HOUSE DOCKET, NO. 3131 FILED ON: 1/16/2025

HOUSE . . . . . No. 2384

The Commonwealth of Massachusetts

PRESENTED BY:

Mark J. Cusack

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 relative to provider choice.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
Mark J. Cusack	*5th Norfolk*	*1/16/2025*

HOUSE DOCKET, NO. 3131 FILED ON: 1/16/2025

HOUSE . . . . . No. 2384

By Representative Cusack of Braintree, a petition (accompanied by bill, House, No. 2384) of Mark J. Cusack relative to the Vaccine Program Advisory Council. Public Health.

The Commonwealth of Massachusetts

In the One Hundred and Ninety-Fourth General Court
(2025-2026)

An Act relative to provider choice.

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. Section 24N of Chapter 111 of the General Laws, as appearing in the 2022 Official Edition, is hereby amended by striking out paragraph (c) in its entirety and inserting in place thereof the following paragraph:-

(c) There shall be a vaccine program advisory council consisting of the commissioner of public health or a designee, who shall serve as chair; the medical director of the universal immunization program of the department of public health established under section 24I; the executive director for the center for health information and analysis or a designee; the executive director of the commonwealth health insurance connector authority or a designee; 1 person to be appointed by the director of Medicaid, who shall be a representative of managed care organizations contracting with MassHealth; 3 persons to be appointed by the commissioner of insurance, each of whom shall be a representative of 1 of the 3 health insurance companies having the most insured lives in the commonwealth; and 7 persons to be appointed by the commissioner of public health, 1 of whom shall be a representative of an employer that self-

insures for health coverage who shall be appointed from lists of nominees submitted by statewide associations of employers, 1 of whom shall be a member of the Massachusetts Medical Society, 1 of whom shall be a member of the Massachusetts chapter of the American Academy of Pediatrics, 1 of whom shall be a member of the Massachusetts Academy of Family Physicians, and 3 of whom shall be physicians licensed to practice in the commonwealth and who shall have expertise in the area of childhood vaccines. The council shall recommend the amount of funding needed each fiscal year by calculating the total non-federal program cost.

SECTION 2. Section 24N of Chapter 111 of the General Laws, as so appearing, is hereby amended by striking out paragraph (d) in its entirety and inserting in place thereof the following paragraph:-

(d) Under regulations adopted by the commissioner of public health, each surcharge payor in the commonwealth shall pay to the commissioner of public health, for deposit in the Vaccine Purchase Trust Fund, a routine childhood immunizations surcharge assessed by the commissioner. By January 1 of each year, the commissioner of public health shall determine the total amount of the surcharge for the current fiscal year by determining the final amount required to be included in the Vaccine Purchase Trust Fund for the current fiscal year to cover the estimated costs to purchase, store and distribute immunizations for routine childhood immunizations and to administer the fund and the immunization registry, established pursuant to section 24M. The amount shall take into consideration the limitations on expenditures described in subsection (b) any anticipated surplus or deficit in the trust fund, and shall exclude any costs anticipated to be covered by federal contribution. Any increase in the surcharge amount for the prior fiscal year shall not be more than the percentage set as the health care cost growth benchmark, established under section 9 of chapter 6D, unless the commissioner of public health

submits a detailed report to the clerks of the house of representatives and senate who shall forward the report to the house and senate committees on ways and means, the house and senate chairs of the joint committee on public health and the house and senate chairs of the joint committee on health care financing explaining the need for the increase.

SECTION 3. Chapter 111 of the General Laws, as so appearing, is hereby amended by inserting after section 244 the following section:-

Section 245. (1) The department shall implement a provider immunization brand choice requirement as part of the Commonwealth's universal immunization program pursuant to sections 24I and 24N of chapter 111; the vaccines for children program operated by the department under the authority of 42 U.S.C. §1396s; and in any other existing or future immunization program for children or adults administered through the state using local, state or federal funds.

(2) Pursuant to the provider immunization brand choice requirement, for all categories of immunizations included in the programs described in paragraph (1) of this section, all healthcare providers participating in these programs must be able to select any brand or type of any immunization (including any combination immunization and dosage form), as long as the immunization is licensed or authorized for emergency use by the federal Food and Drug Administration and recommended by the national Centers for Disease Control and Prevention Advisory Committee on Immunization Practices. The department may not limit the ability of such healthcare providers to provide an immunization by limiting the supply of immunizations purchased by the department This section shall not apply in the event of a shortage or delay in

vaccine availability, disaster or public health emergency, terrorist attack, hostile military or paramilitary action, or extraordinary law enforcement emergency.

Use of Vaccine Lists. The department shall use, for the purpose of the purchase, delivery and administration of vaccines, the CDC vaccine list established (and periodically reviewed and, as appropriate, revised) by the Advisory Committee of Immunization Practices, an advisory committee established by the US Secretary of Health and Human services acting through the Director of the Centers for Disease Control and Prevention.

(3) The department shall implement all or part of the provider immunization brand choice requirement as soon as it is determined to be feasible, provided, however, that the department shall complete full implementation of the system not later than July 1, 2025.