

**Committee on Public Health
Bill Summary**

Bill No. H2384
Title: *An Act relative to provider choice*
Sponsor: Representative Mark Cusack
Committee: Public Health
Hearing Date: June 6, 2025
Similar Matters: S1514
Prior History: New file
Reporting Deadline: August 5, 2025

Current Law:

- **M.G.L. Chapter 111 § 24N** pertains to the childhood vaccine program led by the Department of Public Health (DPH) and is responsible for recommending the types of vaccines to be purchased by the Commonwealth based on a list of routine childhood immunizations. This section also pertains to the Vaccine Purchase Trust Fund, which funds the universal purchase system for routine childhood immunizations in the Commonwealth and covers the costs to purchase, store, and distribute vaccines for routine childhood immunizations.
- **M.G.L. Chapter 111** pertains to public health.

Summary:

This bill permits healthcare providers involved with the Commonwealth's universal immunization program to choose any brand or type of vaccine that meets certain FDA requirements and CDC recommendations. Requires DPH to implement a provider immunization brand choice requirement as part of the Commonwealth's universal immunization program and prohibits DPH from restricting providers' ability to offer immunizations by limiting the supply purchased

Section 1

This section removes the council's role of recommending vaccine types to be purchased. This section also requires the council to make recommendations to the commissioner of public health on whether the commissioner may authorize provider choice of multiple comparable brands or types for routine childhood immunizations, as well as the assessment of the feasibility, costs, and benefits associated with such choices. Removes the requirement that the commissioner of public health must determine the final vaccines to be purchased.

Section 2

This section removes the requirement that the commissioner of public health submit an analysis of cost savings generated by use of the state vaccine purchasing discount when an increase in surcharge amount for the Vaccine Purchase Trust Fund is caused by the purchase of new vaccines and the authorization of provider choice for certain vaccines as recommended by the council.

This section also removes the requirement that the commissioner of public health provide an annual notice to Vaccine Purchase Trust Fund surcharge payors of the assessment amount related to the routine childhood immunizations surcharge for the trust fund year. Removes the requirement that surcharge payors pay the routine childhood immunizations surcharge on a regulated schedule that ensures sufficient funds for the trust fund. This section removes the requirement that each payor of the routine childhood immunizations surcharge pay a portion of the total amount of the surcharge proportional to their payments subject to surcharge during the most recent period for which data is available.

Section 3 adds a new section to MGL Chapter 111, section 245.

Section 245:

(1) Mandates DPH to implement a provider immunization brand choice requirement as part of the Commonwealth's universal immunization program, which includes DPH's childhood vaccine program and any other current or future immunization initiatives for both children and adults funded at local, state, or federal levels.

(2) For all categories of immunizations included in the programs described in paragraph (1) of this section, all healthcare providers involved in these programs are permitted to choose any brand or type of vaccine (including combination vaccines) that is FDA-licensed or authorized for emergency use and recommended by the CDC Advisory Committee on Immunization Practices (ACIP). DPH may not restrict providers' ability to offer immunizations by limiting the supply purchased. This requirement would not apply during events of vaccine shortages, public health emergencies, or other significant threats.

DPH must use the CDC vaccine list established and periodically updated by the ACIP for purchasing, delivering, and administering vaccines.

(3) DPH must implement this provider immunization brand choice requirement as soon as feasible, with full implementation by July 1, 2025.