



Association of
Immunization
Managers

AIM Legislative Round-up: April 18, 2025

Four state legislative sessions have ended since the last round-up and another 13 state legislative sessions will end next month. While many of the **528** vaccine-related bills AIM is tracking have already failed, several remain in the pipeline. A summary of new legislative movement over the last two weeks is provided below.

Are you being asked to develop talking points or provide testimony for a vaccine-related bill? Visit our [Policy Toolkit](#) or reach out to [Brent Ewig](#) for individualized support.

Legislation Enacted (3 bills):

- [ID H 135](#): Removes immunization services from the list of those that do not require verification of lawful presence in the United States
- [ID S 1210](#): Prohibits the mandate of any medical intervention, including vaccines, in the state (excluding facilities who receive Medicaid/Medicare and [pending legal interpretation] schools)
- [KS SB 29](#) (*Veto Override by Legislature*): Restricts public health officials' authority to require isolation/quarantine and prohibit public gathering

Legislation Vetoed (3 bills):

- **AZ HB 2063**: Would have required that communications related to school vaccine requirements include information about obtaining an exemption
- **AZ HB 2058**: Would have specified that students over the age of 18 can submit their own personal belief exemption to vaccines required at colleges/universities
- **AZ HB 2012**: Would have prohibited requirements for products under FDA emergency use authorization

Legislation Passed Both Chambers (14 bills):

- **AR HB 1131**: Allows registered nurses to delegate vaccinating authority (amongst other tasks) to medical assistants
- **AR HB 1580**: Requires that any school parental communications about vaccines also include information about type 1 and type 2 diabetes
- **AR HB 1619**: Requires the state Medicaid program reimburse at the same rate as Vaccines for Children (VFC) for RSV immunization administration, prohibiting civil liability against providers who provide such immunizations
- **AZ HB 2257**: Prohibits using one's vaccination status when making foster care placement decisions
- **AZ HB 2514**: Specifies a Parental Bill of Rights, one component of which emphasizes the right of parents to exempt their children from immunizations
- **HI HB 72**: Requires that pharmacy technicians be registered to perform their duties (including administering vaccinations)

- **MD HB 1315:** Requires all health insurers cover all visits for and costs of childhood and adolescent immunizations, as well as specifies vaccines pharmacists can administer
- **MD HB 974:** Allows the health commissioner to adopt regulations as needed to ensure health insurers cover all vaccines recommended by the Advisory Committee on Immunization Practices (ACIP)
- **ME LD 917 (HP 852):** Repeals a provision of law stating that healthcare providers can't charge uninsured patients for COVID-19 vaccines
- **TN SB 1272:** States a child in state custody cannot be denied admission to any school if the child has not been immunized or is unable to produce immunization records
- **TN SB 827:** Removes vaccine requirements for private schools that are fully online
- **WA HB 1531:** Prohibits any additional (and nullifies any current) statutes, ordinances, rules, or policies that prevent health officials from implementing and promoting evidence-based, appropriate measures to control the spread of communicable diseases, including vaccines
- *Note: Two non-vaccine-related bills in West Virginia, WV HB 2402 and WV HB 2776, had amendments added to include school vaccine requirement exemptions (after stand-alone legislation had failed earlier in the session). These amendments were ultimately removed before these bills passed both chambers. This means West Virginia law still only allows for medical exemptions, conflicting with the governor's executive order allowing for religious and philosophical exemptions.*

Legislation Passed First Chamber (11 bills):

- **AL SB 101:** Would state minors under the age of 18 can't consent to vaccination, unless they are married, divorced, pregnant, emancipated, or living independently (current law states minors 14 and older can consent to their own medical care)
- **AR SB 255:** Would require food be labeled if it contains vaccine or vaccine material (specifically calling out mRNA vaccines)
- **CO SB 25-196:** Would state that if ACIP is repealed, modified, or otherwise not in effect, the commissioner can still require that vaccines be covered by insurers
- **IA SF 304:** Would specify vaccinations do not fall under the scope of STI prevention care that minors can consent to without parental approval
- **IL HB 1073:** Would amend the college/university Tdap vaccine requirement to allow one dose in the last 10 years (instead of all three required doses) if the student is in the process of completing catchup
- **IL SB 2494:** Would specify that respiratory care practitioners with appropriate training are allowed to vaccinate those 18 and older
- **MT LC 2683:** Would prohibit local boards of health from requiring a vaccine as a condition of release from isolation and quarantine
- **NC SB 335:** Would add "administration of a vaccine or medication" to the scope of pharmacy practice
- **TN SB 1389:** Would prohibit providers who participate in Medicaid (or CoverKids) from refusing to see/treat patients due to vaccine refusal

- **TN SB 263:** Would prohibit the enforcement and recognition of requirements or mandates issued by the World Health Organization (WHO)
- **TX SB 95:** Would allow for civil suit if informed consent for vaccination is not obtained

Legislation Newly Introduced (16 bills):

- New bills largely mirror previous themes involving anti-discrimination due to vaccine status (LA HB 555, LA HB 629, NY A 7642, & NY S 7207), expanding professional authority to vaccinate (NY S 7730, NY A 7692, & NY A 7988), prohibiting the use of mRNA vaccines (LA HB 419, MN HF 3152, & NY S 7342), restricting vaccine requirements (NC HB 803), and specifying the informed consent needed for vaccination (LA HB 400).

Please note: AIM is striving to monitor fast-moving state legislative developments. The information included in this summary may not be comprehensive and is subject to change. If you are aware of missing information, **please contact AIM Chief Government Relations and Policy Officer Brent Ewig (bewig@immunizationmanagers.org)**.

