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pursuant to subdivision (1) of this subsection or fifty per cent.

Sec. 493. Section 19a-7h of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2022*):

(a) As used in this section, "health care provider" means a person who has direct or supervisory responsibility for the administration of a vaccine or assessment of immunization status, including a physician or physician assistant licensed pursuant to chapter 370, a nurse-midwife licensed pursuant to chapter 377, an advanced practice registered nurse or registered nurse licensed pursuant to chapter 378, a pharmacist licensed pursuant to chapter 400j, or an individual authorized under the general statutes or federal law to administer a vaccine.

[(a)] (b) The Commissioner of Public Health or [his] the commissioner's designee [may, within the limitations of available resources,] shall establish and maintain an immunization information system for the purpose of assuring [timely childhood] vaccine recipient's access to their immunization [an ongoing registry of all children who have not begun the first grade of school including all newborns] records. The [registry] immunization information system shall include such information as is necessary to accurately identify a [child] vaccine recipient and to assess such recipient's current immunization status.

[(b)] (c) [For purposes of this section, "health care provider" means a person who has direct or supervisory responsibility for the delivery of immunization including licensed physicians, nurse practitioners, nurse midwives, physician assistants and nurses.] Each health care provider who has [provided health care] administered a vaccine to a [child listed in the registry] person in the state shall report, [to] in a form and manner prescribed by the commissioner, or the commissioner's designee, [sufficient information to identify the child and] information, which shall include, but need not be limited to, (1) the name and date of birth

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of the vaccine recipient, (2) the name and date of each vaccine dose given to [that child or] the vaccine recipient, (3) any other information deemed necessary by the commissioner, and (4) when appropriate, contraindications or exemptions to administration of each vaccine dose. [Reports shall be made by such means determined by the commissioner to result in timely reporting.] Each health care provider shall provide to a vaccine recipient, a vaccine recipient's court-appointed guardian or conservator, if applicable, or, in the case of a child who received a vaccine, such child's parent or guardian information regarding how such vaccine recipient or such child may decline enrollment in the immunization information system.

(d) Each health care provider intending to administer vaccines to any [child listed on the registry and each parent or guardian of such child shall be provided] person may use the immunization information system to determine current information [as contained in the registry] on the immunization status of [the child] such person for the purposes of determining whether [additional doses of recommended routine childhood immunizations are needed] such person requires immunizations, or to officially document immunization status to meet state [day] child care, [or] school or higher education immunization entry requirements pursuant to sections 10-204a, 10a-155, 19a-79 and 19a-87b and regulations adopted thereunder.

(e) Each [director of health of any town, city or health district and each] school nurse who is required to verify the immunization status for children enrolled in prekindergarten to grade twelve, inclusive, at a public or private school in any town, city or school district pursuant to section 10-204a shall be provided with sufficient information on the children who live in [his or her] the school nurse's jurisdiction and who are listed on the [registry] immunization information system to enable determination of which children are overdue for scheduled immunizations and to enable provision of outreach to assist in getting

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each such child vaccinated.

(f) The commissioner, or the commissioner's designee, shall provide the director of health of any municipality or health district with sufficient information on the persons who live in such director's jurisdiction and who are listed on the immunization information system in order to address undervaccinated communities and improve health equity.

(g) The commissioner may use the information in the immunization information system for the purposes set forth in sections 19a-25 and 19a-215 and the regulations promulgated pursuant to said sections. The commissioner, or the commissioner's designee, may exchange information in the immunization information system with federal agencies providing health care services and other states' immunization information systems for the purposes described in this section.

(h) The commissioner shall provide to a vaccine recipient, a vaccine recipient's court-appointed guardian or conservator, if applicable, or, in the case of a child who received a vaccine, such child's parent or guardian access to any information that was provided by a health care provider to the Department of Public Health through the immunization information system regarding such person's vaccination status upon request by such recipient, guardian, conservator, parent or guardian.

[(c)] (i) Except as specified in subsections [(a) and] (b) to (h), inclusive, of this section, all personal information including vaccination status and dates of vaccination of [individuals] persons shall be confidential pursuant to section 19a-25 and shall not be further disclosed without the authorization of the [child or the child's legal guardian] vaccine recipient, the vaccine recipient's court-appointed guardian or conservator, if applicable, or, in the case of a child who received a vaccine, such child's parent or guardian.

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(j) The immunization information system shall comply with the National Centers for Disease Control and Prevention's Immunization Information System Functional Standards, as amended from time to time.

(k) The commissioner shall adopt regulations, [pursuant to] in accordance with the provisions of chapter 54, [to specify] to implement the provisions of this section, including, but not limited to, regulations specifying (1) how information on vaccinations [or exemptions from vaccination] and, when appropriate, contraindications or exemptions to administration of each vaccine dose, is reported in a timely manner to the [registry,] immunization information system, (2) how information on the [registry] immunization information system is made available to [health care providers, parents or guardians, directors of health and school nurses,] persons authorized to receive such information pursuant to subsections (b) to (h), inclusive, of this section, and (3) how [parents or guardians] a vaccine recipient, a vaccine recipient's court-appointed guardian or conservator, if applicable, or, in the case of a child who received a vaccine, such child's parent or guardian may decline [their child's] enrollment in the [registry, and to otherwise implement the provisions of this section] immunization information system.

(l) The commissioner shall, in consultation with the Office of Health Strategy, adopt regulations, in accordance with the provisions of chapter 54, to facilitate interoperability between the immunization information system and the State-wide Health Information Exchange established pursuant to section 17b-59d. The commissioner may implement policies and procedures necessary to administer the provisions of this section while in the process of adopting such policies and procedures as regulations, provided the department posts such policies and procedures on the eRegulations System prior to adopting them. Policies and procedures implemented pursuant to this section shall be valid until regulations are adopted in accordance with the

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provisions of chapter 54.

Sec. 494. Subsection (b) of section 19a-7f of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2022*):

(b) (1) Commencing October 1, 2011, one group health care provider located in Bridgeport and one group health care provider located in New Haven, as identified by the Commissioner of Public Health, and any health care provider located in Hartford who administers vaccines to children under the federal Vaccines For Children immunization program that is operated by the Department of Public Health under authority of 42 USC 1396s may select under said federal program, and the department shall provide, any vaccine licensed by the federal Food and Drug Administration, including any combination vaccine and dosage form, that is (A) recommended by the National Centers for Disease Control and Prevention Advisory Committee on Immunization Practices, and (B) made available to the department by the National Centers for Disease Control and Prevention.

(2) Not later than June 1, 2012, the Commissioner of Public Health shall provide an evaluation of the vaccine program established in subdivision (1) of this subsection to the joint standing committee of the General Assembly having cognizance of matters relating to public health. Such evaluation shall include, but not be limited to, an assessment of the program's impact on child immunization rates, an assessment of any health or safety risks posed by the program, and recommendations regarding future expansion of the program.

(3) (A) Provided the evaluation submitted pursuant to subdivision (2) of this subsection does not indicate a significant reduction in child immunization rates or an increased risk to the health and safety of children, commencing October 1, 2012, (i) any health care provider who administers vaccines to children under the federal Vaccines For