</i>	<i>35th Middlesex</i>	<i>1/19/2023</i>
<i>Rebecca L. Rausch</i>	<i>Norfolk, Worcester and Middlesex</i>	<i>1/20/2023</i>
<i>Jack Patrick Lewis</i>	<i>7th Middlesex</i>	<i>1/25/2023</i>
<i>David Henry Argosky LeBoeuf</i>	<i>17th Worcester</i>	<i>1/31/2023</i>
<i>Carmine Lawrence Gentile</i>	<i>13th Middlesex</i>	<i>2/7/2023</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>2/14/2023</i>
<i>Vanna Howard</i>	<i>17th Middlesex</i>	<i>2/14/2023</i>
<i>Samantha Montaño</i>	<i>15th Suffolk</i>	<i>2/14/2023</i>
<i>Erika Uyterhoeven</i>	<i>27th Middlesex</i>	<i>2/22/2023</i>
<i>Natalie M. Higgins</i>	<i>4th Worcester</i>	<i>6/27/2023</i>

**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 Massachusetts**

**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:*

1 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 Section 15D of said chapter 76, as so appearing, is hereby repealed.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 111O 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.

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

34 “Immunization”, an inoculation administered for the purpose of making a person resistant  
35 to an infectious disease.

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

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

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

43 “Schedule”, the immunization administration schedule established by the department and  
44 consistent with generally accepted medical practice.

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

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

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

63         Section 5. The department shall prepare and maintain separate standardized declaration of  
64 exemption forms for medical and religious exemptions to required vaccinations. The department  
65 shall make the forms available to covered programs and the public online and, as necessary, in  
66 hard copy. Covered programs shall provide a declaration of exemption form to a  
67 responsible adult or a participant only upon request.

68         Section 6. The declaration of medical exemption form shall include, without limitation:  
69 (i) a checklist of generally accepted contraindications to immunizations that shall be completed  
70 by a provider; (ii) a statement that the provider has an established provider-patient relationship  
71 with the participant; (iii) a request for the signature of the provider; (iv) a request for a unique  
72 government-issued professional identification number assigned to the provider; (v) a request for  
73 the signature of the responsible adult; and (vi) requests for dates for all signatures.

74 Section 7. The declaration of religious exemption form shall include, without limitation:  
75 (i) a statement that the participant or responsible adult has a sincere religious belief conflicting  
76 with immunizations; (ii) a certification that the responsible adult has provided a complete and  
77 accurate copy of the religious exemption declaration to the participant's primary health care  
78 provider, including the provider's name and contact information; (iii) an acknowledgement of  
79 receipt from a provider on the participant's primary health care team; and (iv) a request for the  
80 dated signature of the responsible adult. The form shall include a statement from the department  
81 that refusing to immunize is against public health policy and may result in serious illness or  
82 death of the participant or others. The department may provide alternative requirements to  
83 clauses (ii) and (iii) of this section if a participant does not have a primary health care provider.  
84 The form shall not require disclosure of a participant's particular religious beliefs.

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

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

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

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

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

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

107           Section 12. The department shall annually publish immunizations and exemptions data,  
108 delineated by exemption type, as applicable, for each covered program and school district on its  
109 website and may publish such data in hard copy. The department may also publish data by  
110 municipality, county, or other geographic designation, or by other criteria in its discretion.

111 Publication shall not be required whenever doing so would result in disclosure of personal  
112 information as defined in section 1 of chapter 93H or otherwise violate applicable privacy laws.  
113 The department shall directly disseminate electronic copies of any published data to the school  
114 physician or nurse assigned to any public covered program pursuant to section 53 of chapter 71.

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

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

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

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

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



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

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

149 Section 18. The department shall collect and report data on immunizations against any  
150 infectious disease which has given rise to a declared public health state of emergency in the  
151 commonwealth. Daily immunization data reports, which the department shall publish on its  
152 website, shall include the number of individuals receiving the immunization, delineated by age  
153 and geographic location, including municipal, county, and statewide counts. The department  
154 shall collect infectious disease immunization data by key socioeconomic and demographic  
155 indicators, including race, gender, ethnicity, disability, sexual orientation and gender identity,  
156 primary language, occupation, household income, residence in elder care facilities and other  
157 congregate care settings, and housing status, and report such data on its website not less than  
158 weekly, except where publication would result in disclosure of personal information as defined  
159 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.