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(PRE-FILED)

#### 2lr0052

#### By: Chair, Education, Health, and Environmental Affairs Committee (By Request – Departmental – Health)

Requested: October 5, 2021 Introduced and read first time: January 12, 2022 Assigned to: Education, Health, and Environmental Affairs

### A BILL ENTITLED

#### 1 AN ACT concerning

# Department of Health – ImmuNet and Statewide Advisory Commission on Immunizations

FOR the purpose of repealing the exemption for certain health care providers or agents
from the requirement to provide individuals receiving vaccinations with certain
documents, notify the individuals or the parent or guardian of a minor of a certain
right, and report all vaccines administered to ImmuNet; altering the membership of
and term limits for members of the Statewide Advisory Commission on
Immunizations; and generally relating to ImmuNet and the Statewide Advisory
Commission on Immunizations.

- 11 BY repealing and reenacting, with amendments,
- 12 Article Health General
- 13 Section 18–109(d)(6) and 18–214
- 14 Annotated Code of Maryland
- 15 (2019 Replacement Volume and 2021 Supplement)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
 That the Laws of Maryland read as follows:

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## Article – Health – General

19 18–109.

20 (d) (6) [(i) Except as provided in subparagraph (ii) of this paragraph, a] A 21 health care provider who administers a vaccine, or the agent of the health care provider, 22 shall:

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW. [Brackets] indicate matter deleted from existing law.



$rac{1}{2}$	[1.] (I) Provide the individual with a copy of the form and the brochure described in paragraphs (2) and (4) of this subsection;							
$\frac{3}{4}$	[2.] (II) Notify the individual or the parent or guardian of a minor of the right to refuse to disclose to ImmuNet; and							
5	[3.] (III) Report to ImmuNet all vaccines administered.							
6 7 8 9	[(ii) Subparagraph (i) of this paragraph does not apply to a health care provider, or an agent of a health care provider, who administers a vaccine in a nursing facility, an assisted living program, a continuing care retirement community, or a medical day care program.]							
10	18–214.							
$\begin{array}{c} 11 \\ 12 \end{array}$	(a) In this section, "vaccine" means a product intended to elicit, in humans, active or passive immunity against an infectious agent or product of an infectious agent.							
13	(b) There is a Statewide Advisory Commission on Immunizations.							
$\begin{array}{c} 14 \\ 15 \end{array}$	(c) The [Commission consists of the] following members SHALL SERVE WITHOUT TERM LIMITS:							
16 17 18 19	(1) [One physician member of MedChi, The Maryland State Medical Society;] THE STATE SUPERINTENDENT OF SCHOOLS OR THE STATE SUPERINTENDENT'S DESIGNEE WITH KNOWLEDGE OF THE IMMUNIZATIONS REQUIRED OF CHILDREN ENTERING SCHOOLS;							
$\begin{array}{c} 20\\ 21 \end{array}$	(2) The chair of the Maryland Childhood Immunization Partnership, OR THE CHAIR'S DESIGNEE;							
$\begin{array}{c} 22 \\ 23 \end{array}$	(3) [Two physician members of the Maryland Chapter of the American Academy of Pediatrics with experience in private practice and infectious diseases;							
24	(4) One physician member of the Maryland Academy of Family Physicians;							
$\frac{25}{26}$	(5) One physician member of the American College of Physicians – Internal Medicine Society of Maryland;							
27	(6) The executive director of the Maryland Partnership for Prevention;							
28	(7)] One local health officer;							
29 30	[(8)] (4) One representative from the Department's Vaccines for Children Program; AND							

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1 [(9) One representative from the Maryland school system with knowledge 2 of the immunizations required of children entering schools;]

3		<b>[</b> (10) <b>] (5)</b>	The Maryland State Epidemiologist[;].					
4	(D)	THE FOLLOWING MEMBERS ARE SUBJECT TO TERM LIMITS:						
$5 \\ 6$	group;	<b>[</b> (11) <b>] (1)</b>	One representative from a public health consumer advocacy					
7		<b>[</b> (12) <b>] (2)</b>	One nurse practitioner;					
8		<b>[</b> (13) <b>] (3)</b>	One representative from a health insurance carrier;					
9		<b>[</b> (14) <b>] (4)</b>	One consumer; [and]					
10		<b>[</b> (15) <b>] (5)</b>	One pharmacist;					

11 (6) ONE PHYSICIAN MEMBER OF MEDCHI, THE MARYLAND STATE 12 MEDICAL SOCIETY;

13(7) Two physician members of the Maryland Chapter of the14American Academy of Pediatrics with experience in private practice15AND INFECTIOUS DISEASES;

16 (8) ONE PHYSICIAN MEMBER OF THE MARYLAND ACADEMY OF 17 FAMILY PHYSICIANS;

18 (9) ONE PHYSICIAN MEMBER OF THE AMERICAN COLLEGE OF 19 PHYSICIANS – INTERNAL MEDICINE SOCIETY OF MARYLAND; AND

20 (10) UP TO THREE ADDITIONAL MEMBERS SELECTED BY THE 21 SECRETARY.

[(d)] (E) [The] EXCEPT FOR THE MEMBERS LISTED IN SUBSECTION (C)(1) AND (2) OF THIS SECTION, THE Secretary shall appoint the membership of the Commission, based on the recommendation of the appropriate medical society or agency.

[(e)] (F) (1) The Secretary, in consultation with MedChi, The Maryland State
 Medical Society, shall appoint the chair of the Commission.

27 (2) The chair of the Commission shall:

(i) Establish subcommittees to facilitate the work of theCommission; and

Appoint subcommittee chairs from among the Commission 1 (ii)  $\mathbf{2}$ members. 3 [(f)] (G) (1)THIS SUBSECTION APPLIES ONLY TO MEMBERS WHO ARE 4 SUBJECT TO TERM LIMITS.  $\mathbf{5}$ (2) The term of an appointed member is [3] 4 years. 6 A member who is appointed after a term has begun serves only for the (2)7rest of the term and until a successor is appointed and gualifies. 8 (3)At the end of a term, a member continues to serve until a successor is 9 appointed and qualifies. 10 (4)A member may be appointed for more than one term.] 11 (3) SUBJECT TO PARAGRAPH (5) OF THIS SUBSECTION, A MEMBER 12MAY SERVE TWO CONSECUTIVE TERMS. 13AT THE END OF A TERM, A MEMBER CONTINUES TO SERVE UNTIL (4) 14A SUCCESSOR IS APPOINTED AND QUALIFIES. 15(5) A MEMBER WHO SERVES TWO CONSECUTIVE FULL 4-YEAR TERMS 16 MAY NOT BE REAPPOINTED FOR 4 YEARS AFTER THE COMPLETION OF THOSE TERMS. 17**[**(5)**] (6)** The terms of the members of the Commission are staggered as 18required by the terms provided for the members of the Commission on June 1, 2010. 19 IF A VACANCY FOR AN APPOINTED MEMBER OF THE COMMISSION **(H)** 20OCCURS, THE SECRETARY SHALL PROMPTLY APPOINT A SUCCESSOR. 21[(g)] (I) A member of the Commission may not receive compensation but is 22entitled to reimbursement for expenses under the Standard State Travel Regulations, as 23provided in the State budget. The Department shall provide the staffing for the Commission. 24[(h)] (J) (i)] (K) The Commission shall: 2526Determine where community vaccine shortages exist and which (1)27vaccines are in short supply; 28Develop a recommendation for a plan to effectuate the equitable (2)29distribution of vaccines;

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1	(3)	Revie	w:							
$\frac{2}{3}$	immunizations;	(i)	Potential	provider	reimburs	sement	barriers	to	incre	asing
4 5	public about the b	(ii) The relative effectiveness of outreach programs that educate the blic about the benefits of immunizations;								
$6 \\ 7$	(iii) Potential cost–shifting of immunization expenses for privately insured patients who receive immunizations at local health departments; and									
8 9	purchasing of vacc	(iv) cines;	Potential	administ	rative bu	urdens	associate	d v	vith	State
$10 \\ 11 \\ 12 \\ 13$	(4) Based on the review required under item (3) of this subsection, make recommendations on how to increase immunizations, including catch-up immunizations, among adults, adolescents, and children who are recommended to receive immunizations; and									
$\begin{array}{c} 14 \\ 15 \end{array}$									es as	
16		(i)	Immuniza	tions requi	ired of chi	ldren en	tering sch	ools;		
$17 \\ 18 \\ 19$	(ii) All available options for the purchasing of vaccines, including the development of a Universal Vaccine Purchasing System, or a similar program to increase access to necessary vaccines, for the State;								0	
$20 \\ 21 \\ 22$	(iii) An update on the status of the use of thimerosal in vaccines, including the availability and affordability of thimerosal–free vaccines, and any other issue related to the use of thimerosal in vaccines that is identified by the Commission;									-
23		(iv)	Eliminatio	on of any v	accine dist	tribution	n disparitie	es;		
$\begin{array}{c} 24 \\ 25 \end{array}$	or public health er	(v) nergen		ducation c g immuniz			vent of a v	accir	ıe sho	rtage
$\frac{26}{27}$	childhood vaccines	(vi) 8.	The avail	ability an	d afforda	bility o	f adult, a	ıdole	scent,	and
$\begin{array}{c} 28\\ 29 \end{array}$	[(j)] (L) on vaccine safety k		Commission nunicated (				oartment t	hat i	nform	ation
$30 \\ 31 \\ 32$	[(k)] (M) report on its findi 2–1257 of the S	ings ar		endations t	to the Gov	vernor a	ind, in acc	orda	ince w	vith §

Environmental Affairs Committee and the House Health and Government Operations
 Committee.

3 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect July 4 1, 2022.