

NVIC's 2023 Annual Report on US State Vaccine Legislation

Analysis by The NVIC Advocacy Team

November 02, 2023

Record Breaking Number of Bills Worth Supporting Pass in State Legislatures This Year

In 2023, more vaccine related state legislation that NVIC supported has passed into law than in any other year. The COVID-19 pandemic provided an historic opportunity to inspire and encourage active citizen involvement in order to educate state legislators about the urgent need to protect the human and legal right to exercise voluntary, informed consent to vaccination.

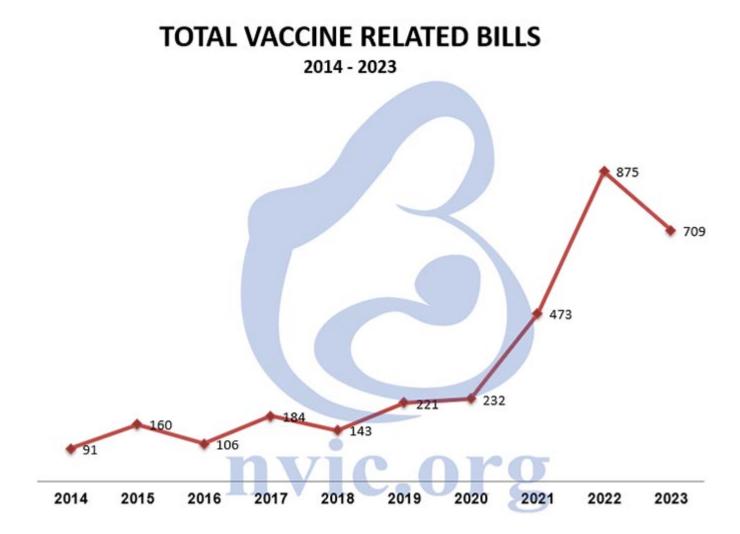
The impact of change from our 14 years of grassroots organizing and focused public education efforts is clear. This year's NVIC's 2023 Annual Report on U.S. State Vaccine Legislation provides evidence the tide has turned to support our 41-year mission to prevent vaccine injuries and deaths through public education and to secure vaccine informed consent protections in U.S. public health policies and laws.

2023 Session Has Vaccine Related Bills Filed in Every State and D.C.

The non-profit educational charity National Vaccine Information Center (NVIC) reports that during the 2023 legislative session up until October 17, 2023, NVIC analyzed, tracked and issued positions on 709 vaccine related bills in all 50 states and the District of Columbia (D.C.) through the NVIC Advocacy Portal.

This was the first year in the history of NVIC's state-based legislative advocacy program since establishment in 2010 that vaccine bills related to NVIC's mission were filed in

every state and D.C. in a single legislative session. The 709 bills tracked by NVIC on the Portal in 2023 is the second largest amount of bills publicly tracked over the last 14 sessions, and second only to 2022's 875 bills.



Since its establishment in 1982, NVIC has provided well-referenced and accurate information to the public about vaccine science, policy, and law, and defended the ethical principle of informed consent to medical risk taking. NVIC does not make vaccine use recommendations.

NVIC is opposed to mandatory vaccination and has worked with families and state legislators to prohibit new vaccine mandates and retain or secure flexible medical, religious and conscientious belief exemptions in existing U.S. public health policies and laws.

In 2010, NVIC launched the NVIC Advocacy Portal (NVICAP), a free online vaccine choice advocacy network, for the purpose of securing and defending informed consent protections in U.S. vaccine policies and laws.

Over the last 14 years, the NVIC Advocacy Program has analyzed, tracked, and issued positions on over 3,000 vaccine-related bills.

The NVIC Advocacy Portal Team works collaboratively and shares legislative information with U.S. health freedom groups and individuals supporting NVIC's 42-year call for the protection of vaccine informed consent rights in America.

Alongside volunteer NVIC Advocacy state directors and mission aligned groups, NVIC works with families and enlightened health care professionals to educate legislators and their staff to protect vaccine informed consent rights by advocating for voluntary vaccination.

NVICAP staff update bill posts throughout the bill's life to include what advocacy actions NVIC staff recommends to help pass, defeat, or amend a bill. For the highest priority bills, the NVIC Advocacy Team issues action alerts that are distributed through email, online NVICAP posts, social media, and NVIC's text alert program. The NVIC Advocacy Team provides NVICAP users accurate and referenced vaccine information and talking points to educate legislators and their staff.

At the time this report was written in October 2023, some states still had active vaccinerelated bills filed for 2023, or the states' legislative sessions were in recess but still could be reactivated to work on bills. Some states have bills that will carry over until their next session in 2024.

For these reasons, it is especially important for registered users of the Portal to regularly check NVICAdvocacy.org because end of year legislative activity requiring your help in taking action is still possible.

Information about all bills referenced in this report are published on the NVIC Advocacy Portal. Registered users can obtain a more detailed bill analysis, current bill status,

NVIC's position on each bill, and any recommended action. The bills displayed are those current for this year.

To view all other bills included on the NVIC Advocacy Portal since 2010, you can select the display setting on the righthand side to view "Expired" bills. This provides a unique and historical perspective not offered on any other advocacy website.

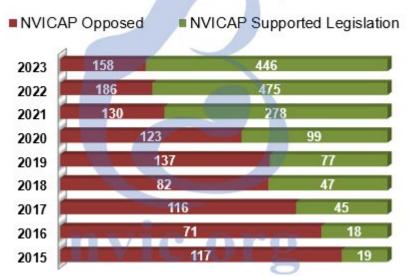
Some bills published on the NVICAP contain language that falls outside of NVIC's mission. Bill analysis and NVIC positions published on the Portal are focused on sections that fall within NVIC's mission. NVIC does not take a position on the rest of the bill's provisions that fall outside of NVIC's mission.

Ratio of Bills Worth Supporting vs Opposing Highest in 2023

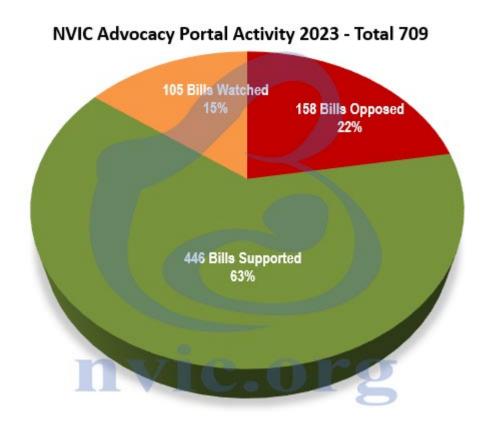
During the 2023 legislative session, NVIC tracked 709 bills, of which 446 bills were worthy of NVIC's support, and only 158 bills were designated to oppose.

2023 marks the third consecutive year in which NVIC supported more vaccine-related bills than we opposed with almost three times (2.83) as many vaccine bills introduced in state legislatures that NVIC supported than opposed. This is the highest ratio of supported bills to opposed bills since the launch of the NVIC Advocacy Program.





There were 105 bills tracked on NVICAP in 2023 that were marked as a bill to "WATCH." The "WATCH" category is usually designated because NVIC's analysis indicates the bill may have been well-intentioned and may even have some sections worth supporting, but the bill contained problem language. If the problems can be readily fixed with amendments, that is indicated on the bill post. Residents of every state use this information to share with their legislators.

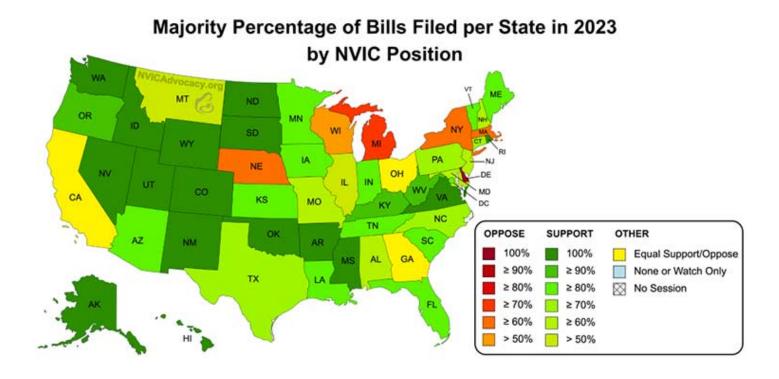


When comparing the number of bills NVIC supported to those opposed, an impressive record breaking 42 states and D.C. had more bills filed that were worthy of supporting than opposing.

This number increased from an already impressive 32 states in 2022. Of those 42 states, the following 16 states had no opposition bills filed in 2023 at all: Alaska, Arkansas, Colorado, Hawaii, Idaho, Mississippi, Nevada, New Mexico, North Dakota, Oklahoma, Rhode Island, South Dakota, Utah, Virginia, Washington, and Wyoming.

California, Georgia, and Ohio landed evenly with the same number of supported and opposed bills this year.

Only six states filed more bills that NVIC opposed than supported: Delaware,
Massachusetts, Michigan, Nebraska, New York, and Wisconsin. Delaware was the only
state in the U.S. where there were no bills filed worth supporting.



These numbers show us that the vast majority of states have legislators who are listening to constituent concerns. These conscientious lawmakers have responded to the unprecedented infringement on human rights and civil liberties that many Americans have endured during the federal COVID-19 pandemic response.

Highlights From 2023 Enacted Bills

There are significant and positive take away points from the 2023 legislative session:

More bills passed this year that NVIC supported than any other year.

No state legislature passed bills with COVID-19 mandates. The D.C. Council even rescinded their COVID-19 vaccine mandate for all public, private and parochial school students.

All COVID-19 related bills that passed have provisions to protect liberty.

No state legislature passed any bills mandating any type of vaccine.

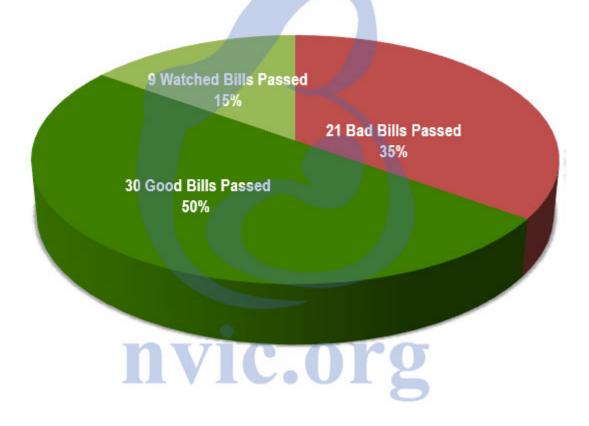
No state legislature passed any bills giving minors the legal authority to consent to vaccination on their own, without the knowledge or consent of their parents.

Only 4 out of the 21 NVIC opposed bills that passed fell outside of the topic of establishing or expanding the ability of pharmacists, pharmacy technicians, and pharmacy interns to give vaccines. Very little changed to move vaccine law sin the wrong direction outside of pharmacy bills.

2023 Enacted Bills

Out of the 60 vaccine-related bills that were enacted in 2023, NVIC supported 30, opposed 21, and watched 9. Of the 9 watched bills, 7 included positive elements worthy of support and two were watched because the provisions we opposed were successfully removed before the bills passed.

Total Bills Passed in 2023 = 60



NVIC has grouped the bills that passed into the following categories:

COVID-19 Vaccines: Stopping Mandates and Discrimination	Discrimination and Passport Ban for all Vaccines
Exemptions	Foster Care and Adoption
Free Speech	Liability
Mandates	Minor Consent
Parental Rights and Informed Consent	Pharmacists, Technicians, and Interns Vaccinating
Registries or Tracking	Visitation Rights Regardless of Vaccination Status

Wins: Opposed Language Removed

Vetoes

Veto Override

A handful of bills are included in more than one category. The breakdown and analysis of vaccine-related bills that passed in these designated categories identifies trends across the states.

Now more than ever, it is critical that people continue to be actively involved in the legislative process at all levels of city, county, state, and federal government. Participation includes learning where candidates stand on issues important to your family and voting accordingly.

You can help educate your legislators, your governor, and local officials in order to protect you right and the right of others to exercise informed consent and reject discrimination, segregation and forced vaccination.

Your voices matter and are impacting real change as you can see in this report. Positive bills that were passed protecting informed consent rights listed below.

COVID-19 Vaccines: Stopping Mandates and Discrimination

Businesses and government entities overstep in an abuse of power when they require patrons, employees, or citizens to receive injections of biological products that can injure or kill them and have unknown future consequences. No one should have to decide between providing for their family and taking a vaccine they don't want or need.

People need the protection granted by laws when government entities or private business violate informed consent rights, such as requiring use of a pharmaceutical product, which carries known and unknown risks that can be greater for some people, as a condition of holding a job, receiving medical care, getting a school education, or participating in society in everyday life.

While NVIC would prefer bills to be passed that would prohibit mandates and protect individuals from discrimination based on vaccination status for all vaccines, we still supported bills that were COVID-19 vaccine specific for several reasons including:

- When legislators learn about the problems with COVID-19 vaccines and policies, they realize these problems aren't COVID-19 vaccine specific and they may become open to more expansive protections later
- 2) The COVID-19 vaccine was the most mandated vaccine by employers and a bill prohibiting mandates and discrimination would immediately help a lot of people
- 3) The COVID-19 vaccine is devastating the lives of so many people. As of the 9/29/2023 release of data from the Vaccine Adverse Event Reporting System (VAERS), 36,324 deaths and 1,596,983 adverse events have been reported to VAERS associated with COVID-19 vaccines

There were 15 bills passed during this legislative session that affect the eight states of Arkansas, Florida, Georgia, Idaho, Louisiana, North Dakota, Tennessee, Texas, and the District of Columbia that prohibited COVID-19 vaccine mandates or vaccine passports. For all of the bills listed below, NVIC either supported them or the bills contained sections that NVIC supported.

Arkansas, HB 1002/SB 3 — Prohibit government from requiring COVID-19 vaccines or discriminating against or coercing an individual into consenting to take a COVID-19 vaccine

ENACTED, both HB 1002 and SB 3 becoming Act 10 and Act 4, respectively, effective on 9/14/2023

District of Columbia, B24-1070 — Delays COVID-19 Vaccine mandate for school students in Temporary Amendment

ENACTED as Law Number L24-0274, effective from 2/23/2023, expires on 10/6/2023

District of Columbia, B25-0377 — Removes requirement that DC students receive a COVID-19 vaccine, repeals Coronavirus Immunization of School Students
Temporary Amendment Act of 2022

ENACTED, signed by Mayor Muriel Bowser, Act Number A25-0200, effective immediately, expires 10/29/2023

District of Columbia, B25-0378 — Removes the student COVID-19 vaccine requirement, repeals the Coronavirus Immunization of School Students Temporary Amendment Act of 2022

ENACTED, Signed by Mayor Murial Bowser on 10/11/2023; Act Number A25-0224

Florida, HB 1015/SB 238 — Provide exemptions from public records requirements regarding individual's choices on COVID-19 vaccines/exemptions, sunsets in 2028 ENACTED, SB 238 signed by Governor Ron DeSantis 5/11/2023, Chapter 2023-42, effective 6/1/2023

Florida, HB 1013 / SB 252 — Prohibit business, government entities, and higher education from requiring a mask, or a COVID-19 test, vaccine, or proof of immunity with limited religious and medical exemptions, sets the mRNA vaccine ban to expire 6/2025

ENACTED, SB 252 was signed by Governor Ron DeSantis on 5/11/2023, Chapter number 2023-43, effective 6/1/2023 with exceptions

Georgia, SB 1 — Retains current law prohibiting state and local governments from requiring proof of COVID vaccination by removing the expiration date previously passed

ENACTED, signed by Governor Brian Kemp on 5/2/2023, effective date 5/2/2023, Act 254

Idaho, SB 1130 — Prohibits business from denying access or services based on COVID vaccination status, prohibits employee mandates unless required by federal law

ENACTED, signed by Governor Brad Little on 4/6/2023, Effective date 4/6/2023, Chapter 313

Louisiana, SR 117 — Memorializes Congress to pass AMERICANS Act of 2023 to reinstate any service member removed from any branch of military for refusing a COVID-19 vaccine

ENACTED, adopted by the Senate on 6/8/2023

North Dakota, SB 2274 — Expands the existing prohibition of COVID-19 vaccine passports by state government and private business to include EUA vaccines ENACTED, signed by Governor Doug Burgum on 4/19/2023, Effective date 8/1/2023

North Dakota, HB 1502 — Prohibits a hospital from denying health care treatment or services to an individual based on COVID-19 vaccination status ENACTED, signed by Governor Doug Burgum on 4/7/2023, Effective date 8/1/2023

Tennessee, HB 2/SB 11 — Remove expiration dates of July 1, 2023 on good, protective laws enacted concerning COVID-19

ENACTED, SB 11 was signed by Governor Bill Lee on 3/21/2023, effective date 3/21/2023, Public Chapter 48

Texas, HB 4174/SB 493 — Require any state veterans benefits to be available to members of the U.S. armed forces with less than honorable discharge for refusing COVID-19 vaccine

ENACTED, SB 493 signed by Governor Greg Abbott on 6/18/2023, effective 6/18/2023

Texas, HB 5027/SB 29 — Prohibit governmental entities from requiring COVID-19 vaccines or closing schools or businesses to prevent the spread of COVID-19 ENACTED, SB 29 Signed by Governor Greg Abbott on 6/2/2023, effective 9/1/2023 There were an additional 33 states that had bills filed to prevent some type of COVID-19 vaccine mandate or discrimination based on vaccination status that unfortunately did not pass.

These states were Arizona, California, Colorado, Connecticut, Hawaii, Illinois, Indiana, Iowa, Kansas, Kentucky, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Nebraska, Nevada, New Jersey, New York, North Carolina, Ohio,

Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Virginia, Washington, West Virginia, and Wyoming.

The fact that 40 states and the District of Columbia had bills filed to stop COVID-19 vaccine mandates and discrimination to some degree shows that Americans voicing their concerns to their legislators has made a huge impact across the country.

Discrimination and Passport Ban for All Vaccines

An employer, the government, or a business should not be able to legally discriminate or retaliate against anyone for declining a vaccine they have decided they don't want or need. Some states, which have prohibited employer vaccine mandates or required exemptions to employer vaccine mandates, have seen employers make working conditions miserable for employees.

It is NVIC's position that protections only allowing employees to decline vaccination are not good enough. Anti-discrimination provisions must accompany legal protections prohibiting mandates.

Two states, Utah and Texas, passed bills with partial protection from discrimination based on vaccination status for all vaccines, not just COVID-19. NVIC opposed the exceptions to Texas HB 44 for transplant and cancer patients.

Utah, HB 131 — Prohibits discrimination based on vaccination or immunity status in places of public accommodation and by governmental entities/employers with exceptions

ENACTED, signed by Governor Spencer Cox on 3/15/2023, Effective date 5/3/2023, Chapter 275

Texas, HB 44/SB 303 — Prohibit Medicaid and Children's Health Insurance Program providers from refusing care to a participant based solely on vaccination status except for transplant and cancer patients

ENACTED, HB 44 Signed by Governor Greg Abbott on 6/12/2023, Effective 9/1/2023

Two states, Florida and Texas, had exemplary bills prohibiting discrimination over vaccination status for all vaccines for most areas in one's life, but these bills did not even receive a hearing.

Florida HB 305/SB 222 protect medical freedom, prohibit discrimination based on vaccination or immunity status for all vaccines, and require consent for the data in the state immunization registry to be shared outside of Florida.

Texas SB 304 prohibits vaccine mandates and discrimination based on vaccination or immunity status for all vaccines in almost all areas of life and provides penalties for violations. SB 304 contained the same language as SB 1669 from the 2021 legislative session that had a multi-hour hearing.

While both states passed varying degrees of protection from COVID-19 vaccine mandates, many citizens were justifiably disappointed with their state legislature's failure to pass legislation protecting residents from vaccine mandates and discrimination for all vaccines in all areas including employment, health care and insurance, and public accommodation.

This disappointment was compounded by the fact that some legislators in both states inaccurately claimed the bills that passed were protecting constitutional freedom and civil liberties, when in reality the protections were confined to COVID-19 vaccines only.

Nine states filed, but did not pass, bills to prevent mandates or discrimination over vaccination status for all vaccines to some degree: Maine, Michigan, Mississippi, Oklahoma, Oregon, Rhode Island, Vermont, Washington, and West Virginia.

Prohibiting mandates and discrimination based on vaccination status for all vaccines is important. Use of a pharmaceutical product is a personal medical decision that should have no bearing on one's ability to participate in society.

Exemptions

The use of biological products labeled vaccines should be an opt-in process that allows people the freedom to make informed choices without threats, coercion, or any kind of societal sanction or punishment.

Individuals should be able to exercise informed consent to use a pharmaceutical product or medical intervention that carries a risk of injury, death or failure without having to file an exemption or jump through other bureaucratic hoops, such as formally opting-out of vaccine mandates and government operated electronic vaccine tracking systems.

There is legitimate concern when state legislatures add exemptions to vaccine mandates in adult workplaces, the act of adding the exemption into state law is de facto state government endorsement of private businesses or government requiring use of a biological product as a condition of employment.

Informed consent rights are violated when government condones or encourages corporations, private businesses, and even within divisions of itself to require vaccination as a condition of employment.

While NVIC is opposed to vaccine mandates in state public health laws, the state legislatures which have codified and expanded vaccine exemptions, have helped many people who have religious, conscientious, or health condition reasons for not taking a vaccine to keep their jobs, stay in school, or continue to receive government services. Two states, New Mexico and Tennessee, passed bills this session expanding vaccine exemptions.

New Mexico, SB 81 — Allows a physician assistant or certified nurse practitioner to certify a medical exemption

ENACTED, signed by the Governor Michelle Lujan Grisham on 4/4/2023, Effective date 7/1/2023, Chapter 94

Tennessee, HB 252/SB 644 — Exempt home school students from immunization requirements, applicable to students attending nursery school, preschool, or K-12

ENACTED, HB 252 was signed by Governor Bill Lee on 4/28/2023, effective date 4/28/2023, Public Chapter 296

The state of Mississippi now has a religious exemption for school children. This was successfully accomplished through litigation and not legislation.

A federal court ruled that the First Amendment requires that the State of Mississippi afford its residents a religious exemption for their children to attend school without one or more state mandated vaccines. This went into effect in July of 2023. Mississippi parents can find the link to request a religious exemption form on the state health department website.

Foster Care and Adoption

Adoption and foster care are safety nets in our society to help children receive love and care when their birth parents are unable to provide that for them. It takes a special kind of commitment for someone to open up their hearts and home to these children.

Nobody should have their ability to adopt a child or provide foster care for them be contingent on themselves or anyone else in their family receiving vaccines. There are already shortages of viable homes for children in need of care that vaccination status should not be eliminating people from the pool of potential adoptive or foster care parents.

Three states, Indiana, Montana, and New Hampshire, passed bills protecting people from having vaccination status interfere with their ability to either adopt or provide foster care.

Indiana, SB 345 — Prohibits a licensed child placing agency from requiring vaccination as a condition for adoption or discriminating based on vaccination status

ENACTED, signed by Governor on 4/20/2023, Effective date 7/1/2023; Public Law Number 45

Montana, HB 684 — Prohibits courts from using vaccination status in various legal proceedings concerning child abuse, custody, adoption & guardianship ENACTED, signed by Governor Greg Gianforte 4/26/2023, Effective 4/27/2023, Chapter Number 286 [Also included in Parental Rights and Informed Consent]

New Hampshire, HB 408 — Requires vaccine exemption rights and non-altered vaccine schedule for children living in foster home who are not foster children ENACTED, signed by Governor Sununu & effective 8/4/2023; Chapter 193

NVIC supported two Indiana bills addressing this problem of vaccines being a requirement for a family wanting to provide foster care: HB 1164 and SB 272. These did not pass. Bills have been filed in Indiana since 2021 to prevent vaccination status being a requirement for both adoption and foster care.

Preventing vaccination status discrimination in the adoption and foster care process is a worthy cause to pursue in every state.

Free Speech

The First Amendment to the Constitution formally recognized the natural and inalienable right of Americans to think and speak freely. Throughout the COVID-19 pandemic, people around the world witnessed or personally experienced the dangers of censorship. People were denied access to information challenging the safety, efficacy, and necessity of COVID-19 vaccines and treatments by their doctors, the media, and on social media.

On September 30,, 2022, Governor Gavin Newsom signed California AB 2098 which subjected doctors to board discipline and loss of licensure for providing COVID-19 advice or treatment outside of the so-called "scientific consensus." Lawsuits were filed.

AB 2098 was repealed in 2023. California SB 815 was initially filed to amend existing law governing healing arts professions and vocations regulated by various boards within the Department of Consumer Affairs, including the Medical Board of California and the

Dental Board of California. It was further amended to repeal AB 2098 and passed into law.

This was a big win for California doctors and their patients as doctors were no longer prevented from telling patients their honest opinions about COVID-19 vaccines and treatments.

California, SB 815 — Repeals Business & Professions Code Section 2270 that censored doctors accused of providing COVID-19 medical misinformation (from 2022 bill AB 2098)

ENACTED, signed by Governor Gavin Newsom on 9/30/2023, Chapter 294, Statutes of 2023

Liability

Two states, Minnesota and Texas, passed very different bills affecting liability of businesses regarding vaccination.

Because of the liability protections afforded to vaccine providers in federal laws, it is already nearly impossible to sue vaccine providers for injuries and deaths. Minnesota further restricts claims against a health care provider to only one year post death with the passage of HF 2890 which NVIC opposed. Adjusting to losing a loved one is hard enough without having to pursue a lawsuit within the legislated restriction of one year.

Minnesota, HF 2890/SF 2909 — Restrict statute of limitations for claims against health care providers for vaccination and other issues to one year post death during peacetime emergency

ENACTED, HF 2890 was signed by Governor Tim Walz on 5/19/2023, Effective date 5/20/2023, Chapter number 52

During the COVID-19 pandemic, many businesses mandated the COVID-19 vaccine out of fear of being liable for injuries and deaths of their employees or patrons from COVID-19 disease if they did not mandate the vaccine.

Texas was unable to pass a bill prohibiting private employer mandates by the time this report was written, but some legislators helped business owners, who do not want to mandate a vaccine during a future pandemic, by protecting those businesses from lawsuits because they allow employees to exercise informed consent to vaccination.

NVIC supported Texas HB 609 because it protects businesses willing to protect their employees' right to informed consent in vaccination decisions now and in the future.

Texas, HB 609 — Protects businesses from liability for injuries and deaths from pandemic diseases when the business doesn't require employee vaccination ENACTED, Signed by Governor Greg Abbott on 5/24/2023, Effective date 9/1/2023

Mandates

Not a single state legislature passed any bills containing a vaccine mandate for any disease, including COVID-19, in the 2023 legislative session. This is significant, especially considering that Missouri, New York, and Texas had a total of 15 bills that attempted to mandate vaccines or authorized certain entities to mandate vaccines. None of these bills had passed by the time this report was written.

One bill that passed, California AB 659, started as an HPV vaccine mandate without a personal belief exemption for public and private school students entering 8th grade. The bill was amended to remove the HPV mandate, but the final language still attempts to pressure students into getting the HPV vaccine. NVIC opposed AB 659 as filed and continued to oppose it throughout the legislative process.

What makes the passage of AB 659 concerning, even without the HPV vaccine mandate, is that AB 499 passed in 2011. AB 499 allows children 12 years old and older can get vaccinated for HPV and other STDS without parental consent.

The actions required by AB 659 could easily confuse and coerce preteens and teens into consenting to get vaccinated on their own against their parents' wishes. Preadolescents and teens lack the critical thinking skills to be able to fully understand the

ramifications of a decision involving risk and are vulnerable to peer and authority figure persuasion.

Parents in California, who do not want their children to receive the HPV vaccine, should be aware of this law and the extra pressure their children will be under to take this vaccine without the knowledge or consent of their parents.

California, AB 659 - Requires student notification advising them to adhere to health agency HPV immunization guidelines, makes questionable claims about vaccine safety and effectiveness

ENACTED, Signed by Governor Gavin Newsom and effective on 10/13/2023, Chapter 809, Statutes of 2023

Minor Consent

NVIC is pleased to report that no minor consent bills passed in the 2023 legislative session. NVIC is strongly opposed to any proposed legislation that would allow a child to consent to vaccination on their own without their parents' knowledge or consent.

As parents become more educated about vaccines and their risks, doctors are becoming more frustrated with the extra time it takes to answer questions about vaccines. Parents become frustrated because doctors don't always provide meaningful answers and often become angry and threaten to throw families out of the medical practice if they do not agree to receive every federally recommended vaccine according to the CDC's childhood vaccine schedule.

Circumventing the parents' informed consent rights regarding medical decisions for minor children and going directly to the child, who could be easily swayed by a medical authority figure, is a persistent strategy employed by mandatory vaccination lobbyists even though they have faced strong resistance from parents and legislators.

Minor consent to vaccination is still a hot topic this session in seven states where 11 bills were filed attempting to allow minors to consent to vaccines on their own. NVIC opposed all of these bills.

Connecticut, HB 5480 — Allows minor children 12 years old and over to receive a vaccine without the consent of a parent or guardian

Massachusetts, H.2151/S.1458 — Restrict medical and religious exemptions, expands minor consent, expands vaccine tracking and reporting

Maryland, SB 378 — Allows minors 14 and older to consent to vaccines, denies them the ability to decline vaccines to which a parent consents

North Carolina, SB 560 — Enables minor consent for STD vaccines as part of a larger bill that prohibits gender transition procedures on minors by providers unless specific requirements are met (NVIC does not take a position on parts of the bill unrelated to vaccines)

New Jersey, A2679 — Permits a minor,14 years of age and older, to consent to vaccination on their own without the consent of their parent or guardian

New York, A276B/S762A — Allow minors to receive preventative treatment for STDs including vaccination without parental knowledge or consent

New York, A6761 — Removes parental rights for medical/vaccination decisions, allows minors to choose without parental knowledge or consent, requires insurance coverage

New York, \$6103 — Allows health care practitioners to vaccinate minors 14 years and older without parental knowledge or consent

Vermont, S.151 — Allows minors 12 and older to consent to preventive services for sexually transmitted infections including vaccination

Families concerned about efforts to pass minor consent laws in their state should regularly monitor their state page on the NVIC Advocacy Portal throughout the year to know when to take action to oppose these bills.

Parental Rights and Informed Consent

To counter legislative attempts to erode or eliminate parental rights, five states passed legislation to strengthen parental rights and informed consent regarding vaccination. Idaho passed two bills that NVIC supported.

Idaho, SB 1005 — Requires licensed daycare facilities to describe exemptions with citation to code section in any communication to parents and guardians about immunization

ENACTED, signed by Governor Brad Little on 3/21/2023, Effective date 7/1/2023, Chapter 72

Idaho, SB 1029 — Prohibits child abuse investigations and courts from terminating parental rights based on vaccination status

ENACTED, signed by Governor Brad Little on 2/27/2023, Effective date 7/1/2023, Chapter 10

Montana passed two bills expanding parental rights and informed consent, but both bills opened up areas in existing law regarding vaccination that need significant improvement. NVIC had the following two bills in the "watch" position while we advocated for amendments, although changes were not made.

Montana, HB 676 — Expands and clarifies current parental rights law but fails to fix current law allowing minor consent to vaccination, missed opportunity to stop minor consent in existing law

ENACTED, Signed by Governor Greg Gianforte on 5/18/2023, Effective date 5/18/2023, Chapter Number 527

Montana, HB 715 — Requires schools provide vaccine exemption information but retains restricted religious exemption and no conscientious exemption added, missed opportunity to fix exemption

ENACTED, signed by Governor Greg Gianforte on 5/18/2023, Effective date 7/1/2023, Chapter Number 534

Montana passed one bill that NVIC supported which significantly protects parents' rights by prohibiting their decision to delay or decline vaccination from negatively

affecting other various legal rights.

Montana, HB 684 — Prohibits courts from using vaccination status in various legal proceedings concerning child abuse, custody, adoption & guardianship ENACTED, signed by Governor Greg Gianforte 4/26/2023, Effective 4/27/2023, Chapter Number 286 [Also in Foster Care and Adoption]

New York and Tennessee passed bills that NVIC supported that would prevent minor consent by requiring parental consent to vaccination. While the New York bill only applied to children who have run away from home, Tennessee SB 1111 was enacted, applies to all children, and requires written parental consent.

New York, A4014/S832 — Prohibit minors who are runaways from consenting to medical services without consent of a parent or guardian ENACTED, S832 was signed by Governor Kathy Hochul on 3/24/2023, Effective date 3/24/2023, Chapter 107

Tennessee, HB 1380/SB 1111 — Require prior written informed consent of parent or guardian before a minor can be vaccinated ENACTED, SB 1111 was signed by Governor Bill Lee on 5/17/2023, effective date 5/17/2023, Chapter 477

North Carolina passed a bill that NVIC supported to affirm the right of parents to have the final say over what vaccines their children receive.

North Carolina, SB 49 — Enacts the Parents' Bill of Rights, includes the right of parents to exempt their children from vaccine requirements as allowed in state law ENACTED, Governor's veto overridden & effective on 8/16/2023; Ch. SL 2023-106

North Dakota passed a bill that NVIC supported to enhance the education available to parents regarding vaccine adverse events and the federal government's Vaccine Adverse Event Reporting System (VAERS). This information is now easier to find in North Dakota and can be used by parents to make better informed vaccination decisions by helping them to better understand the risks.

North Dakota, HB 1207 — Requires the Department of Health to maintain a website with instructions how to submit vaccine adverse events and access state specific data on VAERS

ENACTED, signed by Governor on 4/21/2023, Effective date 8/1/2023; Chapter 23-

The twenty-four states of Alabama, Arizona, Colorado, Indiana, Iowa, Maryland, Maine, Minnesota, Missouri, Montanna, Nebraska, New Hampshire, New Jersey, New York, North Carolina, North Dakota, Oklahoma, Oregon, Rhode Island, South Carolina, Texas, Virginia, Vermont, and Washington all had bills filed that would have expanded parental rights and informed consent regarding vaccination that did not pass.

Some of these bills are still active and some will carry over into next session. The rest of the bills died and would need to be refiled next session. You can view these bills and action you can take on those state pages at NVICAdvocacy.org.

Pharmacists, Technicians, and Interns Vaccinating

The thirteen states of Connecticut, Delaware, Georgia, Illinois, Kansas, Maine, Michigan, Missouri, Montana, Nebraska, New Hampshire, Oregon, and Vermont passed bills establishing or expanding law permitting pharmacists, pharmacy technicians, or pharmacy interns to vaccinate. In several states, very young children are allowed to be vaccinated in a pharmacy. NVIC opposed these bills.

There is legitimate concern that pharmacists, pharmacy technicians and pharmacy interns have less training than doctors or nurses in terms of identifying and screening out children and adults, who are potentially at high risk for suffering vaccine reactions and should not be vaccinated, and for recognizing and ultimately reporting serious health problems, injuries and deaths following vaccination to the federal Vaccine Adverse Event Reporting System (VAERS).

It is unlikely that pharmacy personnel will follow up with injured vaccine recipients and advise parents and patients about the statute of limitations and instructions for filing a

claim with the National Vaccine Injury Compensation Program or the Countermeasure Injury Compensation Program.

The addition of pharmacy technicians to those who can administer vaccines is especially concerning because many states don't require pharmacy technicians to graduate from high school, accepting a GED certificate instead. Neither of these provide sufficient education to vaccinate. Pharmacy technician training on administering vaccines usually consists of one or two hours.

Below is a list of bills that passed establishing or expanding law permitting pharmacists, pharmacy technicians, or pharmacy interns to vaccinate.

Connecticut, SB 1102 — Allows pharmacists and pharmacy technicians to vaccinate adults & children 12 and older with parental consent

ENACTED, signed by Governor Ned Lamont on 6/7/2023, Public Act 23-19, effective 7/1/2023

Delaware, SB 165 — Permits pharmacists to vaccinate minors and requires pharmacies report to DELVAX registry within 72 hours ENACTED, signed by Governor John Carney & effective 8/17/2023; Public Law Number 169 [Also in Registries or Tracking]

Georgia, HB 416 — Authorizes pharmacy technicians to administer adult vaccines to individuals 18 years or older, bill requires minimum of 2 hours of training ENACTED, signed by Governor Brian Kemp on 5/2/2023, Effective date 5/2/2023, Act 251

Illinois, HB 559 — Allows pharmacists to administer influenza and COVID-19 vaccines to patients 7 years and older and delegate these tasks to pharmacy student or technician

ENACTED, Public Act 103-0001, effective date 4/27/2023

Kansas, SB 131 — Authorizes pharmacy technicians to administer certain vaccines to children 6 years and older

ENACTED, Signed by Governor Laura Kelly on 5/9/2023

Maine, LD 899 (HP 555) — Authorizes supervised pharmacy technicians to administer vaccines, reduces vaccine administration training requirements ENACTED, signed by Governor Janet Mills on 6/22/2023, Effective date 6/22/2023, Chapter 245

Maine, LD 1151 (SP 478) — Authorizes pharmacists and pharmacy techs to administer vaccines without a prescription, lowers patient age from 18 years to three years

Emergency ENACTED, Signed by Governor Janet Mills on 6/15/2023 and effective 6/15/2023; Chapter 170

Michigan, SB 219 — Allows pharmacist to vaccinate without doctor's order patients three years old and older with FDA and EUA approved vaccines ENACTED, Signed by Governor Whitmer on 7/18/2023, Public Act 97 of 2023, effective 7/20/2023

Missouri, SB 45 — Increases pharmacist authorization to order and administer FDAapproved or authorized vaccines to persons seven years of age or older, part of larger bill

ENACTED, signed by Governor Mike Pearsons on 7/7/2023, effective 7/7/2023

Missouri, SB 157 — Authorizes pharmacists to order and administer certain FDA-approved or authorized vaccines to persons at least seven years of age or older ENACTED, signed by Governor Mike Parsons on 7/6/2023, effective 8/28/2023, Sections 338.010 and 338.012

Montana, HB 710 — Authorizes a pharmacist to delegate administration of immunizations to a pharmacy intern or technician ENACTED, Signed by Governor Greg Gianforte on 4/20/2023, Chapter Number 216, effective 4/20/2023

Nebraska, LB 227 — Authorizes pharmacy technicians to administer vaccines to children three years and older, part of larger public health and welfare bill ENACTED, Signed by Governor Jim Pillen on 6/6/2023, Effective date 6/6/2023

New Hampshire, SB 35 — Authorizes pharmacists, pharmacy interns, and licensed advanced pharmacy technicians to administer an RSV vaccine to adults ENACTED, Signed by Governor Christopher Sununu on 6/1/2023, Effective 6/1/2023, Chapter 53

Oregon, SB 2486 — Authorizes pharmacy technicians to administer vaccines to persons seven years old and older

ENACTED, signed by Governor Tina Kotek, effective on 7/18/2023, Chapter 306

Oregon, HB 2278 — Authorizes pharmacists to administer influenza vaccine to persons six months of age or older

ENACTED, Chapter 240, effective 9/24/2023

Vermont, H.305 — Authorizes duties for regulated occupations including pharmacy technicians to give certain vaccines to adults and some children

ENACTED, Governor's veto overridden by House and Senate on 6/20/2023

On the positive side, ten states filed bills establishing or expanding law permitting pharmacists, pharmacy technicians, or pharmacy interns to vaccinate that were not passed. These states are: Alabama, Louisiana, Maryland, Minnesota, New York, North Carolina, Ohio, South Carolina, Tennessee, and Texas.

However, bills in Kansas, Minnesota, South Carolina, and Tennessee carry over until next year, so there is still an opportunity to express your concerns to you legislators in those states to stop these bills.

Registries or Tracking

NVIC has opposed the mandatory inclusion of Americans in government operated electronic vaccine and health records tracking systems since the 1990s. Once any personal medical information is entered into a state government database, federal law

allows that information to be shared with other entities without knowledge or consent for the purpose of conducting public health surveillance, investigations, research, or interventions, and for other purposes.

See 45 CFR 64.512(b)(2) and see a list of core data elements that can be gathered and included in electronic vaccine tracking registry systems.

Electronic vaccine tracking registries that mandate automatic inclusion, reporting, and are opt-out systems - rather than voluntary opt-in – are a threat to medical privacy. Electronic vaccine tracking registries and mandatory vaccination systems continue to jeopardize the legal right of Americans to decline one or more government recommended vaccines without being subjected to coercion or societal sanctions.

NVIC is prioritizing legislation that includes opt-in informed consent protections in electronic vaccine tracking registries and removes public funding for vaccine registries that do not include opt-in informed consent protections. New Hampshire changed their tracking system to opt-in with HB 1606 in 2022. We encourage those reading this report to reach out to their legislators and ask them to file legislation that protects medical privacy.

NVIC opposed three vaccine tracking bills passed in Delaware, New York, and Texas that expanded some part of existing vaccine tracking laws. For more information on these bills, click on the links below.

Delaware, SB 165 — Permits pharmacists to vaccinate minors and requires pharmacies report to DELVAX registry within 72 hours ENACTED, signed by Governor John Carney & effective 8/17/2023; Public Law Number 169 [Also in Pharmacists, Technicians, and Interns Vaccinating]

New York, A4132/S83 — Change the confidentiality of personal information in the forced inclusion vaccine registry, COVID-19 Vaccine Record Card accepted the same as immunization passport

ENACTED, Signed by Governor Kathy Hochul on 3/24/2023, Chapter 109

Texas, HB 2802/SB 112 — Change Medicaid recipient's notifications for vaccine reminders from opt-in to opt-out

ENACTED, HB 2802 signed by Governor Greg Abbott on 6/11/2023, Effective 9/1/2023

Visitation Rights Regardless of Vaccination Status

It was not uncommon during the COVID-19 pandemic for family and close friends to be blocked from visiting loved ones in hospitals, nursing homes, and long-term care facilities.

It has been well established that social isolation and loneliness leads to poor health outcomes. Florida took the lead in putting an end to damaging discrimination by passing Florida SB 988 in 2022, a law which prohibits health care facilities from preventing visitation of in-patients based on a visitor's vaccination status.

Five states, Alabama, Idaho, Louisiana, Montana, and Utah, took the lead on this issue in the 2023 legislative session by passing bills that would protect the right of visitors of certain care facilities to not be discriminated against or denied admittance based on their vaccination status for any vaccine. NVIC supported all of these bills.

Alabama, SB 113 — Requires health care facilities to adopt visitation policies which prohibit vaccination requirements for visitors, unaffected by emergency orders ENACTED, Signed by Governor Kay Ivey 4/18/2023, effective 4/18/2023, Act No. 2023-24

Idaho, HB 244 — Prohibits assisted living health care facilities from precluding inperson visitation based on a visitor's vaccination status ENACTED, signed by Governor Brad Little on 3/30/202, Effective date 7/1/2023. Chapter 202

Louisiana, HB 291 — Requires hospitals to establish visitation policies that include prohibiting proof of vaccination among other things

ENACTED, Signed by Governor John Bel Edwards on 6/14/2023, effective date 8/1/2023. Act No. 367

Montana, SB 308 — Establishes the Patient Visitation Rights Act, prohibits a care facility from restricting visitation based on vaccination status ENACTED, signed by Governor Greg Gianforte on 5/3/2023, effective 10/1/2023, Chapter Number 406

Utah, HB 133 — Requires health care facilities to establish visitation policies that include prohibiting proof of vaccination, among other things ENACTED, signed by Governor Spencer Cox on 3/15/2023, Effective date 7/1/2023, Chapter 276

Alaska, Kansas, Maine, New Jersey, Nevada, South Dakota and Virginia also tried to pass bills protecting visitation rights regardless of vaccination status, but those bills did not pass. The good news for residents in Alaska, Kansas, and New Jersey is their bills either carry over into 2024 or their legislature is still in session, and there is still time to ask your legislators to support Alaska HB 52, Kansas HB 2161, and New Jersey \$2520.

Wins: Bills NVIC Opposed as Introduced, but Offensive Language Was Removed

There were two bills this session NVIC originally opposed that were amended in response to NVIC's concerns removing the sections that NVIC opposed before passing. This allowed our position to be changed from "OPPOSE" to "WATCH."

California, SB 541, WATCH, Expands availability of condoms to minors for STD prevention (Originally, this bill was filed expanding the Family Planning, Access, Care, and Treatment (PACT) program to include HPV vaccine coverage for minors and this HPV vaccination coverage section was removed from the bill by an amendment added on 9/1/2023)

The bill was ultimately VETOED by Governor Gavin Newsom on 10/8/2023, but that was not of concern to us because the bill no longer fell under NVIC's scope of legislation we cover.

New York, A6030C/S6886, WATCH — Allow hospitals to create a standing order for hospital patients (Originally, this bill was filed allowing hospitals to create a standing order for COVID-19 vaccination for hospital patients, and a 5/18/2023 amendment removed vaccines from standing orders)

ENACTED, Signed by Governor Kathy Hochul on 7/19/2023, effective 7/19/2023. Chapter 193

Vetoes

It is more difficult to pass a good bill than to stop a bad one. There have been vaccinerelated bills NVIC supported and state legislatures spent a significant amount of time developing and voting to pass, only to have a governor veto them. Governors of three states vetoed 5 bills that NVIC supported and their legislatures passed this session. For more information on these bills, please click on the bill links below.

Arizona, HB 2474 — Prohibits EUA (Emergency Use Authorization) vaccines from being required for school attendance

VETOED by Governor Katie Hobbs on 4/18/2023

Arizona, SB 1250 — Expands religious exemptions for employer mandates to include influenza and EUA vaccines, prohibits inquiry and discrimination, provides penalties

VETOED by Governor Katie Hobbs on 3/30/2023

Kansas, HB 2285 — Limits authority of the Secretary of Health and Environment regarding COVID-19 vaccines for daycare, child care, or school, part of large licensing bill

VETOED by Governor Laura Kelly and session adjourned on 4/28/2023

LA, HB 399 — Requires that communications about vaccine requirements include exemption information and that exemptions apply to students both applying to and attending school

Died, Senate failed to override Governor John Bel Edwards' veto by required 2/3 majority, House voted to override veto

LA, HB 182 — Prohibits requiring a COVID-19 vaccine as a condition of enrollment or attendance at a public or nonpublic school, college or licensed daycare

Died, Override of Governor John Bel Edwards' veto failed in House on 7/18/2023

Veto Overrides

Many states allow a higher designated percentage of votes of legislators to override a veto by the state's governor. This procedure is part of the system of checks and balances in state government to not allow the governor too much power with a veto.

The state legislatures in North Carolina and Vermont overrode two bills that had been vetoed by their respective governors. The veto override helped those who supported North Carolina SB 49 along with NVIC after the governor vetoed it.

North Carolina, SB 49, SUPPORT — Enacts the Parents' Bill of Rights, includes the right of parents to exempt their children from vaccine requirements as allowed in state law

ENACTED, Governor's veto overridden & effective on 8/16/2023; Ch. SL 2023-106 [Also in Parental Rights and Informed Consent]

The veto override hurt those who opposed Vermont H.305 along with NVIC. NVIC supported the governor's veto after the bill passed, but the veto override enabled the bill to become law.

Vermont, H.305, OPPOSE — Authorizes duties for regulated occupations including pharmacy technicians to give certain vaccines to adults and some children ENACTED, Governor's veto overridden by House and Senate on 6/20/2023 [Also in Pharmacists, Pharmacy Technicians, and Pharmacy Interns Vaccinating]

Notable New Supportable Topics for Vaccine Legislation in 2023

There were some newer categories of bills filed in 2023 that are worth noting. Even though no bills were passed in these categories, more bills like these are likely to be refiled or newly filed in 2024 and beyond.

NVIC supported the following bills. These bills can be shared with legislators to consider filing in their own state.

Establishing Insurance Policies Without Mandated Vaccine Coverage

Texas HB 1001/SB 605 would create consumer choice options for insurance by eliminating state-mandated health benefit coverage, which could include vaccines. Policy holders who do not vaccinate would be able to purchase policies without paying for options they would not use, resulting in more affordable insurance coverage. In other words, non-vaccinating policy holders would not be required to pay increased insurance premiums for vaccine coverage.

Blocking the CDC or the WHO from Having Jurisdiction in a State

Iowa HF 507, Louisiana HB 372, Missouri HB 4859, Pennsylvania SB 618, and Wyoming HB 143 would all limit the Centers for Disease Control and Prevention or the World Health Organization from having jurisdiction in their states, including the authority to mandate vaccines.

Holding Pharma Accountable

Arkansas SB 8 holds vaccine manufacturer executive officers criminally liable when their acts or omissions cause individuals harm. While the National Childhood Vaccine Injury Act of 1986 prevents vaccine manufacturers from being held liable for civil damages for a person's death or injury caused by a vaccine unless there is evidence of fraud, SB 8 only limits criminal liability to executive officers. Therefore, SB 8 should not be preempted by federal law.

This type of bill seeks to hold pharmaceutical companies responsible for the harm they cause by withholding or omitting critical information about the vaccine's risks from the public. This bill passed the Senate but failed to pass the House.

Mississippi HB 1370 requires the state Attorney General to investigate pharmaceutical companies regarding their development, promotion, and distribution of vaccines purported to prevent COVID-19 infection, symptoms, and transmission and to specify certain criminal offenses that must be included in the scope of the investigation.

Missouri SB 500 establishes the application of a statewide grand jury to investigate wrong-doing relating to vaccinations against COVID-19 and issue indictments.

Protecting America's Food Supply from mRNA Technology and Vaccines

As lawmakers become more informed about genetically engineered biological products labeled vaccines and their impact on the biological integrity of humans and the environment, a number of bills are being introduced in state legislatures to address these concerns.

Arizona HB 2762 requires disclosure for products made from aquaculture, livestock, and poultry that received mRNA vaccines and prohibits these from being labeled as organic.

Idaho SB 1018 prohibits the manufacture, delivery, holding, or sale of any food that contains a vaccine unless the food was conspicuously labeled.

Idaho SB 1093 prohibits the manufacture or sale of any food that contains a vaccine or vaccine material targeted toward a consumer unless it is labeled.

Missouri HB 1169 requires conspicuous labeling for any product that has potential to act as gene therapy or that could introduce genetic material to a product's users.

North Dakota HB 1406 requires Department of Health to cover treatment of injury by any mRNA vaccine they promote and prevents mandates of medical products if the manufacturer is not liable.

Pennsylvania SB 741 requires conspicuous labeling with the words "Potential Gene Therapy Product" on any product that has been created to act as, or exposed to processes that could result in the product potentially acting as, a gene therapy, or

that could otherwise possibly impact, alter, or introduce genetic material or a genetic change into the user of the product, individuals exposed to the product, or individuals exposed to others who have used the product.

Pennsylvania SB 883 bans gene therapy products such as mRNA technology from being injected into Pennsylvania's food supply.

Tennessee HB 32/SB 88 prohibit the manufacture, sale, or delivery, holding, or sale of any food that contains a vaccine unless it is conspicuously labeled.

Tennessee HB 299/SB 99 prohibit the manufacture, sale, or delivery, holding, or sale of meat that contains a mRNA vaccine or material unless it is conspicuously labeled.

Tennessee HB 842/SB 369 remove the requirement for livestock vaccines, allow mRNA vaccine-free meat labeling, and remove the Agriculture Commissioner's authority to order livestock vaccines.

Texas SB 2632 prohibits food containing mRNA vaccine material from being sold in Texas unless its conspicuously labeled.

Prohibiting Vaccination Status from Interfering with Organ Transplants

Organ transplant applicants, who are denied a transplant or are discriminated against in the selection process based on their vaccination status, is not a new issue this session, but it is still a very important one.

NVIC supported several bills that would prohibit individuals who decline vaccination from being discriminated against and denied an organ transplant based solely on their vaccination status. While there are multiple bills filed this session which are COVID-19 vaccine specific, NVIC supports bills that include broader protections for all vaccines.

There were 4 states, New Jersey, North Carolina, Tennessee, and West Virginia that had bills that would apply to all vaccines.

New Jersey A3919 prohibits the refusal to perform an organ transplant or the lowering of the ranking of an applicant of an organ transplant based on their vaccination status.

North Carolina HB 567/SB 375 prohibit vaccination status from being used by health care providers to deny any emergency treatment.

Tennessee HB 377/SB 585 establish the Patient Rights Act and include sections to prohibit discrimination based on vaccination status by health care facilities and with transplants.

West Virginia HB 2376 ensures that hospitals do not provide lesser treatment to unvaccinated individuals as opposed to vaccinated individuals.

Warning on New Topic of Assuming Consent to Vaccination

There is an attempt by "no exceptions" mandatory vaccination proponents to introduced bills that that would allow "the assumption of consent" to vaccination. NVIC opposes bills that pose a threat to autonomy and protection of bodily integrity.

Oregon SB 793 creates the dangerous presumption that a protected person consents to "ordinary" and "necessary" immunizations in the judgment of the treating health care provider. This presumption may be overcome by "clear and convincing evidence" that the protected person would withhold consent to specific treatment, if able, and directs the guardian to petition court for instructions in these circumstances.

NVIC OPPOSES SB 793 because immunizations are not "ordinary" and "necessary" and should not be codified as such in Oregon law for any person. Vaccines are pharmaceutical products that carry risk of injury and death and should not be included under "ordinary" health care without the affirmative consent of the individual or their parent or guardian. Consent should not be allowed to be presumed or assumed by the health care provider.

Oregon voters passed Measure 111 in 2022 amending the Oregon Constitution to affirm access to health care as a constitutional right. Implicit in this right must be the right to refuse medical care. This right to autonomy and protection of bodily integrity does not disappear when a person is placed under guardianship.

However, many medical professionals maintain an outdated paternalistic approach when providing health care for individuals under guardianship. This can lead to a significant difference in how a medical professional would interpret the phrase "ordinary and necessary."

SB 793 would allow for medical professionals to rationalize any and all risk of vaccination for a protected person as "necessary" and presume that the protected person would consent to immunization in spite of these risks. The presumption of consent undermines the autonomy of an individual and the people legally appointed to make decisions on their behalf.

Compounding this erosion of autonomy, the burden of overriding a physician's opinion is onerous. The "clear and convincing" standard is far too high, requiring the protected person or a guardian to prove not only that it is more likely than not that the protected person would refuse the recommended treatment if able, but that the evidence shows it is highly probable.

This excessively high burden for the protected person or a guardian to meet is also time-consuming and can be expensive. This is a dangerous bill that puts medical ethics on a very slippery slope. NVIC is pleased to report that Oregon SB 793 died in the 2023 legislative session.

Comparing Recent Sessions to 2023

The 2023 legislative session found NVIC tracking 709 vaccine-related bills, which is the second most in the history of the NVIC Advocacy Portal. This was less than the 875 bills in 2022, but higher than the previous all-time high of 473 bills filed in 2021, and 232 bills introduced in 2020.

It is important to note that this is the first session in the history of the advocacy program at NVIC that bills in all 50 states and the District of Columbia have been tracked on the NVIC Advocacy Portal. The lingering effects of the aggressive COVID-19 pandemic response by federal health officials has dramatically escalated interest in vaccine related legislation in all states.

2023's legislative session had the highest percentage, 63%, of NVIC supported bills compared to total number of bills filed. This is higher than the 54% in 2022 and 59% in 2021. Prior to 2021, all percentages of support bills compared to total bills were less than 50%.

NVIC opposed 158 bills in 2023. This number dropped from the 186 opposed in 2022, but is still higher than the 130 in 2020 and 137 in 2021. One bright spot is that legislators filed fewer bills that NVIC opposed this year.

Because of the recent increased push to give pharmacists, pharmacy technicians, and pharmacy interns the authorization to vaccinate, this is the first year NVIC has uniformly opposed these bills across all states. One factor in this decision was to raise awareness about this concerning trend to move vaccination, especially for young children, away from medical providers.

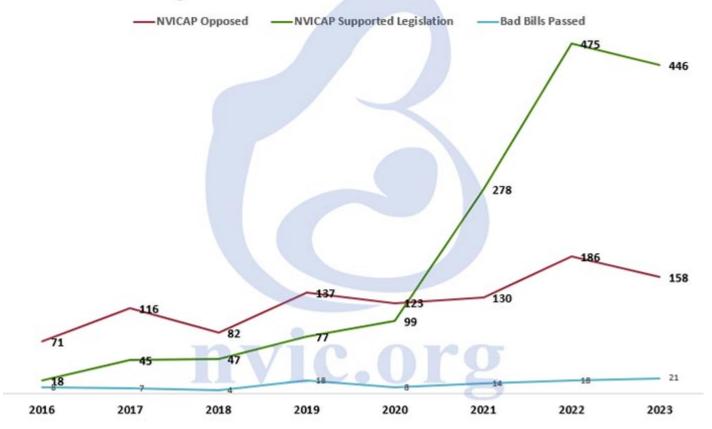
Interestingly, of the 21 bills passed this year that NVIC opposed, 17 of them were bills related to establishing or expanding pharmacy administered vaccines. The remaining four bills that NVIC opposed that passed were outside of the pharmacy category.

The positive takeaway from this is that, outside of pharmacy related bills, the 2023 legislation session represents NVIC's most successful session helping to defeat legislation threatening vaccine informed consent rights in America.

It was encouraging that NVIC was able to support 446 vaccine-related bills filed in 2023. This was the second highest amount filed in any session and only 29 less than the 475 total bills filed in 2022. This is a huge jump compared to the 278 bills supported in 2021, and the 99 bills supported in 2020. The gap between supported and opposed bills widened significantly.

This trend maintained over the last three years because more families, health care providers, and lawmakers recognize the need to secure vaccine informed consent protections in public health policies and laws.

Growth in Vaccine Informed Consent Advocacy Surges Ahead of Restrictions and Mandates



Enlightened legislators are listening to concerned constituents in greater numbers and resisting aggressive lobbying efforts by the pharmaceutical industry, medical trade, government health officials, and other special interest groups, who benefit from laws that compel children and adults to use every vaccine sold by drug companies and recommended by federal health agencies and medical trade associations.

Individual citizen involvement in the legislative process, through personal communications and education of lawmakers, continues to make a tremendous impact on the outcomes of vaccine related bills filed in state legislatures.

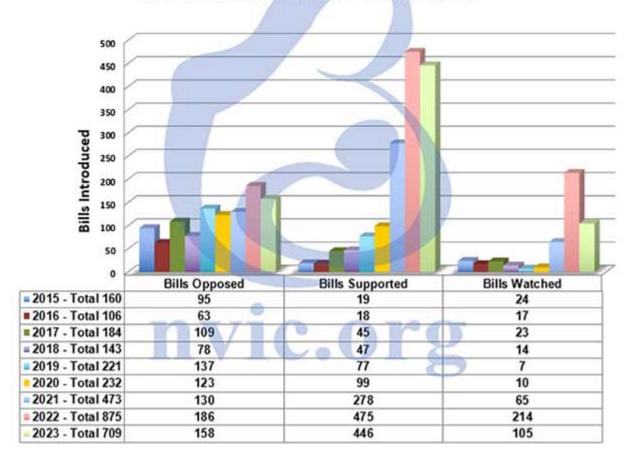
Although federal government officials attempted to influence state COVID vaccine policies in the last three years, more state legislators became aware of not only

evidence demonstrating the negative health effects of COVID-19 vaccines, but risks with other vaccines on the federally recommended vaccination schedules as well.

NVIC predicts that lobbying efforts by the vaccine and medical trade industries and federal government officials will continue to push children and adults to get COVID vaccinated and boosted and to add new vaccines to state vaccine mandates. It will be important for more Americans in every state to get involved in the legislative process at every level to protect their informed consent rights.

Vaccine Related Legislation Trends





What Else Can You Do?

If you see bills in this report or on the NVIC Advocacy Portal that you would like to have filed in your state, we encourage you to send this information to your state legislators.

NVIC Advocacy staff are here as a resource if any legislators or their aides have questions and would like to get more information.

Please join the tens of thousands of Americans working with NVIC to hold the line and advance protections in the states. Please become a registered user of the free online NVIC Advocacy Portal today and check in often to learn about ways to personally educate your legislators when vaccine bills that affect your rights are moving in your state. Please encourage your family and all of your friends to do the same.

Also, register for our text alerts by texting the full name of your state to (202) 618-5488. Your active participation is vital to protecting informed consent rights and vaccine choices in America.

If you see inaccurate information in news media reports or online conversations, especially in light of all the censorship that has increased since 2020, please consider taking the time to respond by making a constructive comment on the public comment boards or writing to the author or newscaster directly.

You can also provide accurate, well referenced Diseases and Vaccines information and accurate state vaccine law information, which you can find on our website NVIC.org. NVIC's illustrated and fully referenced Guide to Reforming Vaccine Policy and Law is another excellent vaccine education tool for legislators, friends, and family members too.

NVIC has published many excellent referenced articles, commentaries and videos on vaccine science, policy and law posted on NVIC.org that you can use and forward. Be sure to also subscribe to the free weekly digital journal newspaper The Vaccine Reaction that features breaking news articles that can also be shared with legislators.

Everyone knows someone who has been affected by a vaccine reaction, and the information seeds you plant today can make a difference tomorrow and into the future.

As always, the challenges are great, but so are the opportunities to educate and empower legislators and residents of every state to defend vaccine freedom of choice.

NVIC is committed to continuing to make that happen, and we look forward to working with you through the NVIC Advocacy Portal to help you protect vaccine informed consent rights in your state in the remaining days of 2023, and in 2024 and beyond.