



AIM Legislative Round-up: March 13, 2026

With the 2026 sessions now well underway, states are entering a decisive phase as deadlines tighten and hearing schedules fill up. Many legislatures are approaching crossover dates, narrowing which bills remain active as lawmakers refine priorities and major policy decisions begin to take shape. AIM is now tracking **396 bills** that were prefilled, introduced, or advanced in the legislative process since August 1 that could impact immunization programs. An overview of legislative movement over the last two weeks is provided below.

Enacted: 4 Bills* and 1 Resolution

- [NM HB 156](#) removes the expiration date from prior Special Session legislation that established the U.S. Department of Health and Human Services' authority over vaccine requirements and purchases (rather than the Advisory Committee on Immunization Practices (ACIP)). The underlying provision was passed in October.
- [NM HB 306](#) prohibits health care facilities from charging any fees associated with receiving a vaccine in an outpatient setting
- [OR HB 4135](#) designates March 4 of each year as HPV Awareness Day, noting the need for increased vaccination
- [VA HJ 24](#) designates August as Immunization Awareness Month in the state
- [WA HB 2242](#) removes mention of ACIP in statute and allows for the department to purchase vaccines outside of federal contracts if needed
- **WY SF 121 was also enacted and had a component that would have authorized pharmacists to vaccinate down to age 3 (currently age 7) but it was removed from the final bill*

Passed Second Chamber: 1 Bill

- [OR SB 1598](#) allows the public health officer to specify vaccines that require insurance coverage and to issue respective standing orders for their administration outside of ACIP

Passed First Chamber: 11 Bills

- [AZ AB 1212](#) would state that health insurers can't reimburse health professionals at a different rate based on their provider's patient panel vaccination rate
- [FL SB 1756](#) would prohibit discrimination based on vaccine status, require that parents sign a form prior to vaccination noting they have been briefed on risks, benefits, safety, and efficacy, as well as require alternative vaccine schedule options (Note: Florida House Speaker Daniel Perez [stated](#) the bill would not move forward in the FL House).
- [HI SB 3133](#) would establish a Hawaii Preventative Services Advisory Committee, authorized to establish coverage and provider scope of practice authority for vaccines outside of ACIP

- [NY S 5340](#) would allow medical assistants to vaccinate in an outpatient office setting under the direct supervision of a physician or a physician assistant
- [NY S 5706](#) would allow nursing students to administer certain vaccines (to specific ages under specific circumstances)
- [NY S 5852](#) would specify provider payment for vaccines by insurers must include the CDC private sector dose cost + 21% minimum for shipping/handling/storage + administration/ancillary supplies cost
- [NY S 7025](#) would allow pharmacy technicians to administer any vaccine that pharmacists can administer (if under their supervision)
- [NY S 8334](#) would add COVID-19 vaccines to the list that are required to be covered by insurers
- [NY S 8496](#) would list the American Academy of Pediatrics (AAP), American College of Obstetricians and Gynecologists (ACOG), American College of Physicians (ACP) and the commissioner alongside ACIP, for statutes related to provider scope of practice and insurance coverage
- [NY S 8853](#) would list AAP, ACOG, ACP and the commissioner alongside ACIP, for statutes related to school entry requirements, newborn immunization schedules and immunization information for young children on public assistance
- [OK SB 1484](#) would require autopsy reports for children who die suddenly to list all vaccines received in the last 90 days, and report such deaths to the Sudden Unexpected Infant Death (SUID) and Sudden Death in the Young (SDY) Case Registry

Newly Introduced: 13 Bills

- **Seven** new bills involve vaccine requirements
 - KS SB 522 would broadly prohibit all medical intervention mandates in the state, defined to include vaccines
 - KY HB 875 would allow non-public school students to participate in public school athletics if, in-part, they adhere to the same vaccine requirements
 - LA HB 737 would remove meningococcal vaccine requirements for students
 - LA HB 742 would repeal the requirement that a recipient of Medicaid or the Family Independence Temporary Assistance Program (FITAP) be immunized as a condition of eligibility
 - LA HB 926 would enact the Louisiana Medical Freedom act, prohibiting vaccines from being required by employers, public services and businesses and prohibiting discrimination based on one's vaccination status
 - MN SF 4017 would increase the requirements for obtaining a conscientious exemption to immunizations, including that the form must now be notarized and requiring consultation with a provider prior to receiving
 - MN SF 4007 would broadly prohibit vaccine requirements in the state, with a carve out for those required for school and colleges/universities

- **Two** new bills involve expanding the types of vaccines that pharmacists can administer to include all routine vaccines (RI HB 7934 and RI SB 2856)
- **Two** new bills would require a poster to be displayed in healthcare facilities on preventing shoulder injuries during vaccination (MN HF 3880 and MN SF 4089)
- **One** new bill would specify the entities that immunization registry data can be released to approved agencies, unless the parent/guardian objects (RI HB 7936)
- **One** new bill would prohibit financial incentives or penalties to encourage healthcare providers to administer vaccinations (LA HB 452)

Other Legislative Movement: 48 Bills

- **Forty-eight** bills that were previously introduced had some other form of legislative movement, short of passing the entire chamber (i.e., additional readings, additional cosponsors, committee assignments, and/or committee votes).

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 or have additional questions, **please contact the Association of Immunization Managers** (info@immunizationmanagers.org).